

Initial Application
 Amended Application
Date: 6/25/2024



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)
CAU-24-03

JUN 25 2024

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): Jerry Geronimo Martin For Camp Verde town council
(first or last name & office)

Candidate Information: Candidate's Name (required): Jerry Geronimo Martin
Candidate's mailing address (required): 1733 N. Avenida Del Loma Road
Candidate's email address (required): martin.jg@msn.com CV, AZ
Candidate's phone number (required): 928-862-8745
Candidate's website (if any): GeronimoLegends.com

Office Sought (choose one): County Office: _____ District (if applicable): _____
 City/Town Office: _____ District (if applicable): _____
 School Board Office: _____ District (if applicable): _____
 Special District Board: _____ District (if applicable): _____

Election Cycle for Office Sought (year the election will take place) (required): 2024

Party Affiliation: Democrat Green Libertarian Republican Other: NON-PAR
(required for partisan offices)

Political Action Committee (PAC)

Committee Name (required): Jerry Geronimo Martin For Camp Verde town Council
(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)

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C. COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required): 1733N. Arenal Del Loma Rd, CV AZ
Committee's email address (required): martinjg@msn.com
Committee's phone number (if any): 928-862-8745
Committee's website (if any): www.GeronimoLegends.com

Chairperson's Information:

Chairperson's name (required): Jerry Geronimo Martin
Chairperson's physical address (required): 1733N. Arenal Del Loma Rd CV AZ
Chairperson's mailing address (if different): 1733N Arenal Del Loma Rd, CV AZ
Chairperson's email address (required): martinjg@msn.com
Chairperson's phone number (required): 928-862-8745
Chairperson's employer (required): Retired
Chairperson's occupation (required): Indigenous Historical Speaker

Treasurer's Information:

Treasurer's name (required): Jerry Geronimo Martin
Treasurer's physical address (required): 1733N. Arenal Del Loma Rd CV AZ
Treasurer's mailing address (if different): 1733N. Arenal Del Loma Rd CV AZ
Treasurer's email address (required): martinjg@msn.com
Treasurer's phone number (required): 928-862-8745
Treasurer's employer (required): Retired
Treasurer's occupation (required): Indigenous Historical Speaker

Bank or Financial Institution:
(do not list acct numbers)

Bank name (required): Wells Fargo
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: _____

Date: 06/25/2024

Treasurer's signature: _____

Date: 06/25/2024

Candidate's signature (if applicable): _____

Date: 06/25/2024