



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

RECEIVED DEC 29 2015

ID# <u>2016-14</u>		NAME OF POLITICAL COMMITTEE (For a ballot measure committee, name shall include official petition serial number) <u>Committee to Elect James L. Conlogue</u>		DATE <u>12/29/15</u>	
RESIDENCE ADDRESS (Number and Street) <u>8079 High Road</u>		CITY <u>Hereford</u>	STATE <u>AZ</u>	ZIP <u>85615</u>	
MAILING ADDRESS (if different from above)		CITY	STATE	ZIP	
COMMITTEE TELEPHONE # <u>(520) 803-6948</u>		COMMITTEE FAX # <u>—</u>	COMMITTEE E-MAIL ADDRESS <u>conlogue@cox.net</u>		
DOES THE POLITICAL COMMITTEE HAVE A SPONSORING ORGANIZATION? If yes, please provide the following information:		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>		
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:					
<ul style="list-style-type: none"> > 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>James L. Conlogue</u>		CHAIRMAN'S TELEPHONE # <u>(520) 803-6948</u>		CHAIRMAN'S FAX # <u>—</u>	
CHAIRMAN'S RESIDENCE ADDRESS (and mailing address if different) <u>8079 High Road</u>		CITY <u>Hereford</u>	STATE <u>AZ</u>	ZIP <u>85615</u>	
CHAIRMAN'S OCCUPATION <u>Superior Court Judge</u>		CHAIRMAN'S EMPLOYER <u>Cochise County Superior Court</u>			
NAME OF COMMITTEE TREASURER <u>James L. Conlogue</u>		TREASURER'S TELEPHONE # <u>(520) 803-6948</u>		TREASURER'S FAX # <u>—</u>	
TREASURER'S RESIDENCE ADDRESS (and mailing address if different) <u>8079 High Road</u>		CITY <u>Hereford</u>	STATE <u>AZ</u>	ZIP <u>85615</u>	
TREASURER'S OCCUPATION <u>Superior Court Judge</u>		TREASURER'S EMPLOYER <u>Cochise County Superior Court</u>			

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") <i>James L. Conlogue</i>			
PARTY AFFILIATION <i>Democrat</i>	OFFICE SOUGHT <i>Superior Court Judge Division 5</i>	COUNTY OF RESIDENCE <i>Cochise</i>	
CANDIDATE'S OR DESIGNATING INDIVIDUAL'S ADDRESS <i>8079 High Road</i>	CITY <i>Hereford</i>	STATE <i>AZ</i>	ZIP <i>85615</i>

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: 12/29/15 Candidate's or Designating Individual's signature: *James L. Conlogue*
Signature cannot be digital

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: 12/29/15 Chairman's signature: *James L. Conlogue*
Signature cannot be digital

Date: 12/29/15 Treasurer's signature: *James L. Conlogue*
Signature cannot be digital