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SECRETARY OF STATE

STATE OF ARIZONA

APPLICATION FOR CERTIFICATION AS A PARTICIPATING CANDIDATE

Pursuant to Arizona Revised Statutes §§16-947 and 948 and AAC R2-20-104 (D)

OFFICE USE ONLY

☒ Initial Application ☐ Amended Application

FILERID 2004-73048

NAME OF CANDIDATE: Carole Hubbs	OFFICE SOUGHT (Include Legislative District, if applicable): House of Representatives L-4	
ADDRESS (NUMBER & STREET): 21511 Limousine Drive	CITY: Sun City West	STATE: AZ / ZIP: 85375
MAILING ADDRESS (if different from above):	CITY:	STATE: / ZIP:
CANDIDATE'S TELEPHONE #: 623/214-9415	CANDIDATE'S FAX #: 623/214-8676	CANDIDATE'S E-MAIL ADDRESS: CJHubbs@aol.com
CANDIDATE'S PARTY AFFILIATION (if any): Republican		
NAME OF CANDIDATE'S COMMITTEE: Carole Hubbs 2004		
COMMITTEE'S ADDRESS: 21511 Limousine Drive	CITY: Sun City West	STATE: AZ / ZIP: 85375
COMMITTEE'S PHONE #: 623/214-9415	COMMITTEE'S FAX #: 623/214-8676	COMMITTEE'S E-MAIL ADDRESS: CJHubbs@aol.com
NAME OF DESIGNATED INDIVIDUAL WITH AUTHORITY TO WITHDRAW FUNDS (IF APPLICABLE) (*A.R.S. §16-948*): Robert A. Hubbs		
DESIGNATED INDIVIDUAL'S ADDRESS: 21511 Limousine Drive	CITY: Sun City West	STATE: AZ / ZIP: 85375
DESIGNATED INDIVIDUAL'S TELEPHONE #: 623/214-9415	DESIGNATED INDIVIDUAL'S FAX #: 623/214-8676	DESIGNATED INDIVIDUAL'S E-MAIL ADDRESS: RHubbs2217@aol.com

LIST THE NAME OF THE FINANCIAL INSTITUTION FROM WHICH THE CANDIDATE AND THE DESIGNATED INDIVIDUAL, WILL CONDUCT ALL FINANCIAL ACTIVITY FOR THE CANDIDATE'S CAMPAIGN COMMITTEE (do not list account number). (*A.R.S. §16-948(A)*).

American Trust Bank

DESIGNATED CANDIDATE'S STATEMENT (if applicable) (A.R.S. §16-948(B)): I hereby designate Robert A. Hubbs as my duly authorized Designated Individual, with the authority to withdraw funds and make expenditures from my campaign account on my behalf.

Date: [illegible]

Candidate's signature: [illegible]