

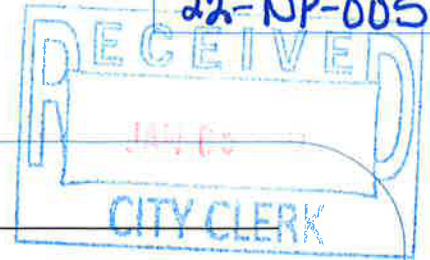
☒ Initial Application
☐ Amended Application
Date: 1/5/2022



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

22-NP-005



COMMITTEE TYPE (choose one):

☒ Candidate

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

MARK CURRY COUNCILMAN

Candidate Information:

Candidate's Name (required):

MARK S CURRY

Candidate's mailing address (required)

LAKE HAVASU CITY AZ 86406

Candidate's email address (required)

[REDACTED]@[REDACTED].COM

Candidate's phone number (required):

Candidate's website (if any):

Office Sought (choose one):

☒ County Office:

☐ District (if applicable):

☒ City/Town Office:

COUNCIL

☐ District (if applicable):

☐ School Board Office:

☐ District (if applicable):

☐ Special District Board:

☐ District (if applicable):

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

2022

Party Affiliation:

(required for partisan offices)

☐ Democrat

☐ Green

☐ Libertarian

☒ Republican

☐ Other:

☐ Political Action Committee (PAC)

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

Political Function (optional):
(select any that apply)

☐ Contributions

☐ Candidate-Related Independent Expenditures

☐ Ballot Measure Expenditures

☐ Recall Expenditures

Sponsorship Information:
(if applicable)

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):

Special Status
(if applicable)

☐ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union

☐ 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)

REPUBLICAN

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
(if applicable)

☐ Standing Committee (must also complete separate standing committee registration)

☐ Initial Application
☐ Amended Application
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STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

22-NP-005

COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required): _____ LAKE HAVASU AZ 86404
Committee's email address (required): _____ .COM
Committee's phone number (if any): _____
Committee's website (if any): _____

Chairperson's Information:

Chairperson's name (required): _____ MARY PAINTON
Chairperson's physical address (required): _____ LAKE HAVASU AZ 86404
Chairperson's mailing address (if different): _____
Chairperson's email address (required): _____ .COM
Chairperson's phone number (required): _____
Chairperson's employer (required): _____
Chairperson's occupation (required): _____ ACTIVITIES DEPT

Treasurer's Information:

Treasurer's name (required): _____ STEFANIE MICHELS
Treasurer's physical address (required): _____ LAKE HAVASU AZ 86406
Treasurer's mailing address (if different): _____
Treasurer's email address (required): _____ .COM
Treasurer's phone number (required): _____
Treasurer's employer (required): _____
Treasurer's occupation (required): _____ BUSINESS MNGR

Bank or Financial Institution:
(do not list acct numbers)

Bank name (required): _____ Foothills Bank
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: 1/5/2022

Treasurer's signature: _____

Date: 1-5-2022

Candidate's signature (if applicable): _____

Date: 1.4.22

