

Date: 6/30/2017



STATE OF ARIZONA
COMMITTEE TERMINATION
STATEMENT

COMMITTEE ID NUMBER

08-15

COMMITTEE INFORMATION:

Committee name: Tempe First

Mailing address: 61 E Columbus ave

Email address: cdwoods7@gmail.com

Phone number: (480)748-3940

Website: _____

Chairperson name: Corey Woods

Treasurer: Barb Carter

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: [Signature] Date: 06/23/2017

Treasurer's signature: Barbara J Carter Date: 6/29/2017

Candidate's signature (if applicable): _____ Date: _____

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