

Initial Application
 Amended Application
Date: 5-19-20



STATE OF ARIZONA
COMMITTEE STATEMENT RECEIVED
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

20-M-01

MAY 19 2020

TOWN CLERK
TOWN OF PAYSON

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): Morrissey for Mayor
(first or last name & office)

Candidate Information: Candidate's Name (required): Tom Morrissey
Candidate's mailing address (required): [REDACTED]
Candidate's email address (required): [REDACTED]
Candidate's phone number (required): [REDACTED]
Candidate's website (if any): _____

Office Sought (choose one): Governor Secretary of State Attorney General State Treasurer
 Superintendent of Public Instruction State Mine Inspector Corporation Commissioner
 State Senate State House of Representatives District (required): _____
 County Office: _____ District (if applicable): _____
 City/Town Office Mayor District (if applicable): _____

Election Cycle for Office Sought (year the election will take place) (required): 2020

Party Affiliation: Democrat Green Libertarian Republican Other: _____
(required for partisan offices)

Political Action Committee (PAC)

Committee Name (required): _____
(if sponsored, must include sponsor's name)

Political Function (optional): Contributions Candidate-Related Independent Expenditures
(select any that apply) Ballot Measure Expenditures Recall Expenditures

Sponsorship Information: Sponsor's name or nickname (required): _____
(if applicable) Sponsor's mailing address (required): _____
Sponsor's email address (required): _____
Sponsor's phone number (if any): _____
Sponsor's website (if any): _____

Special Status Separate Segregated Fund of a Corporation, LLC, Partnership, or Union
(if applicable) Standing Committee (must also complete separate standing committee registration)
 Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)

Political Party

Committee Name (required): _____
(must include party affiliation)

Jurisdiction: State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)
 County Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)
 Legislative District Party (must include proof of organization pursuant to A.R.S. § 16-823)
 City or Town Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)

Special Status Standing Committee (must also complete separate standing committee registration)
(if applicable)

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COMMITTEE INFORMATION:

Contact Information:
Committee's mailing address (required): Tom Morrissey
Committee's email address (required): TPMorrissey38@gmail.com
Committee's phone number (if any): 602 319-5103
Committee's website (if any): _____

Chairperson's Information:
Chairperson's name (required): Tom Morrissey
Chairperson's physical address (required): 800 N Briarwood Rd Payson AZ
Chairperson's mailing address (if different): _____
Chairperson's email address (required): TPMorrissey38@gmail.com
Chairperson's phone number (required): 602 319-5103
Chairperson's employer (required): Town of Payson
Chairperson's occupation (required): Mayor

Treasurer's Information:
Treasurer's name (required): Charles Doe
Treasurer's physical address (required): 9135 Ridgeway St Payson AZ
Treasurer's mailing address (if different): _____
Treasurer's email address (required): Chid=Doe@yahoo.com
Treasurer's phone number (required): 714-814-8165
Treasurer's employer (required): Retired
Treasurer's occupation (required): Retired

Bank or Financial Institution:
(do not list acct numbers) Bank name (required): Chase Wells Fargo
Additional bank name (if applicable): _____
Additional bank name (if applicable): _____

DECLARATION AND SIGNATURES:

I declare under penalty of perjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as chairperson or treasurer of the committee named herein, if applicable; (2) designate the above-named committee as my official candidate committee and authorize it to receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's campaign finance and reporting guide; (4) agree to comply with Arizona election law, including campaign finance laws codified at A.R.S. §§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of process for campaign finance purposes via the email address(es) provided herein.

Chairperson's signature: [Signature] Date: 5-19-20

Treasurer's signature: [Signature] Date: 5-19-20

Candidate's signature (if applicable): _____ Date: _____