

☐ Initial Application
☒ Amended Application
 Date: 10/15/2026



STATE OF ARIZONA COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
 (office use only)
 PAC 25-01

COMMITTEE TYPE (choose one):

☒ Candidate

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

Candidate Information: Candidate's Name (required): _____
 Candidate's mailing address (required): _____
 Candidate's email address (required): _____
 Candidate's phone number (required): _____
 Candidate's website (if any): _____

Office Sought (choose one): ☒ County Office: _____ ☐ District (if applicable): _____
☒ City/Town Office: _____ ☐ 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): _____

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

☒ Political Action Committee (PAC)

Committee Name (required): Play It Forward Casa Grande
 (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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 (office use only)
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COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): PO Box 10103, Casa Grande, AZ 85130
 Committee's email address (required): info@playitforwardcg.com
 Committee's phone number (if any): (520) 353-3428
 Committee's website (if any): www.PlayItForwardCG.com

Chairperson's Information: Chairperson's name (required): Mindi Dawkins
 Chairperson's physical address (required): 404 N. Marshall Street, Casa Grande, AZ 85122
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): Mindi@PlayItForwardCG.com
 Chairperson's phone number (required): (520) 560-2421
 Chairperson's employer (required): Arizona Home Pros
 Chairperson's occupation (required): Designated Broker

Treasurer's Information: Treasurer's name (required): Victor Fuentes
 Treasurer's physical address (required): 317 E Cottonwood Lane, Suite C, Casa Grande, AZ 85122
 Treasurer's mailing address (if different): _____
 Treasurer's email address (required): Victor@PlayItForwardCG.com
 Treasurer's phone number (required): (602) 295-1543
 Treasurer's employer (required): FoxFarm Soil & Fertilizer
 Treasurer's occupation (required): Director of Finance

Bank or Financial Institution: Bank name (required): National Bank of Arizona
 (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.

Signed by:
 Chairperson's signature: Mindi Dawkins Date: 10/15/2025 | 16:19 MST
 Signed by:
 Treasurer's signature: Victor Fuentes Date: 10/15/2025 | 16:31 MST
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Candidate's signature (if applicable): _____ Date: _____