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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)

☒ Initial Application ☐ Amended Application

FILERID 2004-93122

NAME OF CANDIDATE: Martha Garcia	OFFICE SOUGHT (include Legislative District, if applicable): State Representative District 13		
ADDRESS (NUMBER & STREET): 5546 W. Berkeley Rd.	CITY: Phoenix	STATE: AZ	ZIP: 85035
MAILING ADDRESS (if different from above):	CITY:	STATE:	ZIP:
CANDIDATE'S TELEPHONE #: 602-233-8758	CANDIDATE'S FAX #: 623-247-4777	CANDIDATE'S E-MAIL ADDRESS: garciammc@aol.com	
CANDIDATE'S PARTY AFFILIATION (if any): Democrat			
NAME OF CANDIDATE'S COMMITTEE: Martha Garcia 2004			
COMMITTEE'S ADDRESS: 5546 W Berkeley Rd	CITY:	STATE:	ZIP:
COMMITTEE'S PHONE #: 602-233-8758	COMMITTEE'S FAX #: 623-247-4777	COMMITTEE'S E-MAIL ADDRESS: garciammc@aol.com	
NAME OF DESIGNATED INDIVIDUAL, WITH AUTHORITY TO WITHDRAW FUNDS (IF APPLICABLE) (A.R.S. §16-948): Martha Garcia			
DESIGNATED INDIVIDUAL'S ADDRESS: 5546 W. Berkeley Rd	CITY: Phoenix	STATE: AZ	ZIP: 85035
DESIGNATED INDIVIDUAL'S TELEPHONE #: 602-233-8758	DESIGNATED INDIVIDUAL'S FAX #: 623-247-4777	DESIGNATED INDIVIDUAL'S E-MAIL ADDRESS: garciammc@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)).

BANK ONE

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

Date [redacted]

[redacted]

CCEC-003-APP/CERT-08/28/01