



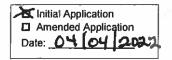
STATE OF ARIZONAR ECEIVE COMMITTEE STATEMENT OF ORGANIZATION APR 0 4 2022

COMMITTEE ID NUMBER (office use only)

CITY OF SEDONA CITY CLERK'S OFFICE

COMMITTEE TYPE (choose one):

Candidate	
Committee Name (required): (first or last name & office)	JENNE-BR STRAFT
Candidate Information:	Candidate's Name (required): JENK DEC STEAT
	Candidate's mailing address (required): 15 PDNON Dr. 3 DONA AZ.
	Candidate's email address (required): JSTRAIT 13 @ TAHOO. COM
	Candidate's phone number (required): 312 - 375 - 2813
	Candidate's website (if any): WWW. JENNITER FORSEDWA.COM
Office Sought (choose one):	☐ County Office: ☐ ☐District (if applicable):
	District (if applicable):
	□ School Board Office: □ District (if applicable):
	☐ Special District Board: ☐ ☐District (if applicable):
Election Cycle for Office Sour	th (year the election will take place) (required):
Party Affiliation: (required for partisan offices)	□ Democrat □ Green □ Libertarian □ Republican □ Other:
·	
	5 . 5
Political Action Comm	nittee (PAC)
Committee Name (required):	JENNIFER FOR SEDOWA
if sponsored, must include sponsor's name)	
Political Function (optional):	☐ Contributions ☐ Candidate-Related Independent Expenditures
select any that apply)	□ Ballot Measure Expenditures □ Recall Expenditures
5,	
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
f 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)
54	,
Partition Co.	
Political Party	JENNIGER FOR SEDONA
Committee Name (required): must include party affiliation)	JENNIGGE FUR SEDONA
lurisdiction:	☐ State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)
33	☐ 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)
	- armon's committee funds the complete sebarate standing committee registration)





STATE OF ARIZONAD ECEIVE COMMITTEE STATEMENT OF ORGANIZATION AFR 8 4 2022

APR 0 4 2022

COMMITTEE ID NUMBER (office use only)

COMMITTEE INFORMATION:

CITY OF SEDONA CITY CLERK'S OFFICE

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):
	Chairperson's physical address (required): 115 ppv sq. 320 sq. A2. 86334
	Chairperson's mailing address (if different):
	Chairperson's email address (required):
	Chairperson's phone number (required): 312 - 375 - 2813
	Chairperson's employer (required):
	Chairperson's occupation (required):
Treasurer's Information	Treasurer's name (required): JENNAGE STRAET
	Treasurer's physical address (required): 115 Pm or 3200MA AZ . 36376
	Treasurer's mailing address (if different):
	Treasurer's email address (required):
	Treasurer's phone number (required): 312 - 375 - 2813
	Treasurer's employer (required):
	Treasurer's occupation (required):
Bank or Financial Institution; (do not list acct numbers)	
	Additional bank name (if applicable):
	Additional bank name (if applicable):
chairperson or treasurer of the committee and authorize it to campaign finance and reporting	jury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as e committee named herein, if applicable; (2) designate the above-named committee as my official candidate receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's ng guide; (4) agree to comply with Arizona election law, including campaign finance laws codified at A.R.S. agree to accept all notifications and legal service of process for campaign finance purposes via the email
Chairperson's signature:	Date: 4/4/22
**************************************	4/4/12
Treasurer's signature:	Date: 4/4/22 Date: 4/4/22