

Initial Application  
 Amended Application  
Date: 5/18/2020

## COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)

2020-04

MAY 18 RECD 2020

2:34pm JJ

**TOWN CLERK DEPT.**

COMMITTEE TYPE (choose one):

**Candidate**

Committee Name (required): MARY WILLIAMS FOR PV TOWN COUNCIL  
(first or last name & office)

Candidate Information: Candidate's Name (required): MARY WILLIAMS  
Candidate's mailing address (required): 5778 N GALLERY LANE, PRESCOTT VALLEY, AZ 86314  
Candidate's email address (required): MARY@VOTEMARYWILLIAMS.COM  
Candidate's phone number (required): 928-830-3373  
Candidate's website (if any): www.VOTEMARYWILLIAMS.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: TOWN COUNCIL  District (if applicable): \_\_\_\_\_

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

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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COMMITTEE INFORMATION:

*Contact Information:* Committee's mailing address (required): 5778 N GALLERY LN, PRESCOTT VALLEY 86  
Committee's email address (required): MARY@VOTEMARYWILLIAMS.COM  
Committee's phone number (if any): 928-830-3373  
Committee's website (if any): www.VOTEMARYWILLIAMS.COM

*Chairperson's Information:* Chairperson's name (required): MARY WILLIAMS  
Chairperson's physical address (required): SAME AS ABOVE  
Chairperson's mailing address (if different): \_\_\_\_\_  
Chairperson's email address (required): \_\_\_\_\_  
Chairperson's phone number (required): \_\_\_\_\_  
Chairperson's employer (required): \_\_\_\_\_  
Chairperson's occupation (required): \_\_\_\_\_

*Treasurer's Information:* Treasurer's name (required): DAVID C. WILLIAMS  
Treasurer's physical address (required): 5778 N GALLERY LN, PRESCOTT VALLEY 86  
Treasurer's mailing address (if different): SAME  
Treasurer's email address (required): MARY@VOTEMARYWILLIAMS.COM  
Treasurer's phone number (required): 928-830-7860  
Treasurer's employer (required): SELF-WILLIAMS ACCOUNTING & TAX  
Treasurer's occupation (required): ACCOUNTANT-ENROLLED AGENT

*Bank or Financial Institution:* Bank name (required): ONE AZ 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: Mary Williams Date: 5.18.20  
Treasurer's signature: [Signature] Date: 5/18/2020  
Candidate's signature (if applicable): Mary Williams Date: 5.18.20