



0000412460



STATE OF ARIZONA
POLITICAL COMMITTEE
STATEMENT OF ORGANIZATION

- Initial Registration
Amended Statement
Out of State Committee
Standing Political Committee

Titles 16 & 19, Arizona Revised Statutes
Definitions, statutory references and important information on page 2.

COMMITTEE ID NUMBER
201800150

Form with multiple sections: NAME OF POLITICAL COMMITTEE (RAD FINAL 2), TYPE OF COMMITTEE (POLITICAL ACTION COMMITTEE), COMMITTEE ADDRESS (9806 N 5TH STREET), COMMITTEE Mailing Address, Telephone/Fax/Email, Sponsoring Organization, Chairman (Mickey Jones), Treasurer (Travis Vandenbrul), Financial Institutions (Wells Fargo), Candidate Information.

Committee ID: **201800150**
 Date: **03/18/2017**
 Form ID: **0000412460**



**STATE OF ARIZONA
 POLITICAL COMMITTEE
 STATEMENT OF ORGANIZATION**

YOUR APPLICATION IS NOT COMPLETE WITHOUT THE REQUIRED SIGNATURES BELOW:

BOX 1 All committees require the signature of both the chairman and treasurer. Standing Committees, see BOX 3 below.

CHAIRMAN'S AND TREASURER'S STATEMENT: We, the undersigned chairman and treasurer, have read all of the applicable laws relating to campaign finance and reporting and have examined the information contained in this statement of organization and, to the best of our knowledge and belief, it is true, correct and complete.

Date: _____ Chairman's signature: _____
 Date: _____ Treasurer's signature: _____

BOX 2 Complete and sign this additional box only if the committee is a candidate's campaign committee or exploratory committee.

DESIGNATING INDIVIDUAL OR CANDIDATE'S STATEMENT: I authorize the above -named political committee as my political committee to receive contributions and make expenditures on my behalf.

Date: _____ D/I's or Candidate's signature: _____

BOX 3 Complete and notarize this box only if the committee has been in existence for more than one year and is filing for Standing Committee status.

STANDING POLITICAL COMMITTEE'S STATEMENT (if applicable) (A.R.S. §16 -902.01): I/we hereby declare the status of this political committee as a standing political committee.

Date: _____ Chairman's signature: _____
 Date: _____ Treasurer's signature: _____

State of Arizona) State of Arizona)
) ss.) ss.
 County of _____) County of _____)

SUBSCRIBED AND SWORN TO before me this _____ SUBSCRIBED AND SWORN TO before me this _____

 Notary Public My Commission Expires: _____ Notary Public My Commission Expires: _____