

Initial Application  
 Amended Application  
 Date: 3-4-24



**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): vincedcarefree@gmail.com  
 Committee's phone number (if any): (480) 220-4629  
 Committee's website (if any): \_\_\_\_\_

**Chairperson's Information:** Chairperson's name (required): Ralph Ferro  
 Chairperson's physical address (required): 7150 Ridgeview Ln Carefree 85377  
 Chairperson's mailing address (if different): PO Box 2089 Carefree AZ 85377  
 Chairperson's email address (required): teri.ferro@cox.net  
 Chairperson's phone number (required): (480) 878-5880  
 Chairperson's employer (required): retired  
 Chairperson's occupation (required): retired

**Treasurer's Information:** Treasurer's name (required): Vince D'Aliesio  
 Treasurer's physical address (required): 36865 N. Bloody Basin Rd Carefree 85377  
 Treasurer's mailing address (if different): PO Box 3361 Carefree 85377  
 Treasurer's email address (required): vincedcarefree@gmail.com  
 Treasurer's phone number (required): (480) 220-4629  
 Treasurer's employer (required): Gallagher  
 Treasurer's occupation (required): consulting

**Bank or Financial Institution:** Bank name (required): Bank of America  
 (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: Ralph Ferro Date: 03/04/2024

Treasurer's signature: Vince D'Aliesio Date: 03/04/2024

Candidate's signature (if applicable): Vince D'Aliesio Date: 03/04/2024

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**STATE OF ARIZONA  
 COMMITTEE STATEMENT  
 OF ORGANIZATION**

**RECEIVED**  
 COMMITTEE ID NUMBER  
 (office use only)  
GAC 2024-02  
 MAR 4 2024  
 Town of Carefree

COMMITTEE TYPE (choose one):

**Candidate**

**Committee Name (required):** Vince D'Aliesio for Carefree Council  
 (first or last name & office)

**Candidate Information:**

**Candidate's Name (required):** Vince D'Aliesio

**Candidate's mailing address (required):** PO Box 3361 Carefree, AZ 85377

**Candidate's email address (required):** vincedcarefree@gmail.com

**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):** \_\_\_\_\_

**Party Affiliation:**  Democrat  Green  Libertarian  Republican  Other: \_\_\_\_\_  
 (required for partisan offices)

**Political Action Committee (PAC)**

**Committee Name (required):** Vince D'Aliesio for Carefree Council  
 (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:** (if applicable)

**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** (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'Aliesio for Carefree Council  
 (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)