

Initial Application
 Amended Application
Date: 1-2-2018



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

DIST 6-2018-01
J. G. 1-2-18

CC TEE TYPE (choose one):

Candidate

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

COMMITTEE TO RE-ELECT TODD TANDE FOR CITY COUNCIL DISTRICT 6

Candidate Information:

Candidate's Name (required):

Todd Tande

Candidate's mailing address (required):

14604 W. YUCATAN ST

Candidate's email address (required):

toddTande@gmail.com

Candidate's phone number (required):

623 297-2501

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: COUNCIL District (if applicable): 6

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)

Initial Application
 Amended Application
Date: 1-2-18



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

DES762018-01
djc 1-2-18

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 14604 W. YUCATAN ST.
Committee's email address (required): toddtande@gmail.com
Committee's phone number (if any): 623 297-2501
Committee's website (if any): _____

Chairperson's Information: Chairperson's name (required): Todd Tande
Chairperson's physical address (required): 14604 W. YUCATAN ST
Chairperson's mailing address (if different): _____
Chairperson's email address (required): toddtande@gmail.com
Chairperson's phone number (required): 623 297-2501
Chairperson's employer (required): CITY OF SURPRISE
Chairperson's occupation (required): CITY COUNCIL MEMBER

Treasurer's Information: Treasurer's name (required): Todd Tande
Treasurer's physical address (required): 14604 W. YUCATAN ST
Treasurer's mailing address (if different): _____
Treasurer's email address (required): Todd Tande @ GMAIL.COM
Treasurer's phone number (required): 623 297-2501
Treasurer's employer (required): CITY OF SURPRISE
Treasurer's occupation (required): CITY COUNCIL MEMBER

Bank or Financial Institution: Bank name (required): CHASE Wells FARGO
(do not list acct numbers) Additional bank name (if applicable): WELLS FARGO
Additional bank name (if applicable): BANK OF AMERICA

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: Todd P Tande Date: 1-2-18
Treasurer's signature: Todd P Tande Date: 1-2-18
Candidate's signature (if applicable): Todd P Tande Date: 1-2-18