

- Initial Application  
 Amended Application  
 Date: 1/5/18



**STATE OF ARIZONA  
 COMMITTEE STATEMENT  
 OF ORGANIZATION**

COMMITTEE ID NUMBER  
 (office use only)

DEST 2-2018-03

SSJ 1-5-18

COMMITTEE TYPE (choose one):

**Candidate**

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

Elect Susande Jong City Council District 2

Candidate Information:

Candidate's Name (required):

Susan de Jong

Candidate's mailing address (required):

18050 N Key Estrella Dr Surprise AZ 85374

Candidate's email address (required):

sandibapple@msn.com

Candidate's phone number (required):

623-214-7537 (c) 623-512-0190

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): \_\_\_\_\_

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

2018

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: \_\_\_\_\_



**STATE OF ARIZONA  
COMMITTEE STATEMENT  
OF ORGANIZATION**

COMMITTEE ID NUMBER  
(office use only)

02572-2018-03

SJS  
1-5-18

91 COMMITTEE INFORMATION:

**Contact Information:** Committee's mailing address (required): 18050 N Key Estrella Dr. Surprise AZ 85374  
 Committee's email address (required): sandbapple@msn.com  
 Committee's phone number (if any): 623 214 7537 - (C) 623 512 0190  
 Committee's website (if any): \_\_\_\_\_

**Chairperson's Information:** Chairperson's name (required): Susan de Jong  
 Chairperson's physical address (required): 18050 N Key Estrella Dr Surprise AZ 85374  
 Chairperson's mailing address (if different): \_\_\_\_\_  
 Chairperson's email address (required): sandbapple@msn.com  
 Chairperson's phone number (required): 623 214 7537  
 Chairperson's employer (required): retired  
 Chairperson's occupation (required): retired

**Treasurer's Information:** Treasurer's name (required): Susan deJong  
 Treasurer's physical address (required): 18050 N Key Estrella Dr. Surprise AZ 85374  
 Treasurer's mailing address (if different): \_\_\_\_\_  
 Treasurer's email address (required): sandbapple@msn.com  
 Treasurer's phone number (required): 623 214 7537  
 Treasurer's employer (required): retired  
 Treasurer's occupation (required): retired

**Bank or Financial Institution:** Bank name (required): Chase  
 (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.

Chairperson's signature: Susan de Jong Date: 1/5/18  
 Treasurer's signature: Susan de Jong Date: 1/5/18  
 Candidate's signature (if applicable): Susan de Jong Date: 1/5/18