



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

ID# **2014-09**

RECEIVED NOV 20 2014

NAME OF POLITICAL COMMITTEE (For a ballot measure committee, name shall include official petition serial number) <b>Scott McManaway for Constable JPS</b>		DATE <b>11-20-2013</b>	
RESIDENCE ADDRESS (Number and Street) <b>4323 E Cooper St.</b>	CITY <b>Sierra Vista</b>	STATE <b>AZ</b>	ZIP <b>85650</b>
MAILING ADDRESS (if different from above)	CITY	STATE	ZIP

COMMITTEE TELEPHONE # <b>520-249-9317</b>	COMMITTEE FAX #	COMMITTEE E-MAIL ADDRESS <b>Scott.McManaway@gmail.com</b>
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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:**

CANDIDATE'S CAMPAIGN COMMITTEE

EXPLORATORY COMMITTEE

COMMITTEE ORGANIZED IN SUPPORT OF OR OPPOSITION TO ONE OR MORE CANDIDATES

COMMITTEE IN SUPPORT OF OR OPPOSITION TO THE QUALIFICATION, PASSAGE OR DEFEAT OF A BALLOT ISSUE [A.R.S. §16-902.01(F)]  
 support or  opposition to this ballot measure

OTHER COMMITTEE (please describe below)

SEPARATE SEGREGATED FUND ESTABLISHED BY A CORPORATION OR LABOR ORGANIZATION

COMMITTEE ORGANIZED FOR THE PURPOSE OF MAKING INDEPENDENT EXPENDITURES

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)

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))

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 <b>Scott McManaway</b>	CHAIRMAN'S TELEPHONE #	CHAIRMAN'S FAX #
CHAIRMAN'S RESIDENCE ADDRESS (and mailing address if different)	CITY <b>Sierra Vista</b>	STATE <b>AZ</b> ZIP <b>85650</b>
CHAIRMAN'S OCCUPATION	CHAIRMAN'S EMPLOYER	
NAME OF COMMITTEE TREASURER <b>Scott McManaway</b>	TREASURER'S TELEPHONE #	TREASURER'S FAX #
TREASURER'S RESIDENCE ADDRESS (and mailing address if different)	CITY <b>Sierra Vista</b>	STATE <b>AZ</b> ZIP <b>85650</b>
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")

*Scott McManaway*

PARTY AFFILIATION

*Republican*

OFFICE SOUGHT

COUNTY OF RESIDENCE

*Cochise*

CANDIDATE'S OR DESIGNATING INDIVIDUAL'S ADDRESS

*4325 E Cooper St.*

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: *11-20-13*

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: *11-20-13*

Chairman's signature: 

Date: *11-20-13*

Treasurer's signature: 