

☒ Initial Application  
☐ Amended Application  
Date: 1/16/26



STATE OF ARIZONA  
COMMITTEE STATEMENT  
OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)

26-NP-003

COMMITTEE TYPE (choose one):

☒ **Candidate**

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

Taylor Harrison Lake Havasu City Council

Candidate Information:

Candidate's Name (required):

Taylor Harrison

Candidate's mailing address (required):

[REDACTED] Lake Havasu City

Candidate's email address (required):

[REDACTED]@com AZ 86403

Candidate's phone number (required):

[REDACTED]

Candidate's website (if any):

TAYLORHARRISONLHC.COM

Office Sought (choose one):

☐ 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):

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

2026

Party Affiliation:

(required for partisan offices)

☐ Democrat

☐ Green

☐ Libertarian

☐ Republican

☐ Other:

**RECEIVED**

**JAN 16 2026**

**CITY CLERK**

☐ **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)

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  
Date: 1/15/26



STATE OF ARIZONA  
COMMITTEE STATEMENT  
OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)  
26-NP-003

COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required):

41 Mulberry Ave. Lake Havasu City, AZ 86403

Committee's email address (required):

INFO@TAYLORHARRISONLHC.COM

Committee's phone number (if any):

(928) 706-1886

Committee's website (if any):

TAYLORHARRISONLHC.COM

Chairperson's Information:

Chairperson's name (required):

TAYLOR HARRISON

Chairperson's physical address (required):

[REDACTED] LAKE HAVASU CITY, AZ 86403

Chairperson's mailing address (if different):

Chairperson's email address (required):

[REDACTED]@COM

Chairperson's phone number (required):

Chairperson's employer (required):

Monave M. Spa And Spa

Chairperson's occupation (required):

CEO

Treasurer's Information:

Treasurer's name (required):

TIFFANY CALEY

Treasurer's physical address (required):

[REDACTED] Lake Havasu City, AZ 86403

Treasurer's mailing address (if different):

Treasurer's email address (required):

[REDACTED]@COM

Treasurer's phone number (required):

Treasurer's employer (required):

Self Employed

Treasurer's occupation (required):

Enrolled Agent

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

Bank name (required):

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:

1/15/26

Treasurer's signature:

[Signature]

Date:

1/15/26

Candidate's signature (if applicable):

[Signature]

Date:

1/15/26