

RECEIVED

MAR 30 2020



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

PAC2020-01

Initial Application
 Amended Application
Date: 3/31/20

Town of Cave Creek

COMMITTEE TYPE (choose one):

Candidate

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

Eileen Wright for Mayor

Candidate Information:

Candidate's Name (required):

Eileen Wright

Candidate's mailing address (required):

7488 E. Highland Rd Cave Creek 85331

Candidate's email address (required):

eileenannwright@gmail.com

Candidate's phone number (required):

480-784-7804

Candidate's website (if any):

N/A

Office Sought (choose one):

- Governor
- Secretary of State
- Attorney General
- State Treasurer
- Superintendent of Public Instruction
- State Mine Inspector
- Corporation Commissioner

State Senate

State House of Representatives

District (required): _____

County Office: _____

District (if applicable): _____

City/Town Office: Mayor

District (if applicable): _____

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

2020

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)

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)

RECEIVED

MAR 30 2020

Campaign Finance – Candidate Guide

Town of Cave Creek

Initial Application
 Amended Application
Date: 3/29/20



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 7488 E. Highland Rd. Cave Creek 85331
 Committee's email address (required): eileenannewright@gmail.com
 Committee's phone number (if any): 480-784-7804
 Committee's website (if any): NA

Chairperson's Information: Chairperson's name (required): Eileen Wright
 Chairperson's physical address (required): 7488 E. Highland Rd. Cave Creek 85331
 Chairperson's mailing address (if different): —
 Chairperson's email address (required): eileenannewright@gmail.com
 Chairperson's phone number (required): 480-784-7804
 Chairperson's employer (required): none
 Chairperson's occupation (required): retired

Treasurer's Information: Treasurer's name (required): Eileen Wright
 Treasurer's physical address (required): 7488 E. Highland Rd. Cave Creek 85331
 Treasurer's mailing address (if different): —
 Treasurer's email address (required): eileenannewright@gmail.com
 Treasurer's phone number (required): 480-784-7804
 Treasurer's employer (required): none
 Treasurer's occupation (required): retired

Bank or Financial Institution: 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. 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: Eileen Wright Date: 3/29/20

Treasurer's signature: Eileen Wright Date: 3/29/20

Candidate's signature (if applicable): Eileen Wright Date: 3/29/20