

Initial Application
 Amended Application
 Date: 3/17/22



**STATE OF ARIZONA
 COMMITTEE STATEMENT
 OF ORGANIZATION**

COMMITTEE ID NUMBER
 (office use only)
2022-01

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): CASSANDRA SCHERM For Florence
 (first or last name & office)

Candidate Information:

Candidate's Name (required): CASSANDRA SCHERM
 Candidate's mailing address (required): 2104 N. Smithsonian Ct. Florence, AZ 85132
 Candidate's email address (required): Cassandra.scherm@gmail.com
 Candidate's phone number (required): 480-201-6481
 Candidate's website (if any): _____

Office Sought (choose one):

County Office: _____ District (if applicable): _____

City/Town Office: Florence 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): 2022

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

Political Action Committee (PAC)

Committee Name (required): CASSANDRA SCHERM FOR FLORENCE
 (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): PFFA (Pending)
 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)

(To be updated)

Political Party

Committee Name (required): CASSANDRA SCHERM FOR FLORENCE
 (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)

Received

MAR 24 2022

Florence
 Town Clerk's Office

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 Amended Application
 Date: _____



**STATE OF ARIZONA
 COMMITTEE STATEMENT
 OF ORGANIZATION**

COMMITTEE ID NUMBER
 (office use only)
 2022/1

COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 2104 N. Smithsonian Ct. Florence, AZ 85132
 Committee's email address (required): CassandraScherm-for-florence@gmail.com
 Committee's phone number (if any): _____
 Committee's website (if any): _____

Chairperson's Information: Chairperson's name (required): Cassandra Scherm
 Chairperson's physical address (required): 2104 N. Smithsonian Florence 85132
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): CassandraScherm-for-florence@gmail.com
 Chairperson's phone number (required): 480-201-6481
 Chairperson's employer (required): Florence Unified School District
 Chairperson's occupation (required): Educator

Treasurer's Information: Treasurer's name (required): Cassandra Scherm
 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): _____

Bank or Financial Institution: Bank name (required): J.P. Morgan Chase Bank
 (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: Cassandra Scherm Date: 3/23/22
 Treasurer's signature: Cassandra Scherm Date: 3/23/22
 Candidate's signature (if applicable): Cassandra Scherm Date: 3/23/22