

☒ Initial Application
☐ Amended Application
Date: 02/14/2023



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

23-005

FILED WITH CITY CLERK
Date: 2/14/23 Hr: 3:00 PM
Sign: Sma

COMMITTEE TYPE (choose one):

☒ Candidate

Committee Name (required): Lois for Prescott
(first or last name & office)

Candidate Information:

Candidate's Name (required): Lois Fruhwirth

Candidate's mailing address (required): [REDACTED] Prescott, AZ 86305

Candidate's email address (required): [REDACTED]

Candidate's phone number (required): [REDACTED]

Candidate's website (if any): LoisforPrescott.com

Office Sought (choose one): ☐ County Office: ☐ District (if applicable):

☒ City/Town Office: Prescott City 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): 2023

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):
(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 ID NUMBER
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COMMITTEE INFORMATION:

Contact Information: Committee's mailing address (required): 1380 Ridgewood Dr. Prescott, AZ 86305
Committee's email address (required): Loisfruhwirth@gmail.com
Committee's phone number (if any): (928) 910-1617
Committee's website (if any): LoisforPrescott.com

Chairperson's Information: Chairperson's name (required): Lois Fruhwirth
Chairperson's physical address (required): [REDACTED] Prescott, AZ 86305
Chairperson's mailing address (if different): _____
Chairperson's email address (required): [REDACTED]
Chairperson's phone number (required): [REDACTED]
Chairperson's employer (required): None
Chairperson's occupation (required): Retired

Treasurer's Information: Treasurer's name (required): Kelli Woods
Treasurer's physical address (required): [REDACTED] Prescott, AZ 86305
Treasurer's mailing address (if different): _____
Treasurer's email address (required): [REDACTED]
Treasurer's phone number (required): [REDACTED]
Treasurer's employer (required): 2KSMW, LLC
Treasurer's occupation (required): Business Owner

Bank or Financial Institution: Bank name (required): Foothills Bank, 800 Miller Valley Rd, Prescott, AZ 86301
(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: Lois M. Fruhwirth Date: 02/14/2023
Treasurer's signature: Kelli Woods Date: 02/14/2023
Candidate's signature (if applicable): Lois M. Fruhwirth Date: 02/14/2023