☐ Initial Application
☐ Amended Application
Date: 4/19/2018



COMMITTEE ID NUMBER (office use only) CAN 2020-04

COMMITTEE TYPE (choose one):

2018 APR 19 PM 1: 05

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Committee Name (required):	John Giles for Mayor
(first or last name & office)	
Candidate Information:	Candidate's Name (required): John C. Giles
	Candidate's mailing address (required): 2625 N. 24th Street #14, Mesa, AZ 85213
	Candidate's email address (required):johngilesformayor@gmail.com
	Candidate's phone number (required): 480-964-3505
	Candidate's website (if any):John Giles for Mayor
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: ☐ District (if applicable):
	☑ City/Town Office: Mayor □ District (if applicable):
Election Cycle for Office Sour	tht (year the election will take place) (required):
,	, in the closure, illim take place, (equilibria).
Party Affiliation: (required for partisan offices)	□ Democrat □ Green □ Libertarian ▼ Republican □ Other:
☐ Political Action Comm	nittee (PAC)
Committee Name (required): (if sponsored, must include sponsor's name)	
-p/	
	□ Contributions □ Candidate-Related Independent Expenditures
Political Function (optional): (select any that apply)	☐ Contributions ☐ Candidate-Related Independent Expenditures ☐ Ballot Measure Expenditures ☐ Recall Expenditures
Political Function (optional): (select any that apply)	□ Ballot Measure Expenditures □ Recall Expenditures
Political Function (optional): (select any that apply)  Sponsorship Information:	☐ Ballot Measure Expenditures ☐ Recall Expenditures  Sponsor's name or nickname (required):
Political Function (optional): (select any that apply)  Sponsorship Information:	□ Ballot Measure Expenditures □ Recall Expenditures  Sponsor's name or nickname (required):  Sponsor's mailing address (required):
Political Function (optional): (select any that apply)  Sponsorship Information:	☐ Ballot Measure Expenditures ☐ Recall Expenditures  Sponsor's name or nickname (required):
Political Function (optional): (select any that apply)  Sponsorship Information:	□ Ballot Measure Expenditures □ Recall Expenditures  Sponsor's name or nickname (required):  Sponsor's mailing address (required):  Sponsor's email address (required):
Political Function (optional): (select any that apply)  Sponsorship Information: (if applicable)	□ 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):
Political Function (optional): (select any that apply)  Sponsorship Information: (if applicable)  Special Status	□ 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): □ □ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union
Political Function (optional): (select any that apply)  Sponsorship Information:	□ Ballot Measure Expenditures □ Recall Expenditures  Sponsor's name or nickname (required):
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Political Function (optional): (select any that apply)  Sponsorship Information: (if applicable)  Special Status (if applicable)  Political Party  Committee Name (required):	□ 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): □ 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 filling officer) (amended applications only)
Political Function (optional): (select any that apply)  Sponsorship Information: (if applicable)  Special Status (if applicable)  Political Party  Committee Name (required): (must include party affiliation)	□ 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):  □ 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)
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Political Function (optional): (select any that apply)  Sponsorship Information: (if applicable)  Special Status (if applicable)  Political Party  Committee Name (required): (must include party affiliation)	□ 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):  □ 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)  □ 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)
Political Function (optional): (select any that apply)  Sponsorship Information: (if applicable)  Special Status (if applicable)  Political Party  Committee Name (required): (must include party affiliation)	□ 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): □ 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)  □ State Party (must include proof of qualification pursuant to A.R.S. § 16-801 or § 16-804)
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## **COMMITTEE INFORMATION:**

Contact Information:	Committee's mailing address (required): 238 W. 2nd Street, Mesa, AZ 85201
	Committee's email address (required): johngilesformayor@gmail.com
	Committee's phone number (if any): 480-964-3505
	Committee's website (if any):John Giles for Mayor
Chairperson's Information:	Chairperson's name (required): Beth Coons
	Chairperson's physical address (required): 1539 E. Elmwood Circle, Mesa, AZ 85203
	Chairperson's mailing address (if different):same
	Chairperson's email address (required): bethcoons@gmail.com
	Chairperson's phone number (required): 480-833-5763
	Chairperson's employer (required): Farnsworth Companies
	Chairperson's occupation (required): Chairman
Treasurer's Information:	Treasurer's name (required):
	Treasurer's physical address (required):723 N. Orange Circle, Mesa, AZ 85201
	Treasurer's mailing address (if different):same
	Treasurer's email address (required): jenni@gilesdicksonlaw.com
	Treasurer's phone number (required): 480-964-3505
	Treasurer's employer (required): Giles & Dickson, P.C.
	Treasurer's occupation (required): Legal Assistant
Bank or Financial Institution:	First Fidality Book
(do not list acct numbers)	Additional bank name (if applicable):
	Additional bank name (if applicable):

## DECLARATION AND SIGNATURES:

Treasurer's signature:

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 candidat 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: Beth J. Coons Date: 4/18/18

Candidate's signature (if applicable): Date: 4/1