

Initial Application
 Amended Application
 Date: 6/16/2025



**STATE OF ARIZONA
 COMMITTEE STATEMENT
 OF ORGANIZATION**

COMMITTEE ID NUMBER
 (office use only)

PA C-25-01

Received by email by
 City Clerk - AC

COMMITTEE TYPE (choose one):

Candidate

Committee Name (required): _____
 (first or last name & office)

Candidate Information: Candidate's Name (required): _____

Candidate's mailing address (required): _____

Candidate's email address (required): _____

Candidate's phone number (required): _____

Candidate's website (if any): _____

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

City/Town Office: _____ 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): Play It Forward Casa Grande
 (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): _____
 (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)

PAC-25-01

COMMITTEE INFORMATION:

Contact Information:
 Committee's mailing address (required): PO Box 10103, Casa Grande, AZ 85130
 Committee's email address (required): info@playitforwardcg.com
 Committee's phone number (if any): _____
 Committee's website (if any): playitforwardcg.com

Chairperson's Information:
 Chairperson's name (required): Mindi Dawkins
 Chairperson's physical address (required): 404 N. Marshall Street, Casa Grande, AZ 85122
 Chairperson's mailing address (if different): _____
 Chairperson's email address (required): Mindi@playitforward.com
 Chairperson's phone number (required): (520) 560-2421
 Chairperson's employer (required): Arizona Home Pros
 Chairperson's occupation (required): Designated Broker

Treasurer's Information:
 Treasurer's name (required): Victor Fuentes
 Treasurer's physical address (required): 317 E. Cottonwood Lane, Ste C, Casa Grande, AZ 85122
 Treasurer's mailing address (if different): _____
 Treasurer's email address (required): Victor@playitforwardcg.com
 Treasurer's phone number (required): (602) 295-1543
 Treasurer's employer (required): FoxFarm Soil & Fertilizer
 Treasurer's occupation (required): Director of Finance

Bank or Financial Institution:
 (do not list acct numbers)
 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.

Signed by:

Chairperson's signature: Mindi Dawkins Date: 6/14/2025 | 16:22 MST

Signed by:
 5907E9EB087CC49F

Treasurer's signature: Victor Fuentes Date: 6/16/2025 | 11:44 MST

Signed by:
 DAA14DEC4BD44AD...

Candidate's signature (if applicable): _____ Date: _____

Certificate Of Completion

Envelope Id: DFFF192D-FE5D-415B-9FC2-02472C07510E Status: Completed

Subject: Statement of Organization

Source Envelope:

Document Pages: 2 Signatures: 2

Certificate Pages: 2 Initials: 0

AutoNav: Enabled

EnvelopeD Stamping: Enabled

Time Zone: (UTC-07:00) Arizona

Envelope Originator:

Melissa Yost Fuentes

317 E. Cottonwood Lane, Suite C

Casa Grande, AZ 85122

melissa@yosthomes.com

IP Address: 184.176.102.182

Record Tracking

Status: Original

6/14/2025 9:27:10 AM

Holder: Melissa Yost Fuentes

melissa@yosthomes.com

Location: DocuSign

Signer Events

Signature

Timestamp

Mindi Dawkins

ready2selluahome@gmail.com

Broker

Security Level: Email, Account Authentication (None)



Sent: 6/14/2025 9:29:37 AM

Viewed: 6/14/2025 4:22:03 PM

Signed: 6/14/2025 4:22:50 PM

Signature Adoption: Pre-selected Style
Using IP Address:
2600:8800:9e06:9400:64aa:9d48:767c:39bf
Signed using mobile

Electronic Record and Signature Disclosure:
Not Offered via Docusign



Sent: 6/14/2025 9:29:37 AM

Viewed: 6/16/2025 11:42:22 AM

Signed: 6/16/2025 11:44:40 AM

Signature Adoption: Pre-selected Style
Using IP Address: 199.19.248.14

Electronic Record and Signature Disclosure:
Not Offered via Docusign

In Person Signer Events

Signature

Timestamp

Editor Delivery Events

Status

Timestamp

Agent Delivery Events

Status

Timestamp

Intermediary Delivery Events

Status

Timestamp

Certified Delivery Events

Status

Timestamp

Carbon Copy Events

Status

Timestamp

Witness Events

Signature

Timestamp

Notary Events

Signature

Timestamp

Envelope Summary Events

Status

Timestamps

Envelope Sent

Hashed/Encrypted

6/14/2025 9:29:37 AM

Certified Delivered

Security Checked

6/16/2025 11:42:22 AM

Envelope Summary Events	Status	Timestamps
Signing Complete	Security Checked	6/16/2025 11:44:40 AM
Completed	Security Checked	6/16/2025 11:44:40 AM
Payment Events	Status	Timestamps