



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)
C-18-001

Initial Application
Amended Application
Date: 7/24/2018

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): Committee to elect Sterling Beus Pinetop, Lakeside Town Council

Candidate Information:
Candidate's Name (required): Sterling A Beus
Candidate's mailing address (required): PO Box 4111
Candidate's email address (required): ~~beus@pinetop.net~~ sterlingbeustcp15@gmail.com
Candidate's phone number (required): 928 367-2527
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, District (if applicable), City/Town Office: Town Council, District (if applicable)

Election Cycle for Office Sought (year the election will take place) (required): 2018

Party Affiliation: Democrat, Green, Libertarian, Republican, Other

Political Action Committee (PAC)

Committee Name (required):

Political Function (optional): Contributions, Candidate-Related Independent Expenditures, Ballot Measure Expenditures, Recall Expenditures

Sponsorship Information:
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):

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: 7/26/2018



STATE OF ARIZONA  
COMMITTEE STATEMENT  
OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)

C-18-001

COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required): PO Box 4111, Pinetop, AZ 85935

Committee's email address (required): \_\_\_\_\_

Committee's phone number (if any): 928 367-2527

Committee's website (if any): sterlingboustept15@gmail.com

Chairperson's Information:

Chairperson's name (required): PAUL M WATSON

Chairperson's physical address (required): 425 E PEBBLE CREEK LN, PINETOP

Chairperson's mailing address (if different): PO Box 2116 PINETOP, AZ 85935

Chairperson's email address (required): paul.watson.55@icloud.com

Chairperson's phone number (required): 928 243-3137

Chairperson's employer (required): NAVATO COUNTY

Chairperson's occupation (required): ASST. CO. MGR/ECON. DEV. DIR

Treasurer's Information:

Treasurer's name (required): Leslee Wessel

Treasurer's physical address (required): 580 S. Adair Springs Ln, Pinetop, AZ 85935

Treasurer's mailing address (if different): same

Treasurer's email address (required): wessel@cableone.net

Treasurer's phone number (required): 928-367-5198

Treasurer's employer (required): N/A

Treasurer's occupation (required): Municipal clerk, retired

Bank or Financial Institution:  
(do not list acct numbers)

Bank name (required): National Bank of Arizona

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: [Signature] Date: 7-25-18

Treasurer's signature: [Signature] Date: 7-25-18

Candidate's signature (if applicable): [Signature] Date: 7-26-18