

Initial Application
 Amended Application
 Date: 5/12/2022



**STATE OF ARIZONA
 COMMITTEE STATEMENT
 OF ORGANIZATION**

RECEIVED

COMMITTEE ID NUMBER
 (office use only)
CPC 2022-2

COMMITTEE TYPE (choose one):

MAY 12 2022

Candidate

Committee Name (required): Maria C. Cruz **Office of the City Clerk**
 (first or last name & office) **City of San Luis, Arizona**

Candidate Information: Candidate's Name (required): MARIA C. CRUZ
 Candidate's mailing address (required): P.O. BOX 10382
 Candidate's email address (required): MariacecyRamos@gmail.com
 Candidate's phone number (required): 559-301-7460
 Candidate's website (if any): N/A

Office Sought (choose one): County Office: _____ District (if applicable): _____
 City/Town Office: City District (if applicable): _____
 School Board Office: _____ District (if applicable): _____
 Special District Board: _____ District (if applicable): _____

Election Cycle for Office Sought (year the election will take place) (required): 2022

Party Affiliation: Democrat Green Libertarian Republican Other: N/A
 (required for partisan offices)

Political Action Committee (PAC)

Committee Name (required): _____
 (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)

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COMMITTEE INFORMATION:

Contact Information:
Committee's mailing address (required): P.O. BOX 10382 SAN LUIS AZ 85349
Committee's email address (required): MARIA CECY RAMOS@gmail.com
Committee's phone number (if any): 559-301-7460
Committee's website (if any): N/A

Chairperson's Information:
Chairperson's name (required): MARIA C. CRUZ
Chairperson's physical address (required): 1255 RUIZ AVE.
Chairperson's mailing address (if different): P.O. BOX 10382 SAN LUIS AZ 85349
Chairperson's email address (required): MARIA CECY RAMOS@gmail.com
Chairperson's phone number (required): 559-301-7460
Chairperson's employer (required): N/A
Chairperson's occupation (required): Housewife

Treasurer's Information:
Treasurer's name (required): MARIA C. CRUZ
Treasurer's physical address (required): 1255 RUIZ AVE SAN LUIS AZ 85349
Treasurer's mailing address (if different): P.O. BOX 10382
Treasurer's email address (required): MARIA CECY RAMOS@gmail.com
Treasurer's phone number (required): 559-301-7460
Treasurer's employer (required): N/A
Treasurer's occupation (required): N/A

Bank or Financial Institution:
(do not list acct numbers)
Bank name (required): 1ST BANK YUMA SAN LUIS AZ 85349
Additional bank name (if applicable): N/A
Additional bank name (if applicable): N/A

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: Maria C. Cruz Date: 5/12/22
Treasurer's signature: Maria C. Cruz Date: 5/12/22
Candidate's signature (if applicable): Maria C. Cruz Date: 5/12/22