



**MARICOPA COUNTY
COMMITTEE
STATEMENT OF ORGANIZATION**

Received by email
02/13/2019, 10:03 am

COMMITTEE ID#
1001995

Initial Registration

Amended Registration

TYPE OF POLITICAL COMMITTEE (choose one):

DATE: 02/07/2019

Candidate Political Party
(attach proof of qualification pursuant to ARS 16-802, 16-804 or 16-823)
 Political Action Committee (PAC) County Party Leg Dist Party

COMMITTEE NAME (required) *If sponsored, must include sponsor's name*

Sheridan4Sheriff2020

| | | | |
|---|---|-------------|-------------------|
| RESIDENCE ADDRESS (Number and Street) 22102 E. Boot Hill Parkway | CITY Fort McDowell | STATE AZ | ZIP 85264 |
| MAILING ADDRESS (if Different from Residence Address) PO Box 18297 | CITY Fountain Hills | STATE AZ | ZIP 85269-8297 |
| COMMITTEE PHONE # (required) 602-920-3044 | COMMITTEE EMAIL ADDRESS (required) jerrysheridan2020@gmail.com | | |
| COMMITTEE WEBSITE (if any) Sheridan4Sheriff2020.com | ELECTION CYCLE (year the election will take place) 2020 | | |

CANDIDATE INFORMATION

CANDIDATE NAME:
Gerard "Jerry" Sheridan

PARTY AFFILIATION: Republican OFFICE SOUGHT: (Including District) Sheriff, Maricopa County

| | | | |
|---|-----------------------|-------------|--------------|
| RESIDENCE ADDRESS (Number and Street) 22102 E. Boot Hill Parkway | CITY Fort McDowell | STATE AZ | ZIP 85264 |
|---|-----------------------|-------------|--------------|

POLITICAL ACTION COMMITTEE INFORMATION

POLITICAL FUNCTION (select any that apply)



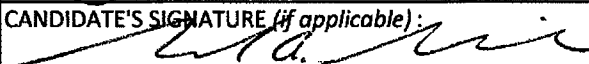
Contributions Recall Expenditures Candidate Related Independent Expenditures Ballot Measure Expenditures

SPECIAL STATUS (if applicable)

Separate Segregated Fund of a Corporation, LLC, Partnership, or Union
 Standing Committee (provide copy of AZSOS registration) Mega PAC (provide copy of AZSOS registration)

SPONSORSHIP INFORMATION (if applicable)

| | |
|------------------|------------------|
| NAME OR NICKNAME | PHONE NUMBER |
| MAILING ADDRESS | |
| EMAIL ADDRESS | WEBSITE (if any) |

| BANK ACCOUNT INFORMATION (BANK NAME) | | | |
|---|--|--|-------------|
| 1. Wells Fargo | 2. | 3. | |
| COMMITTEE OFFICER INFORMATION: | | | |
| CHAIRPERSON (First Name) Mark | | (Last Name) Goldman | |
| RESIDENCE ADDRESS (Number and Street) 16519 E. Jacklin Drive | | CITY Fountain Hills | STATE AZ |
| | | ZIP 85268 | |
| MAILING ADDRESS (If Different from Residence Address) 17851 N. 85th Street, Suite 175 | | CITY Scottsdale | STATE AZ |
| | | ZIP 85255 | |
| CHAIRMAN PHONE # 480-626-8483 | | CHAIRMAN EMAIL ADDRESS mgoldman@gzlawoffice.com | |
| CHAIRMAN OCCUPATION Attorney | | CHAIRMAN EMPLOYER Goldman & Zwillinger PLLC | |
| TREASURER (First Name) Stacie | | (Last Name) Sheridan | |
| RESIDENCE ADDRESS (Number and Street) 22012 E. Boot Hill Parkway | | CITY Fort McDowell | STATE AZ |
| | | ZIP 85264 | |
| MAILING ADDRESS (If Different from Residence Address) PO Box 18297 | | CITY Fountain Hills | STATE AZ |
| | | ZIP 85269-8297 | |
| TREASURER TELEPHONE # 602-370-7228 | | TREASURER EMAIL ADDRESS staciesheridan@msn.com | |
| TREASURER OCCUPATION Realtor | | TREASURER EMPLOYER Self | |
| 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. | | | |
| DATE: 02/07/2019 | CHAIRMAN'S SIGNATURE:  | | |
| DATE: 02/07/2019 | TREASURER'S SIGNATURE:  | | |
| DATE: 02/07/2019 | CANDIDATE'S SIGNATURE (if applicable):  | | |