



**YUMA COUNTY - POLITICAL COMMITTEE**  
**\$500 THRESHOLD EXEMPTION STATEMENT**  
 [A.R.S. §§ 16-902.01; 16-903(A)]

ID# 10-1057

NAME OF POLITICAL COMMITTEE (For ballot measure committee, name shall include official petition serial number) <u>Olivia Jenkins</u>		DATE <u>7-14-10</u>	
RESIDENCE ADDRESS (NUMBER & STREET) [REDACTED]		CITY <u>San Luis</u>	STATE <u>AZ</u> ZIP <u>85349</u>
MAILING ADDRESS (if different from above) <u>P.O. Box 4334</u>		CITY <u>San Luis</u>	STATE <u>AZ</u> ZIP <u>85349</u>
COMMITTEE TELEPHONE # <u>928-</u>	COMMITTEE FAX # <u>N/A</u>	COMMITTEE E-MAIL ADDRESS <u>ojenkins63@roadrunner.com</u>	
DOES THE POLITICAL COMMITTEE HAVE A SPONSORING ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, please provide the following information:			

NAME OF SPONSORING ORGANIZATION:	TYPE OF ORGANIZATION
ADDRESS OF SPONSORING ORGANIZATION:	RELATIONSHIP TO POLITICAL COMMITTEE

**TYPE OF POLITICAL COMMITTEE - Please check only one box:**

<input type="checkbox"/> CANDIDATE'S CAMPAIGN COMMITTEE	<input type="checkbox"/> SEPARATE SEGREGATED FUND ESTABLISHED BY A CORPORATION OR LABOR ORGANIZATION
<input type="checkbox"/> EXPLORATORY COMMITTEE	<input type="checkbox"/> COMMITTEE ORGANIZED FOR THE PURPOSE OF MAKING INDEPENDENT EXPENDITURES
<input type="checkbox"/> COMMITTEE ORGANIZED IN SUPPORT OF OR OPPOSITION TO ONE OR MORE CANDIDATES	<input type="checkbox"/> POLITICAL ORGANIZATION (an organization that is formally affiliated with and recognized by a political party including a district committee that is organized pursuant to A.R.S. §16-823)
<input type="checkbox"/> COMMITTEE IN SUPPORT OF OR OPPOSITION TO THE QUALIFICATION, PASSAGE OR DEFEAT OF A BALLOT MEASURE [(A.R.S. §16-902.01 (F)) <input type="checkbox"/> support for <input type="checkbox"/> opposition to this ballot measure	<input type="checkbox"/> POLITICAL PARTY (only state or county committees of an organization that meets the requirements for recognition as a political party (see A.R.S. §§ 16-801, 16-804, 16-821 and 16-825)
<input checked="" type="checkbox"/> OTHER COMMITTEE (PLEASE DESCRIBE BELOW) <u>self</u>	

The above named committee hereby asserts the following:

- > The committee has heretofore neither accepted any contributions nor made any expenditures.
- > The committee intends to receive or spend less than \$500
- > The committee will file a Statement of Organization within five business days after expending or receiving monies over the \$500 limit pursuant to A.R.S. §§ 16-902.01 and 16-903(A).

EACH POLITICAL COMMITTEE SHALL HAVE A CHAIRMAN AND TREASURER. THE POSITION OF CHAIRMAN AND TREASURER OF A SINGLE POLITICAL COMMITTEE MAY NOT BE HELD BY THE SAME INDIVIDUAL, EXCEPT THAT A CANDIDATE MAY BE CHAIRMAN AND TREASURER OF HIS OR HER OWN CAMPAIGN COMMITTEE. A.R.S. §16-902 (A).

NAME OF COMMITTEE CHAIRMAN	CHAIRMAN'S TELEPHONE #	CHAIRMAN'S FAX #	
CHAIRMAN'S RESIDENCE ADDRESS (and mailing address if different)	CITY	STATE	ZIP
CHAIRMAN'S OCCUPATION	CHAIRMAN'S EMPLOYER		
NAME OF COMMITTEE TREASURER	TREASURER'S TELEPHONE #	TREASURER'S FAX#	
TREASURER'S RESIDENCE ADDRESS (and mailing address if different)	CITY	STATE	ZIP
TREASURER'S OCCUPATION	TREASURER'S EMPLOYER		

complete both sides

FOR AN EXPLORATORY COMMITTEE OR A CANDIDATES CAMPAIGN COMMITTEE, PROVIDE THE FOLLOWING INFORMATION:  
(Party Affiliation and Office Sought are optional for Exploratory Committees.)

NAME OF CANDIDATE OR DESIGNATING INDIVIDUAL ("DI")

PARTY AFFILIATION

OFFICE SOUGHT

COUNTY OF RESIDENCE

Gardner School Govt Drcd

CANDIDATE'S OR DESIGNATING INDIVIDUAL ADDRESS

CITY

STATE

ZIP

CANDIDATE'S OR DISIGNATING INDIVIDUAL STATEMENT: I authorize the above-named political committee as my political committee to receive contributions and make expenditures on my behalf.

Date: 7-14-10

Candidate's or Designating Individual signature:

CHAIRMAN'S AND TREASURER'S STATEMENT: We, the undersigned, have examined the information contained in this exemption statement and certify that it is true and complete.

Date: \_\_\_\_\_

Chairman's signature: \_\_\_\_\_

Date: \_\_\_\_\_

Treasurer's signature: \_\_\_\_\_

**NOTE:**

- Candidates and political committees involved with statewide and legislative elections file this statement with the Secretary of State Election Services Division, 1700 West Washington, 7th Floor, Phoenix AZ 85007
- Candidates and political committees involved with county or school district elections file this statement with Yuma County Election Services, 198 S. Main Street, Yuma.
- Candidates and political committees involved with city or town elections file this statement with the city or town clerk.