



STATE OF ARIZONA
POLITICAL COMMITTEE
TERMINATION STATEMENT

A.R.S. §16-914; A.R.S. § 16-915.01

For Office Use Only
CITY OF TUCSON

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OFFICE OF THE
CITY CLERK

1. <u>Jobs For Tucson II</u>			3. ID# <u>15-238-IE</u>
Full Name of Committee			
<u>444 E. University</u>			
Address			
<u>Tucson AZ 85705</u>		<u>520-884-8843</u>	
City	Zip Code	Phone #	
2. Sponsoring Organization or Candidate and Office		E-Mail Address	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 1/15/17.

The disposition of surplus monies is reported on the attached campaign finance report.

B. This committee hereby terminates all activity within the jurisdiction of the City of Tucson and asserts that the committee intends to remain active in other jurisdictions and that the committee's remaining monies shall be used for activity 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.

Robert Brinkman ID# _____

Name of Committee ID#

We, Peter Wilke and Deborah Bringham, certify under penalty
(Name of Chairman and Treasurer - Printed)

of perjury that this statement of termination pursuant to A. R. S. § 16-914 is true and complete.

Peter Wilke
Signature of Chairman

Deborah Bringham
Signature of Treasurer



**POLITICAL COMMITTEE
STATE OF ARIZONA
CAMPAIGN FINANCE REPORT**

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1. Jobs for Tucson II
Full Name of Committee

444 E. University
Address

Tucson, AZ 85705 520-884-8843
City Zip Code Phone Number

2. Sponsoring Organization and Office

Name of Candidate and Office Sought (if applicable)

E-Mail Address Fax #

3. ID#

15-238-IE

4. **REPORTING PERIOD** (Please check appropriate box) **FILING DEADLINE**

January 31 Report – For Period of
November 26, 2013 through December 31, 2014 *February 2, 2015

June 30 Report – For Period of
January 1, 2015 through May 31, 2015 June 30, 2015

Pre-Primary Election Report – For Period of
June 1, 2015 through August 13, 2015 August 21, 2015

Post-Primary Election Report – For Period of
August 14, 2015 through September 14, 2015 September 24, 2015

Pre-General-Election Report – For Period of
September 15, 2015 through October 22, 2015 October 30, 2015

Post-General Election Report – For Period of
October 23, 2015 through November 23, 2015 December 3, 2015

January 31, 2017 Report – For Period of
November 24, 2015 through December 31, 2016 January 31, 2017

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)	0	0
5b Cash on Hand at Beginning of this Reporting Period	355.09	474.18
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	<159.09>	2490.91
5d Subtotal (add Lines [b] and [c] for Column A and add lines [a] and [c] for Column B)	196.00	2490.91
6a Total Debts and Obligations from Previous Campaign Committee at beginning of the Election Period (or at time Statement of Organization was filed for the new committee) (Do not add or subtract this line from the other lines)	0	0
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	196.00	2490.91
7. Cash on Hand at Close of Reporting Period (Subtract Line 6b from Line 5d - Column A must equal Column B)	0	0

*Per A.R.S. §16-916(D) if the date for filing any Campaign Finance Report is a Saturday, a Sunday or another legal holiday, the filing deadline is the next day that is not a Saturday, a Sunday, or another legal holiday.

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

1. Committee Name Jobs For Tucson II 3. ID# 15-238-IE
 2. Report Covering Period From 11/24/15 Thru 12/31/16

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)	0	2650.00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)	1.00	1.00
(c) Political Committees (Total from Schedule B)	0	0
(d) Subtotal Contributions [add 4(a), 4(b) and 4(c)]	1.00	2651.00
(e) Refund of Contributions (Total from Schedule F-2)	160.09	160.09
(f) Total contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	<159.09>	2490.91
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)	0	0
(b) All other loans (Total from Schedule C-1)	0	0
(c) Total loans [add 5(a) and 5(b)]	0	0
6. In-kind contributions (Total from Schedule E)	0	0
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)	0	0
8. TOTAL Receipts [add 4(f), 5(c), 6, and 7]	<159.09>	2490.91
DISBURSEMENTS		
9. Expenditures for Operating Expenses (Total from Schedule D)	196.00	2490.91
10. Independent Expenditures (Total from Schedule D-1)	0	0
11. Value of In-kind expenditures (Total from Schedule E)	0	0
12. Loans made by reporting committee (Total from Schedule D-2)	0	0
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)	0	0
(b) Repayment of all other loans (Total from Schedule D-5)	0	0
(c) Total Loan Repayments [add 13(a) and 13(b)]	0	0
14. Transfers to other political committees (Total from Schedule D-6)	0	0
15. Any other disbursement (Total from Schedule D-7)	0	0
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]	196.00	2490.91
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)	0	0
18. TOTAL disbursements [subtract line 17 from line 16]	196.00	2490.91
19. Total Outstanding Debts owed by Reporting Candidate or Political Comm. (Schedule F-3)	0	0
20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.		
Type or Print Name of Treasurer <u>Deborah Bringham</u>		
Signature of Treasurer or Candidate or Designating Individual: <u>Deborah Bringham</u>		Date <u>1/10/17</u>

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CONTRIBUTIONS of \$50 or Less - AGGREGATE TOTAL*

SCHEDULE A-1

1. Committee Name Jobs for Tucson II 3. ID# 15-238-IE
2. Report Covering Period from 11/24/15 thru 12/31/16
4. Aggregate Total of Contributions of \$50 or Less

Description	Amount Received This Period		Cumulative Total This Campaign To Date
Dep to reopen acct	1.00		1.00
5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A]	1.00	6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B]	1.00

*If contributions of \$50 or less are listed with contributors name and address on Schedule A, do not include them on this schedule.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Jobs for Tucson II 2. ID# 15-238-IE
 3. Report Covering Period from: 4/24/15 thru 12/31/16

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo Bank</u>	<u>11/30/15</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Bank Service Fee</u>	CHECK # <u>Auto Pmt</u>	
b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo Bank</u>	<u>12/31/15</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Bank Service Fee</u>	CHECK # <u>Auto Pmt</u>	
c.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo Bank</u>	<u>1/31/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>Auto Pmt</u>	
d.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo</u>	<u>2/29/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>Auto Pmt</u>	
e.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo</u>	<u>3/31/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>Auto Pmt</u>	
f.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo</u>	<u>4/30/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>Auto Pmt</u>	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D (If last page of Schedule D, transfer total to Detailed Summary Page, Line 9, Column A)		<u>\$84.00</u>

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Jobs for Tucson II 2. ID# 15-238-IE
 3. Report Covering Period from: 11/24/15 thru 12/31/16

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo</u>	<u>5/31/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>autoPmt</u>	
b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo</u>	<u>6/30/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>autoPmt</u>	
c.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo</u>	<u>7/31/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>autoPmt</u>	
d.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo</u>	<u>8/31/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>autoPmt</u>	
e.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo</u>	<u>9/30/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>autoPmt</u>	
f.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo</u>	<u>10/31/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>autoPmt</u>	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page, Line 9, Column A]		<u>\$84.00</u>

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

1. Committee Name Jobs For Tucson II 2. ID# 15-238-IE
 3. Report Covering Period from: 11/24/15 thru 12/31/16

EXPENDITURES		DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
a.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo</u>	<u>11/30/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>AutoPrint</u>	
b.	NAME, ADDRESS, CITY, STATE AND ZIP <u>Wells Fargo</u>	<u>12/31/16</u>	<u>14.00</u>
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>Service Fee</u>	CHECK # <u>AutoPrint</u>	
c.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
d.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
e.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
f.	NAME, ADDRESS, CITY, STATE AND ZIP		
	DESCRIPTION OF ITEMS OR SERVICES PURCHASED	CHECK #	
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D [If last page of Schedule D, transfer total to Detailed Summary Page, Line 9, Column A]		<u>28.00</u>

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit.

OFFSETS TO CONTRIBUTIONS RECEIVED*

SCHEDULE F-2

1. Committee Name Jobs for Tucson II 2. ID # 15-238-FE

3. Report Covering Period from: 4/24/15 thru 12/31/16

REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED		DATE REFUND MADE	AMOUNT OF THE REFUND
NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE			
a.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>Thomas Warne</u> <u>70 W. Cushing St Tucson AZ 85701</u> DESCRIPTION OF REFUND <u>Excess monies donated returned to contributor Chk # 1003</u>	<u>1/10/17</u> 12/31/16	<u>\$160.09</u>
b.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		
c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		
d.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		
e.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		
f.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# DESCRIPTION OF REFUND		
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 [If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(e), Column A]		<u>160.09</u>

* Includes return of contributions received by reporting committee .