

Initial Application
 Amended Application
 Date: _____



STATE OF ARIZONA
 COMMITTEE STATEMENT
 OF ORGANIZATION

COMMITTEE ID NUMBER
 (office use only)
 C26-01

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): Ron Hardin For Chandler City Council
 (first or last name & office)

Candidate Information: Candidate's Name (required): Ron Hardin
 Candidate's mailing address (required): 1930 West Olive Way
 Candidate's email address (required): ron@ronhardin4az.com
 Candidate's phone number (required): 6023162803
 Candidate's website (if any): RonHardin4AZ.com

Office Sought (choose one): County Office: _____ District (if applicable): _____
 City/Town Office: Chandler City Council 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): 2026

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: 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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COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 2820 S. Alma School Rd., Ste. 18-152, Chandler, AZ 85286
 Committee's email address (required): info@ronhardin4az.com
 Committee's phone number (if any): 4802443130
 Committee's website (if any): RonHardin4AZ.com

Chairperson's Information: Chairperson's name (required): Ron Hardin
 Chairperson's physical address (required): 1930 W. Olive Way, Chandler, AZ 85248
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): ron@ronhardin4az.com
 Chairperson's phone number (required): 6023162803
 Chairperson's employer (required): LE Ventures of Arizona, LLC
 Chairperson's occupation (required): Executive

Treasurer's Information: Treasurer's name (required): Starr Hardin
 Treasurer's physical address (required): 2173 North Iowa Street
 Treasurer's mailing address (if different): _____
 Treasurer's email address (required): Starr@barephysiques.com
 Treasurer's phone number (required): 4804068018
 Treasurer's employer (required): Bare Physiques
 Treasurer's occupation (required): Fitness & Wellness Coach

Bank or Financial Institution: Bank name (required): Desert Schools Financial
 (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: ronald e hardin jr Digitally signed by ronald e hardin jr
Date: 2026.02.11 17:35:26 -07'00' Date: 02/11/2026

Treasurer's signature: Starr Hardin Digitally signed by Starr Hardin
Date: 2026.02.11 16:17:05 -07'00' Date: _____

Candidate's signature (if applicable): ronald e hardin jr Digitally signed by ronald e hardin jr
Date: 2026.02.11 17:35:47 -07'00' Date: 02/11/2026