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By Denise Montana at 11:39 am, Jan 18, 2024

Date: 01/18/2024



**STATE OF ARIZONA
COMMITTEE TERMINATION
STATEMENT**

COMMITTEE ID NUMBER

2018-01

COMMITTEE INFORMATION:

Committee name: THOMPSON FOR MESA
Mailing address: 7140 E. MONTE AVE, MESA 85209
Email address: KTHOMP2120@GMAIL.COM
Phone number: 4805866472
Website: _____
Chairperson name: _____
Treasurer: _____

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: _____

Treasurer's signature: _____ Date: _____

Candidate's signature (if applicable): [Signature] Date: 01/18/2024