



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

RECEIVED AUG 27 2013
DATE 08-27-2013

ID# 2014-04		NAME OF POLITICAL COMMITTEE (For a ballot measure committee, name shall include official petition serial number) Re-elect Judge Dickerson 2014	
RESIDENCE ADDRESS (Number and Street) 4536 S. SAUK Ave.		CITY Sierra Vista	STATE AZ
MAILING ADDRESS (if different from above) —		CITY	STATE
		CITY	STATE

COMMITTEE TELEPHONE # 520-378-1035	COMMITTEE FAX # —	COMMITTEE E-MAIL ADDRESS —
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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 Timothy B. Dickerson	CHAIRMAN'S TELEPHONE # 520-378-1035	CHAIRMAN'S FAX # —
CHAIRMAN'S RESIDENCE ADDRESS (and mailing address if different) 4536 S. SAUK Ave.	CITY Sierra Vista	STATE AZ
CHAIRMAN'S OCCUPATION Justice of the Peace	CHAIRMAN'S EMPLOYER Cochise County	ZIP 85650
NAME OF COMMITTEE TREASURER Timothy B. Dickerson	TREASURER'S TELEPHONE # 520-378-1035	TREASURER'S FAX # —
TREASURER'S RESIDENCE ADDRESS (and mailing address if different) 4536 S. SAUK Ave.	CITY Sierra Vista	STATE AZ
TREASURER'S OCCUPATION	TREASURER'S EMPLOYER	ZIP 85650

5) 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")

Timothy B. Dickerson

PARTY AFFILIATION

Republican

OFFICE SOUGHT

Justice of the Peace, Prec 5

COUNTY OF RESIDENCE

Cochise

CANDIDATE'S OR DESIGNATING INDIVIDUAL'S ADDRESS

4536 S. SAUK Ave.

CITY

Sierra Vista

STATE

AZ

ZIP

85650

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:

08/27/2013

Candidate's or Designating Individual's signature:

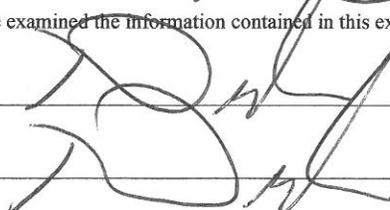


CHAIRMAN'S AND TREASURER'S STATEMENT: We, the undersigned, have examined the information contained in this exemption statement and certify that It is true and complete.

Date:

08/27/2013

Chairman's signature:



Date:

08/27/2013

Treasurer's signature:

