

Initial Application
 Amended Application
Date 02/10/2026



STATE OF ARIZONA COMMITTEE STATEMENT OF ORGANIZATION

COMMITTEE ID NUMBER
(office use only)
DC6-2026-001

COMMITTEE TYPE (choose one)

Candidate

Committee Name (required) Goodman For Buckeye
(first or last name & office)

Candidate Information Candidate's Name (required) Clay Goodman

Candidate's mailing address (required) goodmanforbuckeye@gmail.com

Candidate's email address (required) 2353 N Alsap Rd

Candidate's phone number (required) (623) 764-7834

Candidate's website (if any) goodmanforbuckeye.com

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

City/Town Office Buckeye City Council District (if applicable) 6

School Board Office _____ District (if applicable) 6

Special District Board _____ District (if applicable) 6

Election Cycle for Office Sought (year the election will take place) (required) _____

Party Affiliation (required for partisan offices) Democrat Green Libertarian Republican Other _____

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)

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COMMITTEE INFORMATION

Contact Information Committee's mailing address (required) _____
Committee's email address (required) _____
Committee's phone number (if any) _____
Committee's website (if any) _____

Chairperson's Information Chairperson's name (required) Clay Goodman
Chairperson's physical address (required) 2353 N Alsap Rd Buckeye AZ 85396
Chairperson's mailing address (if different) _____
Chairperson's email address (required) goodmanforbuckeye@gmail.com
Chairperson's phone number (required) (623) 764-7834
Chairperson's employer (required) retired
Chairperson's occupation (required) retired

Treasurer's Information Treasurer's name (required) Clay Goodman
Treasurer's physical address (required) 2353 N Alsap Rd Buckeye AZ 85396
Treasurer's mailing address (if different) _____
Treasurer's email address (required) goodmanforbuckeye@gmail.com
Treasurer's phone number (required) (623) 764-7834
Treasurer's employer (required) Retired
Treasurer's occupation (required) Retired

Bank or Financial Institution Bank name (required) Desert Financial Credit Union
(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 [Signature] Date FEB 12 2026

Treasurer's signature [Signature] Date FEB 12 2026

Candidate's signature (if applicable) _____ Date _____