



COMMITTEE ID NUMBER (office use only)

OMMITTEE TYPE (choose one):

☐ Candidate	BY:
Committee Name (required): first or last name & office)	Friends of Emilena Turley
Candidate Information:	Candidate's Name (required): Emilena Turley
	Candidate's mailing address (required): 21266 S. 213th Pl. Queen Creek, AZ 85142
	Candidate's email address (required):emilena@emilenaturley.com
	Candidate's phone number (required): 602-570-8430
	Candidate's website (if any):www.emilenaturlev.com
, , , , , , , , , , , , , , , , , , ,	□ Governor □ Secretary of State □ Attorney General □ State Treasurer □ Superintendent of Public Instruction □ State Mine Inspector □ Corporation Commissione
	☐ State Senate ☐ State House of Representatives ☐ District (required):
	☐ County Office: ☐ District (if applicable):
	City/Town Office: Queen Creek   District (if applicable):
Election Cycle for Office Soug	tht (year the election will take place) (required): 2018
Party Affiliation: required for partisan offices)	□ Democrat □ Green □ Libertarian □ Republican □ Other;
Political Function (optional): (select any that apply)  Sponsorship Information: (if applicable)  Special Status	□ Contributions □ Candidate-Related Independent Expenditures □ Ballot Measure Expenditures □ Recall Expenditures  Sponsor's name or nickname (required): □ Sponsor's malling address (required): □ Sponsor's email address (required): □ Sponsor's phone number (if any): □ Sponsor's website (if any): □ □ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union
(if applicable)	☐ 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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OMMITTEE INFORMATION:

Contact Information:	Committee's mailing address (required): 21266 S. 213th Pl. Queen Creek, AZ 85142
	Committee's email address (required): emilena@emilenaturiey.com
	Committee's phone number (if any);602-570-8430
	Committee's website (if any): www.emilenaturley.com
Chairperson's Information:	Chairperson's name (required): Emilena Turley
	Chairperson's physical address (required): 21266 S. 213th Pl. Queen Creek, AZ 85142
	Chairperson's mailing address (if different):
	Chairperson's email address (required): emilena@emilenaturley.com
	Chairperson's phone number (required): 602-570-8430
	Chairperson's employer (required):Town of Queen Creek & Self
	Chairperson's occupation (required) Council Member & Independent Paralegal
Treasurer's Information:	Treasurer's name (required): Emilena Turley
	Treasurer's physical address (required): 21266 S. 213th Pt. Queen Creek, AZ 85142
	Treasurer's mailing address (if different):
	Treasurer's email address (required): emilena@emilenaturley.com
	Treasurer's phone number (required): 602-570-8430
	Treasurer's employer (required): Town of Queen Creek & Self
	Treasurer's occupation (required): Council Member & Independent Paralegal
Bank or Financial Institution:	
(do not list acct numbers)	Additional bank name (ifapplicable):
\	Additional bank name (if applicable):
chairperson or treasurer of t committee and authorize it to campaign finance and repor	erjury that the foregoing information is true and correct. I further declare that I: (1) consent to serve as the committee named herein, if applicable; (2) designate the above-named committee as my official candidate or receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secretary of State's ting 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 address(es) provided herein Chairperson's signature:	
Treasurer's signature:	Date:
Candidate's signature (if app	plicable):