

Initial Application  
 Amended Application  
Date: 2-7-2017



STATE OF ARIZONA  
COMMITTEE STATEMENT RECEIVED  
OF ORGANIZATION

COMMITTEE ID NUMBER  
(office use only)  
C17-01

FEB - 7 2017

COMMITTEE TYPE (choose one):

CHANDLER CITY CLERK

Candidate

Committee Name (required): Rony J. Lamur for Chandler  
(first or last name & office)

Candidate Information:

Candidate's Name (required): Rony Jeremiah Lamur

Candidate's mailing address (required): 2440 E Whitten St - Chandler, AZ 85225

Candidate's email address (required): Lamur1@Yahoo.com

Candidate's phone number (required): 480-930-0176

Candidate's website (if any): WWW.RonyLamur.com

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     District (if applicable): \_\_\_\_\_

Election Cycle for Office Sought (year the election will take place) (required): 2018

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:

CHANDLER CITY CLERK

Contact Information:

Committee's mailing address (required): 2440 E. Whitten St Chandler, AZ 85225  
Committee's email address (required): Lamur1@yahoo.com  
Committee's phone number (if any): 480-930-0176  
Committee's website (if any): www.BonyLamur.com

Chairperson's Information:

Chairperson's name (required): Bony J. Lamur  
Chairperson's physical address (required): 2440 E. Whitten St. Chandler, AZ 85225  
Chairperson's mailing address (if different): \_\_\_\_\_  
Chairperson's email address (required): Lamur1@yahoo.com  
Chairperson's phone number (required): 480-930-0176  
Chairperson's employer (required): Primavera online High School  
Chairperson's occupation (required): Educator

Treasurer's Information:


Treasurer's name (required): Bony Jeremiah Lamur  
Treasurer's physical address (required): \_\_\_\_\_  
Treasurer's mailing address (if different): \_\_\_\_\_  
Treasurer's email address (required): Lamur1@yahoo.com  
Treasurer's phone number (required): 480-930-0176  
Treasurer's employer (required): Primavera online High School  
Treasurer's occupation (required): Educator

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

Bank name (required): CAPITOL ONE BANK.  
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: 02/07/17

Treasurer's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Candidate's signature (if applicable):  Date: 02/07/17