

Initial Application  
 Amended Application  
 Date: 04/03/2018



**RECEIVED**  
 PINAL COUNTY COMMITTEE STATEMENT OF ORGANIZATION APR - 3 2018  
 Pinal County Elections Dept.

COMMITTEE ID NUMBER  
 (office use only)

COMMITTEE TYPE (choose one):

**Candidate**

*Committee Name* (required): Committee to Re-Elect Arnold Estrada Justice of the Peace  
 (first or last name & office)

*Candidate Information:* Candidate's Name (required): Joe Arnold Estrada, Sr.  
 Candidate's mailing address (required): 1026 W. Webb Dr., San Manuel, AZ 85631  
 Candidate's email address (required): PinalJP5@gmail.com  
 Candidate's phone number (required): (520) 784-4096  
 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: Justice of the Peace     District (if applicable): Precinct #5  
 City/Town Office: \_\_\_\_\_     District (if applicable): \_\_\_\_\_

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

*Party Affiliation:* (required for partisan offices)  Democrat     Green     Libertarian     Republican     Other: \_\_\_\_\_

**Political Action Committee (PAC)**

*Committee Name* (required): \_\_\_\_\_  
 (if sponsored, must include sponsor's name)

*Political Function* (optional): (select any that apply)  Contributions     Candidate-Related Independent Expenditures  
 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* (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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**PINAL COUNTY  
COMMITTEE STATEMENT  
OF ORGANIZATION**

COMMITTEE ID NUMBER  
(office use only)

COMMITTEE INFORMATION:

**Contact Information:** Committee's mailing address (required): 1026 W. Webb Dr., San Manuel, AZ 85631  
Committee's email address (required): PinalJP5@gmail.com  
Committee's phone number (if any): \_\_\_\_\_  
Committee's website (if any): \_\_\_\_\_

**Chairperson's Information:** Chairperson's name (required): Joe Arnold Estrada, Sr.  
Chairperson's physical address (required): 1026 W. Webb Dr., San Manuel, AZ 85631  
Chairperson's mailing address (if different): \_\_\_\_\_  
Chairperson's email address (required): PinalJP5@gmail.com  
Chairperson's phone number (required): (520) 784-4096  
Chairperson's employer (required): Pinal County  
Chairperson's occupation (required): Justice of the Peace

**Treasurer's Information:** Treasurer's name (required): Joe Arnold Estrada, Sr.  
Treasurer's physical address (required): 1026 W. Webb Dr., San Manuel, AZ 85631  
Treasurer's mailing address (if different): \_\_\_\_\_  
Treasurer's email address (required): PinalJP5@gmail.com  
Treasurer's phone number (required): (520) 784-4096  
Treasurer's employer (required): Pinal County  
Treasurer's occupation (required): Justice of the Peace

**Bank or Financial Institution:** Bank name (required): Pinal County 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: Joe Arnold Estrada Sr. Date: 04/03/2018  
Treasurer's signature: Joe Arnold Estrada Sr. Date: 04/03/2018  
Candidate's signature (if applicable): Joe Arnold Estrada Sr. Date: 04/03/2018