

☒ Initial Application
☐ Amended Application
 Date: 2/4/22



**STATE OF ARIZONA
 COMMITTEE STATEMENT
 OF ORGANIZATION**

COMMITTEE ID NUMBER
 (office use only)
MC22-2

COMMITTEE TYPE (choose one):

☒ **Candidate**

Committee Name (required): Edwards For City Council
 (first or last name & office)

Candidate Information:

Candidate's Name (required): Anthony Edwards
 Candidate's mailing address (required): 2131 N. Lakeshore Dr. Casa Grande, AZ 85822
 Candidate's email address (required): ae222983@gmail.com
 Candidate's phone number (required): 520-560-2935
 Candidate's website (if any): _____

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): 2022

Party Affiliation: ☒ Democrat ☐ Green ☐ Libertarian ☐ Republican ☐ Other: _____
 (required for partisan offices)

☐ **Political Action Committee (PAC)**

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

Political Function (optional): ☐ Contributions ☐ Candidate-Related Independent Expenditures
 (select any that apply) ☐ Ballot Measure Expenditures ☐ Recall Expenditures

Sponsorship Information: Sponsor's name or nickname (required): _____
 (if applicable) 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)

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STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required): 2131 N. Lake Shore Drive Casa Grande
Committee's email address (required): ae222983@gmail.com
Committee's phone number (if any): 520-560-2935
Committee's website (if any): _____

Chairperson's Information:

Chairperson's name (required): RANDY ROBBINS
Chairperson's physical address (required): 583 E. PAUL VALDE ST
Chairperson's mailing address (if different): SAME
Chairperson's email address (required): randyrobbins48@MSN.COM
Chairperson's phone number (required): (602) 738-2654
Chairperson's employer (required): CGUITSO #82
Chairperson's occupation (required): ATHLETIC DIRECTOR

Treasurer's Information:

Treasurer's name (required): Gracy Lavender
Treasurer's physical address (required): 1212 E. Clearview Dr.
Treasurer's mailing address (if different): _____
Treasurer's email address (required): gracy-lavender@hotmail.com
Treasurer's phone number (required): 520705-4458
Treasurer's employer (required): _____
Treasurer's occupation (required): Hair dresser

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

Bank name (required): Great Western 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: 1-20-22

Treasurer's signature: _____

Date: 1-20-22

Candidate's signature (if applicable): _____

Date: 1-20-22