☐ Initial Application

Amended Application

Date: 01/23/2018



CAN Joso-Jol8-08



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Committee Name (required): (first or last name & office)	Heredia for Mesa
andidate Information:	Candidate's Name (required): Francisco Heredica  Candidate's mailing address (required): 959 w. Mark Ave West, A285
	Candidate's email address (required): <u>heredia formes a Comunitation</u>
	Candidate's phone number (required): 603-46-5044
	Candidate's website (if any): Weldia for Mesacom
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: □ District (if applicable):
Election Cycle for Office Sou	ght (year the election will take place) (required):
Party Affiliation: required for partisan offices)	□ Democrat □ Green □ Libertarian □ Republican □ Other:
Committee Name (required): (if sponsored, must include	
(if sponsored, must include sponsor's name)	
if sponsored, must include sponsor's name)  Political Function (optional):	☐ Contributions ☐ Candidate-Related Independent Expenditures ☐ Ballot Measure Expenditures ☐ Recall Expenditures
if sponsored, must include	□ Contributions □ Candidate-Related Independent Expenditures
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):
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):
of sponsored, must include ponsor'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):
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if sponsored, must include sponsor's name)  Political Function (optional): select any that apply)  Sponsorship Information: if applicable)  Special Status	□ Contributions □ Candidate-Related Independent Expenditures □ Ballot Measure Expenditures □ Recall Expenditures  Sponsor's name or nickname (required):
if sponsored, must include sponsor's name)  Political Function (optional): select any that apply)  Sponsorship Information: if applicable)  Special Status	□ Contributions □ Candidate-Related Independent Expenditures □ Ballot Measure Expenditures □ Recall Expenditures  Sponsor's name or nickname (required):
if sponsored, must include sponsor's name)  Political Function (optional): select any that apply)  Sponsorship Information: if applicable)  Special Status 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): □   □ Separate Segregated Fund of a Corporation, LLC, Partnership, or Union □   □ Standing Committee (must also complete separate standing committee registration)
if sponsored, must include sponsor's name)  Political Function (optional): select any that apply)  Sponsorship Information: if applicable)  Special Status if applicable)  Political Party  Committee Name (required):	□ 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): □ 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)
if sponsored, must include sponsor's name)  Political Function (optional): (select any that apply)  Sponsorship Information: (if applicable)  Special Status (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): □ 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)
if sponsored, must include sponsor's name)  Political Function (optional): select any that apply)  Sponsorship Information: if applicable)  Special Status if applicable)  Political Party  Committee Name (required): (must include party affiliation)	□ 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): □   □ 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)
if sponsored, must include sponsor's name)  Political Function (optional): select any that apply)  Sponsorship Information: if applicable)  Special Status  if applicable)  Political Party  Committee Name (required): (must include party affiliation)	□ 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 website (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)

☐ Initial Application

A Amended Application

Date: 01/23/2018



COMMITTEE ID NUMBER (office use only)

CAN2018-08

## COMMITTEE INFORMATION:

Contact Information:	Committee's mailing address (required): 959 W. Munte Ave Mest Az
	Committee's email address (required): Vered a forme Sacamai I can
	Committee's phone number (if any): 603-410-5044
	Committee's website (if any): www herediatorness.com
Chairperson's Information:	Chairperson's name (required): Deanna Villanue Wa-Saucedo
	Chairperson's physical address (required): 1513 S. Kay Cyr. Mesa, Az 85204
	Chairperson's mailing address (if different):
	Chairperson's email address (required): villasauced @gmail.com
	Chairperson's phone number (required): 480, 4332473
	Chairperson's employer (required): Maricopa Community Colleges
	Chairperson's occupation (required): Community Engagement
Treasurer's Information:	Treasurer's name (required): KARNA E TELIX
	Treasurer's physical address (required): 3219 & CAMBUBOCK ND #352 PHX PROPERTY AND PROPERTY OF THE PROPERTY OF
	Treasurer's mailing address (if different):
	Treasurer's email address (required): Kanna Felixe icloud. com
	Treasurer's phone number (required): 480 -335 -3222
	Treasurer's employer (required): VERSUS LLC
	Treasurer's occupation (required):
Bank or Financial Institution:	Bank name (required): Bank of America
(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 sen	e as	
	chairperson or treasurer of the committee named herein, if applicable; (2) designate the above-named committee as my offic committee and authorize it to receive/make contributions/expenditures on my behalf, if applicable; (3) have read the Secreta	ial cand	
	campaign finance and reporting guide, (4) agree to comply with Arizona election law, including campaign finance laws codifi-	ed at A.I	R.S.
	§§ 16-901 to 16-938; and (5) agree to accept all notifications and legal service of process for campaign finance purposes via address(es) provided herein.	theem	ail
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	Chairperson's signature:	2	>
		23	
	Treasurer's signature: Date: Date:	>	<b>~</b>
(	Candidate's signature (if applicable): Date: 1/17/18	<b>X</b>	
/		 	20
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