



COMMITTEE ID NUMBER (office use only)
PC 2021-02

COMMITTEE TYPE (choose one):

Candidate Committee Name (required): (first or last name & office)	Elect Watts for Mayor of Yuma	
Candidate Information:	Candidate's Name (required): Haren A Watts Candidate's mailing address (required): 340 w 32mst # 378 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	7 5
	Candidate's email address (required): Wattsfor Yuma 2 gmail.com Candidate's phone number (required): 923-930-8773 Candidate's website (if any):	
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: \frac{\frac{1}{2} \text{UMA} \qquad \qquad District (if applicable): \qquad \qqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqq	
Election Cycle for Office Soug	District (if applicable): ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	IJ
Party Affiliation: (required for partisan offices)	□ Democrat □ Green □ Libertarian □ Republican □ Other: □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	
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☐ Political Action Comn	and the state of t	J
(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:	Sponsor's name or nickname (required):	
(if applicable)	Sponsor's mailing address (required):	
	Sponsor's email address (required):	
	Sponsor's phone number (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): (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	☐ Standing Committee (must also complete separate standing committee registration)	

☐ Initial Application '
Amended Application
Date:
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COMMITTEE INFORMATION:

Contact Information:	Committee's mailing address (required):
	Committee's email address (required):
	Committee's phone number (if any):
	Committee's website (if any):
Chairperson's Information:	Chairperson's name (required): Lisa Greenuhte
	Chairperson's physical address (required): 2551-5-3157 Devic Wina Az
	Chairperson's mailing address (if different):
	Chairperson's email address (required): 1540 Stayer 120 amail. (on
	Chairperson's phone number (required): 928-246-3333
	Chairperson's employer (required):
	Chairperson's occupation (required):
Treasurer's Information:	Treasurer's name (required):
	Treasurer's physical address (required): 4574 W. 22nd LN Yuma A
	Treasurer's mailing address (if different):
	Treasurer's email address (required): <u>am 3225 @nau.cdu</u>
	Treasurer's phone number (required): 926-920-1031
	Treasurer's employer (required): YRMC
	Treasurer's occupation (required): KN
Bank or Financial Institution:	Bank name (required):
(do not list acct numbers)	Additional bank name (ifapplicable):
_	Additional bank name (if applicable):

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	I declare under penalty of perjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve a	35
	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	of State's
	campaign finance and reporting quide; (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	e email
	address(es) provided herein	
	Chairperson's signature: Date: 922	
	3/C410.114.13 9152 101	
	Chairperson's signature: // /8/// // Date: Date:	
	$(M \mid M \land M \land M)$ $(M \mid M \land M \land M)$	
	Treasurer's signature: Date: Date:	
	Diameter Comment	
	Candidate's signature (if applicable): Pour Would Date: 9.30.31	
	Candidate's signature (if applicable): // /////////////////////////////////	
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