

Initial Application
 Amended Application
Date: JAN 6, 2026



STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

MC 26-01

RECEIVED
By RECEIVED at 2:41 pm, Jan 06, 2026

COMMITTEE TYPE (choose one):

Candidate

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

Edwards for City Council

Candidate Information:

Candidate's Name (required):

Anthony Edwards

Candidate's mailing address (required):

2131 N Lakeshore Dr Casa Grande AZ 85712

Candidate's email address (required):

ae222983@gmail.com

Candidate's phone number (required):

520-560-2935

Candidate's website (if any):

Office Sought (choose one):

County Office:

District (if applicable):

City/Town Office:

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):

2026

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):
(select any that apply)

Contributions

Candidate-Related Independent Expenditures

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)

Initial Application

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STATE OF ARIZONA
COMMITTEE STATEMENT
OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)

COMMITTEE INFORMATION:

Contact Information:

Committee's mailing address (required): 2131 N Lakeshore Dr Casa Grande AZ

Committee's email address (required): ae222983@gmail.com

Committee's phone number (if any): 520-560-2935

Committee's website (if any): _____

Chairperson's Information:

Chairperson's name (required): Randy Robbins

Chairperson's physical address (required): 583 E Palo Verde St

Chairperson's mailing address (if different): Same

Chairperson's email address (required): randyrobbins48@msn.com

Chairperson's phone number (required): 602-738-2654

Chairperson's employer (required): CGUH SD #82

Chairperson's occupation (required): ATHLETIC DIRECTOR

Treasurer's Information:

Treasurer's name (required): Gracy Lavender

Treasurer's physical address (required): 1212 E Clearview Dr

Treasurer's mailing address (if different): _____

Treasurer's email address (required): gracy-lavender@hotmail.com

Treasurer's phone number (required): 520-705-4458

Treasurer's employer (required): _____

Treasurer's occupation (required): Hair Dresser

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

Bank name (required): _____

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: [Signature]

Date: 12/31/2025

Treasurer's signature: [Signature]

Date: 12/31/2025

Candidate's signature (if applicable): [Signature]

Date: 12/31/2025