

Date: 1/16/18



STATE OF ARIZONA
COMMITTEE TERMINATION
STATEMENT

COMMITTEE ID NUMBER

COMMITTEE INFORMATION:

Committee name: Cody Singleton for City Council
Mailing address: 236 Langford Dr
Email address: SVchurchofchrist@yahoo.com
Phone number: 520-227-2050
Website: _____
Chairperson name: Cody Singleton
Treasurer: Cody Singleton

DECLARATION AND SIGNATURES:

I declare under penalty of perjury that the foregoing information is true and correct. I further declare that: (1) the committee will no longer receive any contributions or make any disbursements; (2) the committee either (a) has no outstanding debts or obligations, or (b) has outstanding debts or obligations that are all more than five years old, and the committee's creditors have agreed to discharge the debts and obligations and have agreed to the termination of the committee; (3) any surplus monies have been disposed of and that the committee has no cash on hand; and (4) all contributions and expenditures have been reported, including any disposal of surplus monies.

Chairperson's signature: _____ Date: 1/16/18
Treasurer's signature: _____ Date: 1/16/18
Candidate's signature (if applicable): _____ Date: 1/16/18