



## STATE OF ARIZONA COMMITTEE STATEMENT OF ORGANIZATION

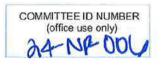
committee in number (office use only)

COMMITTEE TYPE (choose one):

APR 0 1 2024
Committee to Elect Rick Riegler  CITY CLERK
Candidate's Name (required): Ricky D Riegler
Candidate's mailing address (required):
Candidate's email address (required): ricky4lhcc@gmail.com
Candidate's phone number (required):
Candidate's website (if any): rickriegler.com
□ County Office: □ □ District (if applicable): □
■ City/Town Office: City Council □ District (if applicable):
□ School Board Office: □ □ District (if applicable): □
□ Special District Board: □ District (if applicable):
ght (year the election will take place) (required):
□ Democrat □ Libertarian □ No Labels □ Republican □ Other:
☐ Contributions ☐ Candidate-Related Independent Expenditures
☐ 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 email address (required):Sponsor's phone number (if any):
Sponsor's email address (required):







## COMMITTEE INFORMATION:

Contact Information:	Committee's mailing address (required):
	Committee's email address (required): ricky4lhcc@gmail.com
	Committee's phone number (if any):
	Committee's website (if any): rickriegler.com
Chairperson's Information:	Chairperson's name (required): Rick Riegler
	Chairperson's physical address (required):
	Chairperson's mailing address (if different):
	Chairperson's email address (required): ricky4lhcc@gmail.com
	Chairperson's phone number (required):
	Chairperson's employer (required):
	Chairperson's occupation (required): Mortgage Loan Originator
Treasurer's Information:	Treasurer's name (required): Christine Riegler
	Treasurer's physical address (required):
	Treasurer's mailing address (if different):
	Treasurer's email address (required):
	Treasurer's phone number (required):
	Treasurer's employer (required): Self
	Treasurer's occupation (required): Property Host
Bank or Financial Institution:	Bank name (required): Foothills Bank
(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. 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;

Date: 03/29/2024

Treasurer's signature:

Date: 03/29/2024

Candidate's signature (if applicable):

Date: 03/29/2024

