

Initial Application  
 Amended Application  
Date: 4/16/21



STATE OF ARIZONA  
COMMITTEE STATEMENT  
OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)  
PAC2101

Received 4/16/21

COMMITTEE TYPE (choose one):

**Candidate**

Committee Name (required): \_\_\_\_\_  
(first or last name & office)

Candidate Information: Candidate's Name (required): \_\_\_\_\_  
Candidate's mailing address (required): \_\_\_\_\_  
Candidate's email 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 Commissioner

State Senate     State House of Representatives     District (required): \_\_\_\_\_  
 County Office: \_\_\_\_\_     District (if applicable): \_\_\_\_\_  
 City/Town Office: \_\_\_\_\_     District (if applicable): \_\_\_\_\_

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

Party Affiliation:  Democrat     Green     Libertarian     Republican     Other: \_\_\_\_\_  
(required for partisan offices)

**Political Action Committee (PAC)**

Committee Name (required): PV Voices PAC  
(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  Separate Segregated Fund of a Corporation, LLC, Partnership, or Union  
(if applicable)     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  Standing Committee (must also complete separate standing committee registration)  
(if applicable)

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(office use only)

COMMITTEE INFORMATION:

**Contact Information:**  
Committee's mailing address (required): 1006 E. Pierson St. 85014  
Committee's email address (required): voicesforpv@gmail.com  
Committee's phone number (if any): \_\_\_\_\_  
Committee's website (if any): voicesforpv.com

**Chairperson's Information:**  
Chairperson's name (required): Jerry Glauser  
Chairperson's physical address (required): 3033 E. 1<sup>st</sup> Ave Suite 710, Denver, CO  
Chairperson's mailing address (if different): \_\_\_\_\_  
Chairperson's email address (required): jerry@theglauusergroup.com  
Chairperson's phone number (required): 720-470-4777  
Chairperson's employer (required): The Glauser Group  
Chairperson's occupation (required): President

**Treasurer's Information:**  
Treasurer's name (required): Joe Downs  
Treasurer's physical address (required): 1006 E. Pierson St. Phoenix AZ 85014  
Treasurer's mailing address (if different): \_\_\_\_\_  
Treasurer's email address (required): arizona.jedowns@gmail.com  
Treasurer's phone number (required): 480-298-9384  
Treasurer's employer (required): Self  
Treasurer's occupation (required): Consultant

**Bank or Financial Institution:**  
Bank name (required): \_\_\_\_\_  
(do not list acct numbers) Additional bank name (if applicable): \_\_\_\_\_  
Additional bank name (if applicable): \_\_\_\_\_

80206

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: Jerry Glauser Date: 7/12/21  
Treasurer's signature: Joe Downs Date: 4/15/21  
Candidate's signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_