#500 Threshold

YUMA COUNTY POLITICAL COMMITTEE TERMINATION STATEMENT

A.R.S. §16-914; A.R.S. §16-915.01

FOR OFFICE USE ONLY

NOV 18 2016 AM 7:50

1. Vince Giacolone
Full Name of Committee

[redacted]
Address

Yuma | 85365 | Yuma | vgiacolone@limoneira.com
City | ZIP Code | County | E-mail address

2. Governing Board, Yuma Co. Pest Abatement District | 928-[redacted]
Sponsoring Organization or Candidate and Office | Phone Number

3. ID# 2016-36
None

SELECT THE BOXES THAT APPLY:

A. ☑ This is to certify that all contributions received and all expenditures made on behalf of the political committee indicated above have been reported as required by A.R.S. §16-913. We further certify that the political committee will no longer receive any contributions or make any disbursements, that the committee has no outstanding debts or obligations and that any surplus monies have been disposed of pursuant to A.R.S. §16-915.01.

Please mark the appropriate statement below to indicate which campaign finance report states the disposition of any surplus monies.

- ☐ The disposition of any surplus monies was submitted on campaign finance report filed on _____.
- ☐ The disposition of any surplus monies is reported on the attached campaign finance report.

B. ☐ This committee hereby terminates all activity within the jurisdiction of _____ and asserts that the
(Insert applicable district town, city, county or if out-of-state committee, State of Arizona)
committee intends to remain active in other jurisdictions and that the committee's remaining monies shall be used for activity in other jurisdictions.

C. ☐ This committee has transferred the committee's debts and obligations to a subsequent committee.

Please enter the full name and ID# of the committee into which debts and obligations have been transferred.

_____ _____
Name of Committee | ID#

We, Vince Giacolone, certify under penalty of
(Name of Chairman and Treasurer – Printed)
perjury that this statement of termination pursuant to A.R.S. §16-914 is true and complete.

_____ Signature of Chairman

_____ Signature of Treasurer