

- Initial Application
 - Amended Application
- Date: _____



**STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION**

COMMITTEE ID NUMBER
(office use only)

MIL-18

COMMITTEE TYPE (choose one):

18 APR 13 13:22 31s

Candidate

Committee Name (required): Committee to Elect Jen Miles
(first or last name & office)

Candidate Information:
Candidate's Name (required): Jennee (Jen) H. Miles
Candidate's mailing address (required): [REDACTED] Kingman, AZ 86409
Candidate's email address (required): jenmiles111@gmail.com
Candidate's phone number (required): 928 380-4880
Candidate's website (if any): JenMiles4Mayor.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: Mayor, City of Kingman, AZ District (if applicable): _____

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

Party Affiliation: Democrat Green Libertarian Republican Other: N/A
(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:
(if applicable)
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 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 Standing Committee (must also complete separate standing committee registration)
(if applicable)

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COMMITTEE ID NUMBER
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MIL-18

COMMITTEE INFORMATION:

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Contact Information:
Committee's mailing address (required): [REDACTED] Kingman, AZ 86409
Committee's email address (required): jenmiles111@gmail.com
Committee's phone number (if any): 928 380-4880
Committee's website (if any): JenMiles4Mayor.com

Chairperson's Information:
Chairperson's name (required): Jennee H. Miles
Chairperson's physical address (required): [REDACTED] Kingman, AZ 86409
Chairperson's mailing address (if different): _____
Chairperson's email address (required): jenmiles111@gmail.com
Chairperson's phone number (required): 928 380-4880
Chairperson's employer (required): Retired
Chairperson's occupation (required): Retired Administrator

Treasurer's Information:
Treasurer's name (required): Jennee H. Miles
Treasurer's physical address (required): [REDACTED] Kingman, AZ 86409
Treasurer's mailing address (if different): _____
Treasurer's email address (required): jenmiles111@gmail.com
Treasurer's phone number (required): 928 380-4880
Treasurer's employer (required): Retired
Treasurer's occupation (required): Retired Administrator

Bank or Financial Institution:
(do not list acct numbers) Bank name (required): Mohave Community Federal Credit Union
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: Jennee H Miles Date: 4-12-2018
Treasurer's signature: Jennee H Miles Date: 4-12-2018
Candidate's signature (if applicable): Jennee H Miles Date: 4-12-2018