

ASG 11-24-2021

Initial Application
 Amended Application
Date: 11-24-2021



STATE OF ARIZONA COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)
DFST 5-2020-02

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): Jack Hastings for District 5 Council
(first or last name & office)

Candidate Information:

Candidate's Name (required): Jack Hastings

Candidate's mailing address (required): 15267 140th Dr Unit 1023 Surprise, AZ 85379

Candidate's email address (required): jackforsurprise@gmail.com

Candidate's phone number (required): (480) 318-0397

Candidate's website (if any): jackforsurprise.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: Surprise City Council District (if applicable): 5

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

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): 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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**STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION**

COMMITTEE ID NUMBER
(office use only)
DIS5-2020-02

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 15267 N 140th Dr Unit 1023 Surprise, AZ 85379
Committee's email address (required): jackfor surprise@gmail.com
Committee's phone number (if any): (480) 318-0397
Committee's website (if any): jackfor surprise.com

Chairperson's Information: Chairperson's name (required): Jack Hastings
Chairperson's physical address (required): 15267 N 140th Dr Unit 1023 Surprise AZ 85379
Chairperson's mailing address (if different): same as above
Chairperson's email address (required): jackfor surprise@gmail.com
Chairperson's phone number (required): (480) 318-0397
Chairperson's employer (required): Dysart Unified School District / City of Surprise
Chairperson's occupation (required): Teacher / City Councilman

Treasurer's Information: Treasurer's name (required): Jack Hastings
Treasurer's physical address (required): 15267 N 140th Unit 1023 Surprise AZ 85379
Treasurer's mailing address (if different): same as above
Treasurer's email address (required): jackforsurprise@gmail.com
Treasurer's phone number (required): (480) 318-0397
Treasurer's employer (required): Dysart Unified School District / City of Surprise
Treasurer's occupation (required): Teacher / City Councilman

Bank or Financial Institution: Bank name (required): Bank of America
(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: [Signature] Date: 11/24/2021
Treasurer's signature: [Signature] Date: 11/24/2021
Candidate's signature (if applicable): [Signature] Date: 11/24/2021