

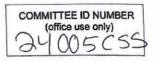
COMMITTEE TYPE (choose one):

Candidate's mailing address (required): 2230 N Mago Candidate's email address (required): jcjkhc@gmail.c Candidate's phone number (required): (480) 231-5631 Candidate's website (if any):			
Candidate's mailing address (required): 2230 N Mago Candidate's email address (required): jcjkhc@gmail.cc Candidate's phone number (required): (480) 231-5631 Candidate's website (if any):			
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Candidate's email address (required): <u>jcjkhc@gmail.c</u> Candidate's phone number (required): <u>(480) 231-563</u> Candidate's website (if any):	Candidate's mailing address (required): 2230 N Magdelena PI, Casa Grande, AZ 85122		
Candidate's phone number (required): (480) 231-5631 Candidate's website (if any):	Candidate's email address (required); jcjkhc@gmail.com		
Candidate's website (if any):			
TI lie	rict (if applicable):		
Office Sought (Gloose Gle).	A 1		
	rict (if applicable): CGUHS District #82		
	strict (if applicable): CGUHS District #82		
□ Special District Board: Governing Board □	District (if applicable): CGUHS District #82		
Election Cycle for Office Sought (year the election will take place) (required): 2024			
<del></del>			
Party Affiliation: Democrat Green Libertarian R (required for partisan offices)	epublican Other:		
Market Branches (Special Branches Control Cont			
Political Function (optional): ☐ Contributions ☐ Candidate-Related Indepen (select any that apply) ☐ Ballot Measure Expenditures ☐ Recall Exp	enditures		
Sponsor's name or nickname (required):			
Sponsorship Information: Sponsor's name or nickname (required):			
Sponsorship Information: Sponsor's name or nickname (required):	artnership, or Union		





Committee's mailing address (required):



## COMMITTEE INFORMATION:

Contact Information:

	Committee's email address (required):	
Chairperson's Information:	Committee's phone number (if any):	
	Committee's website (if any):	
	Chairperson's name (required):	
	Chairperson's physical address (required):	
	Chairperson's mailing address (if different):	
	Chairperson's email address (required):	
	Chairperson's phone number (required):	
	Chairperson's employer (required):	
	Chairperson's occupation (required):	
Treasurer's Information:	Treasurer's name (required):	
	Treasurer's physical address (required):	
	Treasurer's mailing address (if different):	
	Treasurer's email address (required):	
	Treasurer's phone number (required):	
	Treasurer's employer (required):	
	Treasurer's occupation (required):	
	Additional bank name (if applicable):	/
v.	Additional bank name (if applicable):	
chairperson or treasurer of the committee and authorize it to	o receive/make contributions/expenditures on my ben- ting guide; (4) agree to comply with Arizona election I ) agree to accept all notifications and legal service of	t. I further declare that I: (1) consent to serve as ate 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. process for campaign finance purposes via the email
Chairperson's signature:		Date:
Treasurer's signature:		
Candidate's signature (if app	olicable): Carrol Zgnor	Date: 09/06/2024
		RECEIVED

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SEP 0.6 2024

PINAL COUNTY SCHOOL OFFICE