

☒ Initial Application
☐ Amended Application
Date: _____



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

20-NP-006



COMMITTEE TYPE (choose one):

☐ Candidate

Committee Name (required):
(first or last name & office)

MOSES FOR COUNCIL

Candidate Information:

Candidate's Name (required):

CAMERON MOSES

Candidate's mailing address (required):

670 METZ LN

Candidate's email address (required):

CAMMOSES@YAHOO.COM

Candidate's phone number (required):

928 208 5342

Candidate's website (if any):

MOSES FOR COUNCIL.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): _____

☒ City/Town Office: CITY COUNCIL

☐ 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)

☐ Political Action Committee (PAC)

Committee Name (required):
(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:
(if applicable)

Sponsor's name or nickname (required): _____

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)

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STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

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(office use only)

20-NP-000

COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required): 670 METZ LN LHC, AZ 86406
Committee's email address (required): CAMMOSES@YANCO.COM
Committee's phone number (if any): 928 208 5342
Committee's website (if any): MOSESFORCOUNCIL.COM

Chairperson's Information:

Chairperson's name (required): BRIAN SPRINGBERG
Chairperson's physical address (required): 430 EL CAMINO WAY LHC, AZ 86403
Chairperson's mailing address (if different): _____
Chairperson's email address (required): BRIAN@SPRINGBERGMCANDREW.COM
Chairperson's phone number (required): 928 486-3065
Chairperson's employer (required): SPRINGBER MCANDREW FINANCIAL SVCS
Chairperson's occupation (required): FINANCIAL ADVISOR

Treasurer's Information:

Treasurer's name (required): WENDY MOORE
Treasurer's physical address (required): 3368 JAMAICA BLVD N LHC, AZ 86404
Treasurer's mailing address (if different): _____
Treasurer's email address (required): WENDY MOORE 1974@GMAIL.COM
Treasurer's phone number (required): 928 208 3224
Treasurer's employer (required): SELF
Treasurer's occupation (required): ACCOUNTANT

Bank or Financial Institution:
(do not list acct numbers)

Bank name (required): HORIZON COMMUNITY BANK
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: _____

Treasurer's signature: Wendy Moore Date: 1-8-2020

Candidate's signature (if applicable): James W... Date: 1/8/2020

