



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

RECEIVED DEC 31 2013

ID# 2014-11

NAME OF POLITICAL COMMITTEE (For a ballot measure committee, name shall include official petition serial number) <i>COMMITTEE TO REFLECT JUDGE SKILES</i>		DATE <i>12/31/2013</i>	
RESIDENCE ADDRESS (Number and Street) <i>1561 S. APACHE PASS RD</i>	CITY <i>BOWIE</i>	STATE <i>AZ</i>	ZIP <i>85605</i>
MAILING ADDRESS (if different from above) <i>P.O. BOX 351</i>	CITY <i>BOWIE</i>	STATE <i>AZ</i>	ZIP <i>85605</i>
COMMITTEE TELEPHONE # <i>520 847-2357</i>	COMMITTEE FAX #	COMMITTEE E-MAIL ADDRESS <i>MIRESKILES@VTC.NET</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 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 <i>MICHAEL SKILES</i>	CHAIRMAN'S TELEPHONE # <i>520-847-2357</i>	CHAIRMAN'S FAX #	
CHAIRMAN'S RESIDENCE ADDRESS (and mailing address if different) <i>1561 S. APACHE PASS RD</i>	CITY <i>BOWIE</i>	STATE <i>AZ</i>	ZIP <i>85605</i>
CHAIRMAN'S OCCUPATION <i>JUSTICE OF THE PEACE</i>	CHAIRMAN'S EMPLOYER <i>Cochise County</i>		
NAME OF COMMITTEE TREASURER <i>MICHAEL SKILES</i>	TREASURER'S TELEPHONE # <i>520-847-2357</i>	TREASURER'S FAX #	
TREASURER'S RESIDENCE ADDRESS (and mailing address if different) <i>1561 S. APACHE PASS RD</i>	CITY <i>Cochise County</i>	STATE <i>AZ</i>	ZIP <i>85605</i>
TREASURER'S OCCUPATION <i>JUSTICE OF THE PEACE</i>	TREASURER'S EMPLOYER <i>Cochise County</i>		

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 ("DP")

MICHAEL SKILES

PARTY AFFILIATION

DEM

OFFICE SOUGHT

JUSTICE OF THE PEACE # 6

COUNTY OF RESIDENCE

Cochise

CANDIDATE'S OR DESIGNATING INDIVIDUAL'S ADDRESS

1561 S. APACHE PASS RD

CITY

BOWIE

STATE

AZ

ZIP

85605

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: 12/31/2013

Candidate's or Designating Individual's signature: Michael Skiles

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: 12/31/2013

Chairman's signature: Michael Skiles

Date: 12/31/2013

Treasurer's signature: Michael Skiles