☐ Initial Application☐ Amended Application☐ bate: 8/29/2018



COMMITTEE ID NUMBER (office use only)
PAC-18-18

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:	
Floritor Combo for Office Dec		
Election Cycle for Office Sou	ight (year the election will take place) (required):	
Election Cycle for Office Sou	ght (year the election will take place) (required):	
Election Cycle for Office Sou		
Election Cycle for Office Sou	ight (year the election will take place) (required):	
Election Cycle for Office Sou		
Political Action Comm	mittee (PAC)	
■ Political Action Comm		
Political Action Common Political Action Common Political Action Common Political Poli	mittee (PAC)	
Political Action Committee Name (required): (if sponsored, must include sponsor's name)	mittee (PAC) Building A Better Phoenix	
Political Action Common Political Action Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional):	mittee (PAC) Building A Better Phoenix Contributions Candidate-Related Independent Expenditures	
Political Action Committee Name (required): if sponsored, must include sponsor's name)	mittee (PAC) Building A Better Phoenix	
Political Action Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply)	mittee (PAC) Building A Better Phoenix □ Contributions □ Candidate-Related Independent Expenditures ■ Ballot Measure Expenditures □ Recall Expenditures	
Political Action Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information:	mittee (PAC) Building A Better Phoenix □ Contributions □ Candidate-Related Independent Expenditures ■ Ballot Measure Expenditures □ Recall Expenditures Sponsor's name or nicknarne (required):	
Political Action Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information:	mittee (PAC) Building A Better Phoenix Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required):	
Political Action Comm	mittee (PAC) Building A Better Phoenix □ 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):	
Political Action Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information:	mittee (PAC) Building A Better Phoenix Contributions Candidate-Related Independent Expenditures Ballot Measure Expenditures Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required):	
Political Action Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information:	mittee (PAC) Building A Better Phoenix □ 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):	

■ Initial Application
□ Amended Application
Date: 8/29/2018



COMMITTEE ID NUMBER (office use only)

PAC-18-18

COMMITTEE INFORMATION:

	Contact Information:	Committee's mailing address (required): 2140 West Greenway, Phoenix AZ 85023
/		Committee's email address (required): BuildingBetterPhoenix@gmail.com
		Committee's phone number (if any): (602)971-4753
		Committee's website (if any):
	Chairperson's Information:	Chairperson's name (required): Mel Martin
		Chairperson's physical address (required): 2140 West Greenway, Phoenix AZ 85023
		Chairperson's mailing address (if different): 2140 West Greenway, Phoenix AZ 85023
		Chairperson's email address (required): melcarup@aol.com
		Chairperson's phone number (required): (602)971-4753
		Chairperson's employer (required): MRM Investments
		Chairperson's occupation (required): President/CEO
	Treasurer's Information:	Treasurer's name (required): Kent Rudd
		Treasurer's physical address (required): 2140 West Greenway, Phoenix AZ 85023
		Treasurer's mailing address (if different): 2140 West Greenway, Phoenix AZ 85023
		Treasurer's email address (required): firedawgbk@gmail.com
		Treasurer's phone number (required): (702)704-5150
	Bank or Financial Institution:	Treasurer's employer (required): MRM Investments
		Treasurer's occupation (required): Comptroller
		Bank name (required): Wells Fargo
	(do not list acct numbers)	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 chairperson or treasurer of the committee named herein, if applicable; (2) designate committee and authorize it to receive/make contributions/expenditures on my behandled in the campaign finance and reporting guide; (4) agree to comply with Arizona election is §§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of	te the above-named committee as my official candidate alf, if applicable; (3) have read the Secretary of State's aw, including campaign finance laws codified at A.R.S.	\
	address(es) provided herein.	viocess for campaign marice purposes via me email	
	Chairperson's signature:	Date: 829-15/	
	Treasurer's signature:	Date: 8-29-18	
\	Candidate's signature (if applicable):	Date:	/