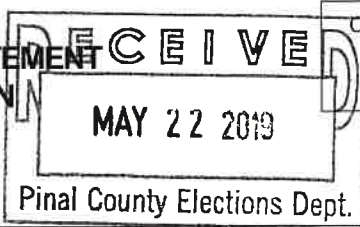


Initial Application  
 Amended Application  
 Date: 5/22/2019

PINAL COUNTY

**PINAL COUNTY  
COMMITTEE STATEMENT  
OF ORGANIZATION**



COMMITTEE ID NUMBER  
(office use only)

020190522

COMMITTEE TYPE (choose one):

**Candidate**

Committee Name (required): Sheriff Lamb  
(first or last name & office)

Candidate Information: Candidate's Name (required): Mark Thomas Lamb

Candidate's mailing address (required): 540 W Fairfield St., San Tan Valley, AZ 85143

Candidate's email address (required): mark@sheriffamb.com

Candidate's phone number (required): 480-823-0815

Candidate's website (if any): www.sheriffamb.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: Sheriff     District (if applicable): \_\_\_\_\_

City/Town Office: \_\_\_\_\_     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)

Initial Application  
 Amended Application  
Date: \_\_\_\_\_



**PINAL COUNTY  
COMMITTEE STATEMENT  
OF ORGANIZATION**

COMMITTEE ID NUMBER  
(office use only)

COMMITTEE INFORMATION:

**Contact Information:** Committee's mailing address (required): 85 W. Combs Rd. Suite 101 Box 110 , San Tan Valley, AZ 85140  
Committee's email address (required): info@sherifflamb.com  
Committee's phone number (if any): 480-823-0815  
Committee's website (if any): www.sherifflamb.com

**Chairperson's Information:** Chairperson's name (required): Mark Thomas Lamb  
Chairperson's physical address (required): 540 W. Fairfield St., San Tan Valley, Az 85143  
Chairperson's mailing address (if different): 85 W. Combs Rd. Suite 101 Box 110 , San Tan Valley, AZ 85140  
Chairperson's email address (required): mark@sherifflamb.com  
Chairperson's phone number (required): 480-823-0815  
Chairperson's employer (required): Pinal County Sheriff's Office  
Chairperson's occupation (required): Sheriff

**Treasurer's Information:** Treasurer's name (required): Mark Thomas Lamb  
Treasurer's physical address (required): 540 W. Fairfield St., San Tan Valley, Az 85143  
Treasurer's mailing address (if different): 85 W. Combs Rd. Suite 101 Box 110 , San Tan Valley, AZ 85140  
Treasurer's email address (required): mark@sherifflamb.com  
Treasurer's phone number (required): 480-823-0815  
Treasurer's employer (required): Pinal County Sheriff's Office  
Treasurer's occupation (required): Sheriff

**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: [Signature] Date: 05/06/19  
Treasurer's signature: [Signature] Date: 05/06/19  
Candidate's signature (if applicable): [Signature] Date: 05/06/19