

Date: _____



STATE OF ARIZONA COMMITTEE TERMINATION STATEMENT

COMMITTEE ID NUMBER _____



COMMITTEE INFORMATION:

Committee name: Moving Flagstaff Forward

Mailing address: PO Box 23894, Flagstaff AZ 86002

Email address: _____

Phone number: _____

Website: _____

Chairperson name: Joseph Bader

Treasurer: Alana Naima Schuller

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: *Joseph Bader* Date: 1/3/2017

Treasurer's signature: *Alana Naima Schuller* Date: 1/3/2017

Candidate's signature (if applicable): _____ Date: _____