X Initial Application

☐ Amended Application

Date: <u>Jun 29, 2017</u>



COMMITTEE ID NUMBER (office use only)

PC2017-06

COMMITTEE TYPE (choose one):

X Candidate					
Committee Name (required): (first or last name & office)	Elect Douglas Nicholls				
Candidate Information:	Candidate's Name (required): Douglas Nicholls				
	Candidate's mailing address (required): 5261 E. 24th Place, Yuma, AZ 85365				
	Candidate's email address (required): dnicholls19@gmail.com				
	Candidate's phone number (required): 928-210-9401				
	Candidate's website (if any): _www.DouglasNicholls.com				
Office Sought (choose one):	□ Governor □ Secretary of State □ Attorney General □ State Treasurer □ Superintendent of Public Instruction □ State Mine Inspector □ Corporation Commissione				
	☐ State Senate ☐ State House of Representatives ☐ District (required):				
	☐ County Office: ☐ District (if applicable):				
	X City/Town Office: Mayor				
Election Cycle for Office Soug	tht (year the election will take place) (required): 2017				
Party Affiliation: (required for partisan offices)	□ Democrat □ Green □ Libertarian □ Republican □ Other:				
sponsor's name) Political Function (optional): (select any that apply)	☐ Contributions ☐ Candidate-Related Independent Expenditures ☐ 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	☐ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union				
(if applicable)	☐ 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):	<u> </u>				
(must include party affiliation)	☐ 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. § 16-803)				
(must include party affiliation) Jurisdiction:	☐ County Party (must include proof of qualification pursuant to A.R.S. § 16-802 or § 16-804)				

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COMMITTEE INFORMATION:

Contact Information: Co	committee's mailing address (required): 5261 E. 24th Place, Yuma, AZ 85365
Co	committee's email address (required): dnicholls19@gmail.com
Co	committee's phone number (if any): 928-210-9401
Co	committee's website (if any): www.DouglasNicholls.com
Chairperson's Information: Ch	chairperson's name (required): Douglas Nicholls
Cr	Chairperson's physical address (required): 5261 E. 24th Place, Yuma, AZ 85365
CI	Chairperson's mailing address (if different):
Cł	chairperson's email address (required): dnicholls@core-e-g.com
Cł	Chairperson's phone number (required): 928-210-9401
Ch	Chairperson's employer (required): Core Engineering Group, PLLC
Cł	chairperson's occupation (required): Civil Engineer
Treasurer's Information: Tr	reasurer's name (required): Paul Muthart
Tr	reasurer's physical address (required): 3576 W. 12 th Lane, Yuma, AZ 85364
Tr	reasurer's mailing address (if different):
Tr	reasurer's email address (required): pmuthart@hotmail.com
Tr	reasurer's phone number (required): 928-246-7285
	reasurer's employer (required): Pasquinelli Produce. Co.
Tr	reasurer's occupation (required): General Manager
Bank or Financial Institution: Ba	ank name (required): 1st Bank Yuma
	dditional bank name (ifapplicable):
Ac	dditional bank name (if applicable):

DECLARATION AND SIGNATURES:

Treasurer's signature:

I declare under penalty of perjury that the fore chairperson or treasurer of the committee nan committee and authorize it to receive/make of campaign finance and reporting guide; (4) agress 16-901 to 16-938; and (5) agree to accept	ned herein, if applicable; (2) de ontributions/expenditures on m ree to comply with Arizona elec	esignate the above-named com y behalf, if applicable; (3) have tion law, including campaign fir	mittee as my official candidate read the Secretary of State's nance laws codified at A.R.S.
address(es) provided herein.	all floulications and legal servi	ce of process for campaign fina	rice purposes via the email
Chairperson's signature:	Mille	Date: 6/28/	12
Treasurer's signature:	Mutant	Date: 6-29-/	7

Candidate's signature (if applicable)