☐ Initial Application☐ Amended ApplicationDate: 9/4/2024



COMMITTEE ID NUMBER (office use only)

PAC-21-15

## COMMITTEE TYPE (choose one):

Committee Name (required):		
(first or last name & office)	·	
Candidate Information:	Candidate's Name (required):	
	Candidate's mailing address (required):	
	Candidate's email address (required):	
	Candidate's phone number (required):	
	Candidate's website (if any):	
Office Sought.	□City Office:	
	District:	
■ Political Action Comr	nittee (PAC)	
Committee Name (required): (if sponsored, must include	nittee (PAC)  2023 COP Test Committee	
Committee Name (required): (if sponsored, must include		
Committee Name (required): (if sponsored, must include sponsor's name)  Political Function (optional):	2023 COP Test Committee	
Committee Name (required): (if sponsored, must include sponsor's name)  Political Function (optional): (select any that apply)	2023 COP Test Committee  ☐ Contributions ☐ Candidate-Related Independent Expenditures	
Committee Name (required): (if sponsored, must include sponsor's name)  Political Function (optional): (select any that apply)  Sponsorship Information:	2023 COP Test Committee  Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Recall Expenditures  Sponsor's name or nickname (required): Sponsor's mailing address (required):	
Committee Name (required): (if sponsored, must include sponsor's name)  Political Function (optional): (select any that apply)	2023 COP Test Committee  Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Recall Expenditures  Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required):	
Committee Name (required): (if sponsored, must include sponsor's name)  Political Function (optional): (select any that apply)  Sponsorship Information:	2023 COP Test Committee  Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Recall Expenditures  Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's phone number (if any):	
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Committee Name (required): (if sponsored, must include sponsor's name)  Political Function (optional): (select any that apply)  Sponsorship Information: (if applicable)	2023 COP Test Committee  ☐ Contributions ☐ Candidate-Related Independent Expenditures ☐ Ballot Measure Expenditures ☐ Recall Expenditures  Sponsor's name or nickname (required):  Sponsor's mailing address (required):  Sponsor's email address (required):  Sponsor's phone number (if any):  Sponsor's website (if any):	

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## COMMITTEE INFORMATION:

address(es) provided herein.

Contact Information:	Committee's mailing address (required): 200 w Washington, Phoenix AZ 85003
	Committee's email address (required): monica.figueroa@phoenix.gov
	Committee's phone number (if any):
	Committee's website (if any):
Chairperson's Information:	Chairperson's name (required): Lynette Temple
	Chairperson's physical address (required): 200 W Washington, Phoenix AZ 85003
	Chairperson's mailing address (if different): 200 W Washington, Phoenix AZ 85003
	Chairperson's email address (required): Lynette.temple@phoenix.gov
	Chairperson's phone number (required): (123)456-7891
	Chairperson's employer (required): City of Phoenix
	Chairperson's occupation (required): Chairperson - TEST
Treasurer's Information:	Treasurer's name (required): Monica Figueroa
	Treasurer's physical address (required): 200 W. Washington, Phoenix AZ 85003
	Treasurer's mailing address (if different): 200 W. Washington, Phoenix AZ 85003
	Treasurer's email address (required): monica.figueroa@phoenix.gov
	Treasurer's phone number (required): (123)456-7891
	Treasurer's employer (required): City of Phoenix
	Treasurer's occupation (required): Treasurer - TEST
Bank or Financial Institution:	Ponk 111
(do not list acct numbers)	Additional bank name (if applicable):
	Additional bank name (if applicable):

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

Chairperson's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Treasurer's signature: \_\_\_\_\_\_ Date: \_\_\_\_\_

Candidate's signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_