



COMMITTEE ID NUMBER (office use only)

PC2017-05

COMMITTEE TYPE (choose one):

☑ Candidate	
Committee Name (required): first or last name & office)	COMMITTEE TO ELECTKEN ROSEVEAR, YUNA COUNCIL
Candidate Information:	Candidate's Name (required): KEN ZOSEVEAR
	Candidate's mailing address (required): 4655 W. SUN DOWN OR, YOMA, A
	Candidate's email address (required): KEN4YUMACOUNCILD 9MAIL. COM
	Candidate's email address (required): 728 246-5536
	Candidate's website (if any): KENYYUMA COONCILL O GMAIL. COM
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): ☐
and the second s	City/Town Office: YUMACITY (OOW) District (if applicable):
	ht (year the election will take place) (required): 2017
Party Affiliation: required for partisan offices)	□ Democrat □ Green □ Libertarian □ Republican □ Other: □ Democrat □ Green □ Libertarian □ Republican □ Other:
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☐ Political Action Comm	nittee (PAC)
Committee Name (required):	
if sponsored, must include ponsor'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	☐ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union
Special Status if applicable)	☐ Standing Committee (must also complete separate standing committee registration)
ii applicable)	☐ Standing Committee (most 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)	
(must include party anniation,	
Jurisdiction:	☐ State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)
	☐ 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)
	☐ 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:	Committee's mailing address (required): 4655 W. SUN DOWN DR, Yema, AZ85364
		Committee's email address (required): KENY YUMA COUNCIL D 9MRI/.COM
		Committee's phone number (if any): 928 246-5536
		Committee's website (if any): KENYYUMACITYCOUNCI
	Chairperson's Information:	Chairperson's name (required); JOAN WEIL
		Chairperson's physical address (required): 3064 S. AVE B
		Chairperson's mailing address (if different): 3064 S. AVE B
		Chairperson's email address (required):
	3	Chairperson's phone number (required): 928 782-3072
		Chairperson's employer (required): /+ALL CONSTRUCTION CO.
		Chairperson's occupation (required):/ヲTTOにいEY
	Treasurer's Information:	Treasurer's name (required): SARAK ROSEVEAR
		Treasurer's physical address (required): 4655 W SUN DOWN DRIVE YUNA, AZ
		Treasurer's mailing address (if different):
	. 3	Treasurer's email address (required): SARAKROSEVEARD YPHOO, COM
		Treasurer's phone number (required): 928 941-2172
		Treasurer's employer (required): /ZETIZED
		Treasurer's occupation (required): 7CFTIRED
	Bank or Financial Institution:	Bank name (required): NATIONAL BANK OF ARIZONA
	(do not list acct numbers)	Additional bank name (ifapplicable):
		Additional bank name (if applicable):
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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:

Dáte: 5/30/17

Treasurer's signature: .

Date: 5/26/17

Candidate's signature (if applicable):

Date: 5/26/17

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Arizona Secretary of State Revision 11/5/16