| Image# | 29992163158 |
|--------|-------------|
|--------|-------------|

## STATEMENT OF ORGANIZATION

| FEC<br>FORM 1  | STATEMENT C<br>ORGANIZATIC<br>(See instructions)  |   |                     |
|--|---|---|---------------------|
| 1. NAME OF<br>COMMITTEE (in 1  | (Check if name Exa<br>ull) is changed) ove  | nple: If typying, type<br>the lines 12FE4M5   |                     |
| Pima County F  | Republican Party Federal Campaign Co  | nmittee   |                     |
| ADDRESS (number and s  |   |   | <u> </u>            |
| (Check if address<br>is changed)   | Suite 100   | <u>↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ </u>   |                     |
| COMMITTEE'S E-MAI<br>(Check if address<br>is changed)  | CITY  | STATE ZIP CODE :  | ▲<br>⊥⊥⊥⊥]<br>⊥⊥⊥⊥] |
| COMMITTEE'S WEB<br>(Check if address<br>is changed)  |   |   |                     |
| <ol> <li>2. DATE 0.2</li> <li>3. FEC IDENTIFICA</li> <li>4. IS THIS STATEM</li> </ol>  | 27 2009<br>TION NUMBER C CO   | <b>387316</b><br>AMENDED (A)  |                     |
| I certify that I have examined by the second s | ned this Statement and to the best of my knowledge a Treasurer <u>Ed Miller</u> El <u>ectronically Filed by Ed Miller</u> | d belief it is true, correct and complete Date Date Date Date   | Ý 0 0 9             |
| NOTE: Submission of fal  |   | he person signing this Statement to the penalties of 2 U.S.C. §437g.<br>OULD BE REPORTED WITHIN 10 DAYS   |                     |
| Office<br>Use<br>Only  |   | For further information contact:         FEC FORM           Federal Election Commission         Toll Free 800-424-9530         (Revised 02/200           Local 202-694-1100         Contact Con |                     |

|    |               | FEC F               | Form 1 (Revised 02/2009)  | Page 2                                |
|----|---------------|---------------------|---|---------------------------------------|
| 5. | TYPE          | OF CO               | DMMITTEE (Check One)  |                                       |
|    | Cand          | lidate C            | committee:  |                                       |
|    | (a)           |                     | This committee is a principal campaign committee. (Complete the candidate information below.)   |                                       |
|    | (b)           |                     | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)   | candidate                             |
|    | Name<br>Cand  |                     |   |                                       |
|    | Cand<br>Party | lidate<br>Affiliati | on Office Sought: House Senate President  | State                                 |
|    | (c)           |                     | This committee supports/opposes only one candidate, and is NOT an authorized committee.   |                                       |
|    | Name<br>Cand  |                     |   |                                       |
|    | Party         | Comm                | ittee:  |                                       |
|    | (d)           | X                   |   | Democratic,<br>epublican,etc.) Party. |
|    | Politi        | cal Act             | ion Committee (PAC):  |                                       |
|    | (e)           |                     | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected or   | organization is a:                    |
|    |               |                     | Corporation Corporation w/o Capital Stock Labo  | r Organization                        |
|    |               |                     | Membership Organization Trade Association Coop  | perative                              |
|    |               |                     | In addition, this committee is a Lobbyist/Registrant PAC.   |                                       |
|    | (f)           |                     | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fu  | und or party                          |
|    |               |                     | committee. (i.e., nonconnected committee)   |                                       |
|    |               |                     | In addition, this committee is a Lobbyist/Registrant PAC.   |                                       |
|    |               |                     | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)  |                                       |
|    | Joint I       | Fundra              | ising Representative:   |                                       |
|    | (g)           |                     | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, at least one of which is an authorized committee of a federal candidate. | nore political                        |
|    | (h)           |                     | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or n committees/organizations, none of which is an authorized committee of a federal candidate.         | nore political                        |

Committees Participating in Joint Fundraiser

| 1. |          | FEC ID number | С |
|----|----------|---------------|---|
| 2. |          | FEC ID number | C |
| 3. |          | FEC ID number | C |
| 4. | <u> </u> | FEC ID number | C |

| FEC Form 1 | (Revised 02/2009) |
|------------|-------------------|
|            |                   |

Write or Type Committee Name

## Pima County Republican Party Federal Campaign Committee

| 6. Name of Any Connected Or                             | ganization, Affiliated Committee, Joint Fundr  | aising Representative, or  | Leadership PAC Sponsor                        |
|---|--|----------------------------|---|
|   |  |                            |   |
|   |  |                            |   |
| Mailing Address   |  |                            |   |
|   |  |                            |   |
|   | $\lfloor \ldots \ldots$ |                            |   |
|   | СІТҮ   | STATE                      | ZIP CODE                                      |
| Relationship:   | Affiliated Committee Joint   | Fundraising Representative | E Leadership PAC Sponsor                      |
| 7. Custodian of Records: Ide<br>possession of Committee | entify by name, address, (phone number books and records.  | optional), and positio     | n of the person in                            |
| Full Name   | nn<br>   |                            |   |
| Mailing Address   | 111 S Langley  |                            |   |
|   | Tucson   | AZ                         | 85710 _                                       |
| Title or Position ▼                                     | CITY A   | STATE                      |   |
| Accounta  | nt   | Telephone number5          | <u>20                                    </u> |
|   | and address (phone number optional)<br>designated agent (e.g., assistant treasu  |                            | ommittee; and the                             |
| Full Name<br>of TreasurerEd Mil                         | ler  |                            |   |
| Mailing Address   | 574 W Quit Springs Dr  |                            |   |
|   | Oro Valley   | AZ                         | 85755   |
| Title or Position ♥                                     | CITY A   | STATE                      | ZIP CODE A                                    |
|   |  |                            |   |

| FEC Form 1 (Revis  | sed 02/2009)  |                            |                    | Page 4  |
|--|---|----------------------------|--------------------|---|
| Full Name of<br>Designated<br>Agent  | Tom Linn  |                            |                    |   |
| Mailing Address  | 111 S Langley   |                            |                    |   |
|  | Tucson  | AZ                         | 85                 | 5710  |
| Title or Position ♥  | CITY A  | STAT                       | Ξ 🛦                |   |
| Accou  | ntant   | Telephone number           | <u>520 _ 8</u>     | 86 _ 5238   |
| Banks or Other Deposi<br>safety deposit boxes or n<br>Name of Bank, Deposito | naintains funds.  | ich the committee deposit  | s funds, holds aco | counts, rents   |
| safety deposit boxes or n<br>Name of Bank, Deposito                          | naintains funds.<br>ry, etc.<br>commerce Bank of Arizona  | ich the committee deposits | s funds, holds aco | counts, rents   |
| safety deposit boxes or n<br>Name of Bank, Depositor                         | naintains funds.<br>ry, etc.<br>Dommerce Bank of Arizona  | ich the committee deposits | s funds, holds aco | counts, rents   |
| safety deposit boxes or n<br>Name of Bank, Depositor                         | naintains funds.<br>ry, etc.<br>Dommerce Bank of Arizona  | ich the committee deposits |                    | counts, rents   |
| safety deposit boxes or n<br>Name of Bank, Depositor                         | naintains funds.<br>ry, etc.<br><b>commerce Bank of Arizona</b><br><b>3805 E Broadway</b><br>   |                            |                    |   |
| safety deposit boxes or n<br>Name of Bank, Depositor                         | naintains funds.<br>y, etc.<br><b>commerce Bank of Arizona</b><br><b>3805 E Broadway</b><br><b>3805 E Broadway</b><br><b>Tuçsọn, AZ</b><br><b>CITY A</b>            |                            |                    | ⊥ ⊥ ⊥ ⊥ ⊥ ⊥ ⊥ ↓<br>↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓<br>35716 ] – [ _ ↓ ↓ ↓ ↓ ↓ |
| safety deposit boxes or n<br>Name of Bank, Depositor                         | naintains funds.<br>y, etc.<br><b>commerce Bank of Arizona</b><br><b>3805 E Broadway</b><br><b>3805 E Broadway</b><br><b>Tuçsọn, AZ</b><br><b>CITY A</b>            |                            |                    | ⊥ ⊥ ⊥ ⊥ ⊥ ⊥ ⊥ ↓<br>↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓<br>35716 ] – [ _ ↓ ↓ ↓ ↓ ↓ |
| safety deposit boxes or n<br>Name of Bank, Depositor                         | naintains funds.<br>y, etc.<br><b>Sommerce Bank of Arizona</b><br><b>3805 E Broadway</b><br><b>3805 E Broadway</b><br><b>Tucson, AZ</b><br><b>CITY A</b><br>y, etc. |                            |                    |   |
| safety deposit boxes or n<br>Name of Bank, Depositor<br>Mailing Address      | naintains funds.<br>y, etc.<br><b>Sommerce Bank of Arizona</b><br><b>3805 E Broadway</b><br><b>3805 E Broadway</b><br><b>Tucson, AZ</b><br><b>CITY A</b><br>y, etc. |                            |                    |   |
| safety deposit boxes or n<br>Name of Bank, Depositor<br>Mailing Address      | naintains funds.<br>y, etc.<br><b>Sommerce Bank of Arizona</b><br><b>3805 E Broadway</b><br><b>3805 E Broadway</b><br><b>Tucson, AZ</b><br><b>CITY A</b><br>y, etc. |                            |                    |   |