



MARICOPA COUNTY POLITICAL COMMITTEE NO ACTIVITY STATEMENT

FOR OFFICE USE ONLY

1. Full Name of Committee
Address
City ZIP Code County Phone #

2. Sponsoring Organization or Candidate and Office E-mail address Fax #

3. ID #

Election: November 3, 2015

4. REPORTING PERIOD (Please check appropriate box)

DUE BETWEEN

- a. PRE ELECTION REPORT - For Period of * through October 22, 2015... October 23, 2015 and October 30, 2015
b. POST ELECTION REPORT - For Period of October 23, 2015 through November 23, 2015... November 24, 2015 and December 3, 2015
c. JANUARY 31 REPORT - For Period of November 24, 2015 through December 31, 2015... January 1, 2016 and February 1, 2016

*Date the Statement of Organization was filed

I, (name of treasurer or candidate- printed), upon my oath and under penalty of perjury, say that this political committee received no contributions and made no expenditures for the period indicated above, and therefore is filing a No Activity Statement pursuant to A.R.S. §16-913(D), and this statement, pursuant to A.R.S. §16-913(E) is true and complete.

Date

Signature of Candidate or Treasurer