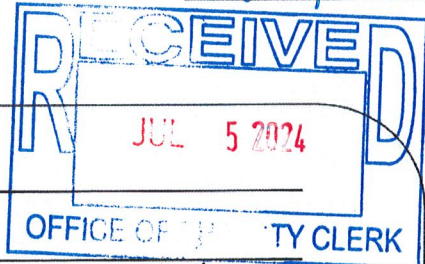


Initial Application  
 Amended Application  
 Date: \_\_\_\_\_



STATE OF ARIZONA  
 COMMITTEE STATEMENT  
 OF ORGANIZATION

COMMITTEE ID NUMBER  
 (office use only)  
C2024-002



COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): Faye Jackson City Council  
 (first or last name & office)

Candidate Information: Candidate's Name (required): Faye Jackson  
 Candidate's mailing address (required): 289 S. Highway 92 Apt #16261  
 Candidate's email address (required): jacksonarizonacouncil@lake.com  
 Candidate's phone number (required): 520-366-7404  
 Candidate's website (if any): \_\_\_\_\_

Office Sought (choose one):  County Office: \_\_\_\_\_  District (if applicable): \_\_\_\_\_  
 City/Town Office: Sierra Vista, AZ  District (if applicable): \_\_\_\_\_  
 School Board Office: \_\_\_\_\_  District (if applicable): \_\_\_\_\_  
 Special District Board: \_\_\_\_\_  District (if applicable): \_\_\_\_\_

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

Party Affiliation:  Democrat  Green  Libertarian  Republican  Other: Independent  
 (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)



Initial Application  
 Amended Application  
 Date: \_\_\_\_\_



**STATE OF ARIZONA  
 COMMITTEE STATEMENT  
 OF ORGANIZATION**

COMMITTEE ID NUMBER  
 (office use only)  
G-2024-002

COMMITTEE INFORMATION:

**Contact Information:** Committee's mailing address (required): 289 S. Highway 92  
 Committee's email address (required): Jacksonarizona.candidate@gmail.com  
 Committee's phone number (if any): 520-366-7404  
 Committee's website (if any): N/A

**Chairperson's Information:** Chairperson's name (required): Faye Jackson  
 Chairperson's physical address (required): 289 S. Highway 92 Apt 16201  
 Chairperson's mailing address (if different): 289 S. Highway 92 Apt 16201  
 Chairperson's email address (required): jacksonarizona.candidate@gmail.com  
 Chairperson's phone number (required): 520-366-7404  
 Chairperson's employer (required): U.S. Army  
 Chairperson's occupation (required): Housing Manager

**Treasurer's Information:** Treasurer's name (required): Miriam Strauss  
 Treasurer's physical address (required): 4882 Loma Loop SV, AZ 85635  
 Treasurer's mailing address (if different): same as above  
 Treasurer's email address (required): miriamj16@gmail.com  
 Treasurer's phone number (required): 520-236-5413  
 Treasurer's employer (required): MBA Student WS N/A  
 Treasurer's occupation (required): MBA Student

**Bank or Financial Institution:** Bank name (required): Navy Federal Credit Union  
 (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: Faye Jackson Date: 4 July 2024

Treasurer's signature: Miriam Strauss Date: 4 July 2024

Candidate's signature (if applicable): Faye Jackson Date: 4 July 2024