

Initial Application
 Amended Application
Date: 04/02/2020



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

RECEIVED 2020-63

COMMITTEE TYPE (choose one):

APR 6 2020

Candidate

Committee Name (required): Christensen Supervisor District 3

APACHE COUNTY ELECTION

TIME:

Candidate Information:

Candidate's Name (required): Steve Christensen

Candidate's mailing address (required): 147 S. Papago, Springerville, AZ 85938

Candidate's email address (required): stevechrisc@yahoo.com

Candidate's phone number (required): 245-2294

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: Supervisor District (if applicable): 3

City/Town Office: District (if applicable):

Election Cycle for Office Sought (year the election will take place) (required): 2020

Party Affiliation:

(required for partisan offices)

Democrat Green Libertarian Republican Other:

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)

Citizens for Christensen Supervisor District 3 Apache County - Democrat

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:

APACHE COUNTY ELECTION
 TIME:

Contact Information: Committee's mailing address (required): 147 S. Papago St., Springerville, AZ
 Committee's email address (required): stevechrisc@yahoo.com
 Committee's phone number (if any): 245-2294
 Committee's website (if any): _____

Chairperson's Information: Chairperson's name (required): Karalea Cox
 Chairperson's physical address (required): 1195 W. 4th St., Eagar, AZ 85925
 Chairperson's mailing address (if different): P O Box 1966, Eagar, AZ 85925
 Chairperson's email address (required): karaleacox@gmail.com
 Chairperson's phone number (required): 245-1998
 Chairperson's employer (required): self
 Chairperson's occupation (required): consultant

Treasurer's Information: Treasurer's name (required): Terry Shove
 Treasurer's physical address (required): 51 S. Pima St., Springerville, Az 85938
 Treasurer's mailing address (if different): P O Box 1205, Springerville, AZ 85938
 Treasurer's email address (required): tlshove@gmail.com
 Treasurer's phone number (required): 580-7112
 Treasurer's employer (required): retired
 Treasurer's occupation (required): retired educator

Bank or Financial Institution: Bank name (required): Citizens for Christensen District 3 Apache County - Democrat
 (do not list acct numbers) Additional bank name (if applicable): Pima Federal Credit Union
 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: Karalea Cox Date: 4-6-20
 Treasurer's signature: Terry Shove Date: 4-6-20
 Candidate's signature (if applicable): _____ Date: 4-6-20