



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

JUL 26 2010 AM 11:26

ID# 10-1058

NAME OF POLITICAL COMMITTEE (For ballot measure committee, name shall include official petition serial number) <i>William (Bill) Cordova</i>		DATE <i>7-20-10</i>	
RESIDENCE ADDRESS (NUMBER & STREET) [REDACTED]	CITY <i>San Luis</i>	STATE <i>AZ</i>	ZIP <i>85349</i>
MAILING ADDRESS (if different from above) <i>PO Box 2102</i>	CITY <i>San Luis</i>	STATE <i>AZ</i>	ZIP <i>85349</i>
COMMITTEE TELEPHONE # [REDACTED]	COMMITTEE FAX # [REDACTED]	COMMITTEE E-MAIL ADDRESS <i>Cordova4schBoard@aol.com</i>	
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 checked="" 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 type="checkbox"/> OTHER COMMITTEE (PLEASE DESCRIBE BELOW) _____	

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 <i>Bill Cordova</i>	CHAIRMAN'S TELEPHONE # [REDACTED]	CHAIRMAN'S FAX # [REDACTED]
CHAIRMAN'S RESIDENCE ADDRESS (and mailing address if different) [REDACTED]	CITY <i>San Luis</i>	STATE <i>AZ</i> ZIP <i>85349</i>
CHAIRMAN'S OCCUPATION <i>Self/owner</i>	CHAIRMAN'S EMPLOYER <i>EZ MATC</i>	
NAME OF COMMITTEE TREASURER <i>Bill Cordova</i>	TREASURER'S TELEPHONE # [REDACTED]	TREASURER'S FAX# [REDACTED]
TREASURER'S RESIDENCE ADDRESS (and mailing address if different) [REDACTED]	CITY <i>San Luis</i>	STATE <i>AZ</i> ZIP <i>85349</i>
TREASURER'S OCCUPATION <i>Self/owner</i>	TREASURER'S EMPLOYER <i>EZ MATC</i>	

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")

William E Cordova

PARTY AFFILIATION

N/A

OFFICE SOUGHT

School Board Member

COUNTY OF RESIDENCE

Yuma

CANDIDATE'S OR DESIGNATING INDIVIDUAL ADDRESS

CITY

San Luis

STATE

AZ

ZIP

85349

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: 7-26-10

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.