☐ Initial Application ☐ Amended Application Date: Oct 7, 2019



FILED WITH

COMMITTEE ID NUMBER (office use only) 2019-004

COMMITTEE TYPE (choose one):

Date 10/7/19 Mr. 4:07P

■ Candidate	sign. MScott
Committee Name (required): (first or last name & office)	
Candidate Information:	Candidate's Name (required): Cathey Rusing
	Candidate's mailing address (required):
	Candidate's email address (required):
	Candidate's phone number (required):
Office Occupation	Candidate's website (if any): (none now)
Office Sought (choose one):	☐ Governor ☐ Secretary of State ☐ Attorney General ☐ State Treasurer ☐ Superintendent of Public Instruction ☐ State Mine Inspector ☐ Corporation Commissione
	☐ State Senate ☐ State House of Representatives ☐ District (required):
	County Office: District (if applicable):
	■ City/Town Office: City Council Member □ District (if applicable):
Election Cycle for Office Soug	th (year the election will take place) (required): 2019
Party Affiliation: (required for partisan offices)	□ Democrat □ Green □ Libertarian □ Republican □ Other: (not required)
(if sponsored, must include sponsor's name) Political Function (optional): (select any that apply) Sponsorship Information: (if applicable)	□ Contributions □ Candidate-Related Independent Expenditures □ Ballot Measure Expenditures □ Recall Expenditures Sponsor's name or nickname (required): □ 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 (if applicable)	■ Standing Committee (must also complete separate standing committee registration)

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COMMITTEE INFORMATION:

Contact Information:	Committee's mailing address (required):
	Committee's email address (required):
	Committee's phone number (if any):
	Committee's website (if any):
Chairperson's Information:	Chairperson's name (required): Tom Rusing
	Chairperson's physical address (required):
	Chairperson's mailing address (if different): (same)
	Chairperson's email address (required):
	Chairperson's phone number (required):
	Chairperson's employer (required):
	Chairperson's occupation (required): retired surgeon
Treasurer's Information:	Treasurer's name (required): Rod Moyer
	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): none
	Treasurer's occupation (required): retired engineer and IT manager
Bank or Financial Institution:	Bank name (required): State Bank of Arizona
(do not list acct numbers)	Additional bank name (if applicable): PayPal.com
	Additional bank name (if applicable):

DECLARATION AND SIGNATURES:

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	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.	
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	Chairperson's signature: Date: 10/02/2019	
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	Treasurer's signature: Date: 10/02/2019	
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,	Candidate's signature (if applicable): (MKLy) (MSLY) Date: 10/02/2019	
/	C Fil F	