

- Initial Application
- Amended Application
- Date: \_\_\_\_\_



**STATE OF ARIZONA  
COMMITTEE STATEMENT  
OF ORGANIZATION**

COMMITTEE ID NUMBER  
(office use only)  
C2022-01

COMMITTEE TYPE (choose one):

**Candidate**

Committee Name (required): Vince D'Aresio Councilmember  
(first or last name & office)

Candidate Information: Candidate's Name (required): Vince D'Aresio

Candidate's mailing address (required): PO Box 336

Candidate's email address (required): vincedaresio@carefree.org

Candidate's phone number (required): 480 220 4629

Candidate's website (if any): \_\_\_\_\_

Office Sought (choose one):  County Office: \_\_\_\_\_  District (if applicable): \_\_\_\_\_

City/Town Office: 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): 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: 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): \_\_\_\_\_

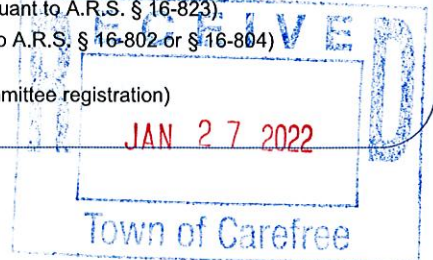
Special Status (if applicable)  Separate Segregated Fund of a Corporation, LLC, Partnership, or Union  
 Standing Committee (must also complete separate standing committee registration)  
 Mega PAC (must provide proof of Mega PAC status to filing officer) (amended applications only)

**Political Party**

Committee Name (required): Vince D'Aresio Councilmember  
(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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**STATE OF ARIZONA  
 COMMITTEE STATEMENT  
 OF ORGANIZATION**

COMMITTEE ID NUMBER  
 (office use only)

COMMITTEE INFORMATION:

**Contact Information:**  
 Committee's mailing address (required): PO Box 3361  
 Committee's email address (required): vinedalicio@carefree.org  
 Committee's phone number (if any): \_\_\_\_\_  
 Committee's website (if any): \_\_\_\_\_

**Chairperson's Information:**  
 Chairperson's name (required): Ralph Ferro  
 Chairperson's physical address (required): 7150 Ridgeview Carefree  
 Chairperson's mailing address (if different): PO Box 2089 Carefree AZ  
 Chairperson's email address (required): ferri.ferro@cox.net  
 Chairperson's phone number (required): 480 878 5880  
 Chairperson's employer (required): N/A retired  
 Chairperson's occupation (required): N/A retired

**Treasurer's Information:**  
 Treasurer's name (required): Vince D'Allesio  
 Treasurer's physical address (required): 36865 N Bloody Basin  
 Treasurer's mailing address (if different): PO Box 3361 Carefree  
 Treasurer's email address (required): vinedalicio@carefree.org  
 Treasurer's phone number (required): 480 220 4629  
 Treasurer's employer (required): Gallagher  
 Treasurer's occupation (required): insurance consultant

**Bank or Financial Institution:**  
 Bank name (required): Bank of America  
 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: Ralph Ferro Date: 1/27/22

Treasurer's signature: Vince D'Allesio Date: 1-27-22

Candidate's signature (if applicable): Vince D'Allesio Date: 1-27-22