FOR OFFICE USE ONLY

CITY/TOWN OF _____
POLITICAL COMMITTEE
NO ACTIVITY STATEMENT

1. _____
Full Name of Committee

_____
Address

_____
City ZIP Code County Phone Number

2. _____
Sponsoring Organization or Candidate and office E-mail address Fax #

3. ID#

4. **REPORTING PERIOD** **DUE BETWEEN**
(Please check appropriate box)

☐ Pre-Election Report For period 11/24/2009 – 10/13/2010..... 10/14/2010 – 10/21/2010

☐ Post-Election Report For period 10/14/2010 – 11/22/2010..... 11/23/2010 – 12/02/2010

☐ January 31, Report For period 11/23/2010 – 12/31/2010..... 01/01/2011 – 01/31/2011

I, _____, upon my oath and under penalty of perjury, say that this political
(name of treasurer or candidate- printed)
committee received no contributions and made no expenditures for the period indicated above, and therefore is filing a No Activity Statement pursuant to A.R.S. §16-913 (D), and this statement, pursuant to A.R.S. §16-913 (E) is true and complete.

_____ _____
Date Signature of Candidate or Treasurer