CITY / TOWN OF Chandler

POLITICAL COMMITTEE **TERMINATION STATEMENT**

SEP - 5 2013

RECEIVED

CITY OF CHANDLER

CITY UF CHANDLER CITY CLERK

A.R.S. §§ 16-914 and 16-915.01

CITY CLERK ID# C08-02

		
NAME OF POLITICAL COMMITTEE Kevin Hartke for Council		
ADDRESS (NUMBER & STREET)	CITY	STATE ZIP
	Chanbler	A7 85224
536 N Apache Dr MAILING ADDRESS (IF DIFFERENT FROM ABOVE)	CITY	STATE ZIP
· '		
COMMITTEE TELEPHONE # COMMITTEE FAX #	, COMMITTEE E-	MAIL ADDRESS
480 363 4433 480 963 7698	' kevini ha	otke @ gmail. com
NAME OF SPONSORING ORGANIZATION OR CANDIDATE AND OFFICE ,		
Kevin Hartke Chandler Councilmember		
ADDRESS OF SPONSORING ORGANIZATION	EMAIL ADDRESS AND FAX #	
Select the boxes that apply:		
A. This is to certify that all contributions received and all expenditures made on behalf of the political committee		
indicated above have been reported as required by A.R.S. § 16-913. We further certify that the political committee		
will no longer receive any contributions or make any disbursements, that the committee has no outstanding debts		
or obligations, and that any surplus monies have been disposed of pursuant to A.R.S. § 16-915.01.		
Please mark the appropriate statement below to indicate which campaign finance report states the disposition		
of any surplus monies.		
The disposition of surplus monies was submitted on the campaign finance report filed on:		
The disposition of surplus monies is reported on the attached campaign finance report.		
B. This committee has terminated its activities in the above-named jurisdiction. The undersigned chairman and		
treasurer hereby attest that it is the intent of this committee to remain active in other jurisdictions and that all		
remaining monies of this committee shall be used in other jurisdictions.		
C This committee has transferred the committee's debts and obligations to a subsequent committee.		
Please enter the full name and ID# of the committee into which debts and obligations have been transferred.		
Name of Committee: // // // //	\sim 1	ID#
Name of Committee: Kevin Hartke for (ouncil	ID# C08-02
V. 1/ 1/		ta da
We, Kevin Hartke		,certify under
Printed name of Chairman and	Printed name of Trea	asurer
penalty of perjury that this statement of termination pursuant to A.R.S. § 16-914 is true and complete.		
penalty of perjury that this statement of termination pursuant to A.N.S. 8 10 -5 14 is true and complete.		
Koi Harth		
/ vin // with		
Signature of Chairman	Signature of Treasurer	