

Initial Application
 Amended Application
 Date: 4-2-18



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION
 APR 02 2018

COMMITTEE ID NUMBER
 (office use only)
C18-02

COMMITTEE TYPE (choose one):

CHANDLER CITY CLERK

Candidate
Committee Name (required): Alex Chuang for Chandler
 (first or last name & office)
Candidate Information:
 Candidate's Name (required): Alex Chuang
 Candidate's mailing address (required): 4111 E Nolan Pl Chandler AZ 85249
 Candidate's email address (required): alex@alexChuang.us
 Candidate's phone number (required): 602-539-2100
 Candidate's website (if any): www.AlexChuang.us
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: Council member District (if applicable): _____
Election Cycle for Office Sought (year the election will take place) (required): 2022
Party Affiliation: Democrat Green Libertarian Republican Other: _____
 (required for partisan offices)

Political Action Committee (PAC)
Committee Name (required): _____
 (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:
 (if applicable)
 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): _____
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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COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 4111 E Nolan Pl Chandler AZ 85249
 Committee's email address (required): alex@alexChuang.us
 Committee's phone number (if any): 602-539-2100
 Committee's website (if any): www.AlexChuang.us

Chairperson's Information: Chairperson's name (required): Lucas Thomas
 Chairperson's physical address (required): 1554 W Sahauo Dr Phoenix AZ 85029
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): lucas@westusa.com
 Chairperson's phone number (required): 602-885-1148
 Chairperson's employer (required): West USA Realty
 Chairperson's occupation (required): Realtor

Treasurer's Information: Treasurer's name (required): Alex Chuang
 Treasurer's physical address (required): 4111 E Nolan Pl Chandler AZ 85249
 Treasurer's mailing address (if different): _____
 Treasurer's email address (required): alex@alexChuang.us
 Treasurer's phone number (required): 602-539-2100
 Treasurer's employer (required): IBM
 Treasurer's occupation (required): Strategist / Workforce Analyst

Bank or Financial Institution: Bank name (required): Wells Fargo
 (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 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: April 2, 2018

Treasurer's signature: Date: April 2, 2018

Candidate's signature (if applicable): _____ Date: April 2, 2018