☐ Initial Application
☐ Amended Application
Date: _____7-23-2021____



COMMITTEE ID NUMBER (office use only) CAN 2018-04

COMMITTEE TYPE (choose one):

ommittee Name (required).	Jen Duff 4 Mesa		
Committee Name (required): (first or last name & office)	JOH Dull 4 Micsa		
,	Candidata's Name (required): Jenn Duff		
Candidate Information:	Candidate's Name (required).		
	Candidate's mailing address (required): P.O. Box 1484, Mesa, AZ 85211 jen@jenduff4mesa.com		
	Oandidate's chair address (required).		
	Candidate's phone number (required):		
	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 Commissione		
	☐ State Senate ☐ State House of Representatives ☐ District (required):		
	□ County Office:		
	Ճ City/Town Office: Mesa □ District (if applicable):		
	2022		
Election Cycle for Office Sou	ght (year the election will take place) (required):		
Party Affiliation:	□ Democrat □ Green □ Libertarian □ Republican □ Other:		
□ Political Action Committee Name (required): if sponsored, must include	nittee (PAC)		
☐ Political Action Comi			
☐ Political Action Comi Committee Name (required): if sponsored, must include			
☐ Political Action Common Committee Name (required): if sponsored, must include sponsor's name)			
☐ Political Action Comi Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional):	☐ Contributions ☐ Candidate-Related Independent Expenditures ☐ Ballot Measure Expenditures ☐ Recall Expenditures		
Political Action Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply)	□ Contributions □ Candidate-Related Independent Expenditures		
□ Political Action Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information:	☐ Contributions ☐ Candidate-Related Independent Expenditures ☐ Ballot Measure Expenditures ☐ Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required):		
□ Political Action Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information:	□ Contributions □ Candidate-Related Independent Expenditures □ Ballot Measure Expenditures □ Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's phone number (if any):		
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□ Political Action Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information: if applicable)	□ Contributions □ Candidate-Related Independent Expenditures □ Ballot Measure Expenditures □ Recall Expenditures 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): □ Sponsor		
□ Political Action Committee Name (required): if sponsored, must include sponsor's name) Political Function (optional): select any that apply) Sponsorship Information:	□ Contributions □ Candidate-Related Independent Expenditures □ Ballot Measure Expenditures □ Recall Expenditures Sponsor's name or nickname (required): Sponsor's mailing address (required): Sponsor's email address (required): Sponsor's phone number (if any):		

☐ Initial Application
□ Amended Application
Date:



COMMITTEE ID NUMBER (office use only)

COMMITTEE INFORMATION:

Contact Information:	Committee's mailing address (required):	P.O. Box 1484, Mesa, AZ 85211
	Committee's email address (required):	info@ienduff4mesa.com
	Committee's phone number (if any):	602-524-9852
	Committee's website (if any):	www.ienduff4mesa.com
Chairperson's Information:	Chairperson's name (required):	Jennifer Duff
	Chairperson's physical address (required):	142 W 2 nd St, Mesa, AZ 85201
	Chairperson's mailing address (if different):	DO D 1404 M 47 05011
	Chairperson's email address (required):	ien@ienduff4mesa.com
	Chairperson's phone number (required):	602 524 0852
	Chairperson's employer (required):	Jef International Inc
	Chairperson's occupation (required):	Import/Export
Treasurer's Information:	Treasurer's name (required):	371 4 1 34 41
	Treasurer's physical address (required):	1790 E Redfield Road, Gilbert, AZ 85234
	Treasurer's mailing address (if different):	
	Treasurer's email address (required):	vnuci4o@yahoo.com
	Treasurer's phone number (required):	190 251 0460
	Treasurer's employer (required):	JPCI Services
	Treasurer's occupation (required):	The state of the s
Bank or Financial Institution:	Bank name (required):	Gateway Bank
(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 chairperson or treasurer of the committee named herein, if applicable; (2) designate committee and authorize it to receive/make contributions/expenditures on my behaviorable finance and reporting guide; (4) agree to comply with Arizona election la	te the above-named committee as my official candidate alf, if applicable; (3) have read the Secretary of State's aw, 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 paddress(es) provided herein.	process for campaign finance purposes via the email
Chairperson's signature:	Date: 7/20/21
2	Date.
Treasurer's signature: Tectorial Martinez	Date: 7.20-2
Candidate's signature (if applicable):	Date: 7/20/21
0 0 1/	