

Initial Application  
 Amended Application  
Date: 26 JAN 2019



STATE OF ARIZONA  
COMMITTEE STATEMENT  
OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)

PC2019-01

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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):  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: \_\_\_\_\_  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)

CITY OF TULSA  
OFFICE OF THE CITY CLERK

Political Action Committee (PAC)

Committee Name (required): Cesar Chavez Legacy PAC  
(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)



**STATE OF ARIZONA  
COMMITTEE STATEMENT  
OF ORGANIZATION**

COMMITTEE ID NUMBER  
(office use only)  
**PC2019-01**

Initial Application  
 Amended Application  
Date: **28 JAN 2019**

COMMITTEE INFORMATION:

**Contact Information:** Committee's mailing address (required): 2000 W. Country Lane, Yuma AZ 85365  
 Committee's email address (required): CesarChavezLegacyPAC@gmail.com  
 Committee's phone number (if any): 928-580-9442  
 Committee's website (if any): Cesar Chavez Legacy PAC - Facebook

**Chairperson's Information:** Chairperson's name (required): William Katz  
 Chairperson's physical address (required): 2566 South 47th Ave Yuma  
 Chairperson's mailing address (if different): AZ 85364  
 Chairperson's email address (required): WKatz25@yahoo.com  
 Chairperson's phone number (required): 504-638-4418  
 Chairperson's employer (required): Halls' General Contractor LLC  
 Chairperson's occupation (required): Attorney

**Treasurer's Information:** Treasurer's name (required): Henry VALENZUELA  
 Treasurer's physical address (required): 2000 W. Country Lane Yuma  
 Treasurer's mailing address (if different): CesarChavezLegacyPAC@gmail.com **AZ 85365**  
 Treasurer's email address (required): CesarChavezLegacyPAC@gmail.com  
 Treasurer's phone number (required): 928-580-9442  
 Treasurer's employer (required): City of Yuma Police Department  
 Treasurer's occupation (required): Police Sergeant

**Bank or Financial Institution:** Bank name (required): First Bank Yuma  
 (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.

Chairperson's signature:  Date: 1-28-19

Treasurer's signature:  Date: 28 JAN 2019

Candidate's signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_