Date: 9-27-2018



**COMMITTEE ID NUMBER** 

M2018-02

## **COMMITTEE INFORMATION:**

Committee n	Name: PETBCONNAN FORMAYOR
	ESS: 420 FALMER BROTHERS DR SEDONA AZ 8633C
Email addres	SS: PETECONNA FOR MAYON & GMAIL. COM
Phone numb	er. <u>847-989-1090</u>
Website:	PETE CONNANISON MAYON, COM
Chairperson	name: PETE CONNO
Treasurer: _	SUR CONNAD

## **DECLARATION AND SIGNATURES:**

I declare under penalty of perjury that the foregoing information is true and correct. I further declare that: (1) the committee will no longer receive any contributions or make any disbursements; (2) the committee either (a) has no outstanding debts or obligations, or (b) has outstanding debts or obligations that are all more than five years old, and the committee's creditors have agreed to discharge the debts and obligations and have agreed to the termination of the committee; (3) any surplus monies have been disposed of and that the committee has no cash on hand; and (4) all contributions and expenditures have been reported, including any disposal of surplus monies.

Chairperson's signature:

Date: 9-27-2018

Treasurer's signature:

Date: 9-27-20/8

Candidate's signature (if applicable):

Date: 9-27-2018

RECEIVED

OCT 03 2018

CITY OF SEDONA CITY CLERK'S OFFICE