

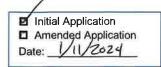


COMMITTEE ID NUMBER
(office use only)

EHZOU-01

COMMITTEE TYPE (choose one):

	Ch Too Markey A
Committee Name (required): first or last name & office)	ED FOR MAYOR. COM
Candidate Information:	Candidate's Name (required): ED HOENA
	Candidate's mailing address (required): 12269 W. GRIER KOAD MARANA, LESS
	Candidate's email address (required): ERHONEA CYAHOO. Con INFO DED TOR M
	Candidate's phone number (required): 220-850-1733
	Candidate's website (if any): ED FOR MAYOR. COM
Office Sought (choose one):	□ County Office: □District (if applicable):
omoo bo u gm (oncood and).	□City/Town Office: MAYOR □District (if applicable):
	School Board Office: District (if applicable):
Election Cycle for Office Sou	ght (year the election will take place) (required): 2024
Party Affiliation: required for partisan offices)	□ Democrat □ Green □ Libertarian □ Republican □ Other:
equired for particular offices)	
f sponsored, must include	
if sponsored, must include ponsor's name) Political Function (optional): select any that apply)	☐ Contributions ☐ Candidate-Related Independent Expenditures ☐ Ballot Measure Expenditures ☐ Recall Expenditures
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if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information: if applicable) Special Status if applicable) Political Party Committee Name (required): (must include party affiliation)	□ Contributions □ Candidate-Related Independent Expenditures □ Ballot Measure Expenditures □ Recall Expenditures Sponsor's name or nickname (required): □ Sponsor's mailing address (required): □ Sponsor's email address (required): □ Sponsor's website (if any): □ Sponsor's website (if any): □ Sponsor's website (if any): □ 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) ■ 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)





COMMITTEE ID NUMBER (office use only)

EH 2024-01

COMMITTEE INFORMATION:

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Contact Information:	Committee's mailing address (required): 12269 W. GRIEL KOAD WALKAA & \$5653
	Committee's email address (required): [NFO @ ED FOLL HALL + CON
	Committee's phone number (if any): <u>520-850 - 1733</u>
	Committee's website (if any): ED FOR MARANA, COM
Chairperson's Information:	Chairperson's name (required): <u>CLINT PEFIC</u>
	Chairperson's physical address (required): 13/59 N. PLATER PLACE OROVALEY ALSS 75
	Chairperson's mailing address (if different):
	Chairperson's email address (required): C+INT POER & CONCAST. NET
	Chairperson's phone number (required): 520 - 444 - 9420
	Chairperson's employer (required): LIVE THE DREM MEDIA
	Chairperson's occupation (required): Ples New T
Treasurer's Information:	Treasurer's name (required): EN HONEA
	Treasurer's physical address (required): 12269. W. GRIELRO MARANA, h. 6555653
	Treasurer's mailing address (if different):
	Treasurer's email address (required): [N FO @ ED FORMMOR ; COM
	Treasurer's phone number (required): 520 - 650 - 1733
	Treasurer's employer (required): TOW of OF Market 4
	Treasurer's occupation (required): MAYOR
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.	
	address(co) provided neronity	
	1/1/24	
	Chairperson's signature: Date: 1/11/24	
	Hell Man and a	
	Treasurer's signature: Date: 1/1/124	
	1/11/24	
	Candidate's signature (if applicable) Date:	
/	V	

RECEIVED

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