



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

REC  
5/27/2014

ID# 2014-14

Amended

NAME OF POLITICAL COMMITTEE (For a ballot measure committee, name shall include official petition serial number) <u>Running for Justice of the Peace District 1</u>		DATE <u>5-27-14</u>	
RESIDENCE ADDRESS (Number and Street) <u>3578 S. Quetel Ave</u>	CITY <u>Naco</u>	STATE <u>AZ</u>	ZIP <u>85620</u>
MAILING ADDRESS (if different from above) <u>P.O. Box 319</u>	CITY <u>Naco</u>	STATE <u>AZ</u>	ZIP <u>85620</u>
COMMITTEE TELEPHONE # <u>520-366-4221</u>	COMMITTEE FAX # <u>N/A</u>	COMMITTEE E-MAIL ADDRESS <u>rcorley@gp.com</u>	

DOES THE POLITICAL COMMITTEE HAVE A SPONSORING ORGANIZATION?  YES  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 ISSUE [A.R.S. §16-902.01(F)] <input type="checkbox"/> support or <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 EXPEND 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 <u>Rick Corley</u>	CHAIRMAN'S TELEPHONE # <u>520-366-4221</u>	CHAIRMAN'S FAX # <u>N/A</u>
CHAIRMAN'S RESIDENCE ADDRESS (and mailing address if different) <u>3578 S Quetel, P.O. Box 319</u>	CITY <u>Naco</u>	STATE <u>AZ</u> ZIP <u>85620</u>
CHAIRMAN'S OCCUPATION <u>Zoning Administrator</u>	CHAIRMAN'S EMPLOYER <u>Cochise County</u>	
NAME OF COMMITTEE TREASURER <u>Same as above</u>	TREASURER'S TELEPHONE #	TREASURER'S FAX #
TREASURER'S RESIDENCE ADDRESS (and mailing address if different)	CITY	STATE ZIP
TREASURER'S OCCUPATION	TREASURER'S EMPLOYER	

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

NAME OF CANDIDATE OR DESIGNATING INDIVIDUAL ("DI")

*Rick Corley*

PARTY AFFILIATION

*Democrat*

OFFICE SOUGHT

*Running for Justice of the Peace*

COUNTY OF RESIDENCE

*Coconino*

CANDIDATE'S OR DESIGNATING INDIVIDUAL'S ADDRESS

*3578 S. Quatel Ave*

CITY

*Noce*

STATE

*AZ*

ZIP

*85620*

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

Date: *5-27-14*

Candidate's or Designating Individual's signature: *Rick Corley*

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: *5-27-14*

Chairman's signature: *Rick Corley*

Date: *5-27-14*

Treasurer's signature: *Rick Corley*