

279155

# 48 HOUR Election Funding Disclosure Report (Dark Money)

Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):UNITE HERE	Local 11	
90017	eroa St, Ste 4050, Los Angeles, CA	Expenditure Amount:4402.81
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/13/2023
Description of Purchase: Field Canvas	sing Expenses (Estimates)	
Original Source #1 Informatio	Additional original sour	ces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	, DC 20036	
Employer: <sub>N/A</sub>		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one	e (1) written request was sent to contribut	or as required, to obtain the information.
Intermediary Transfer Information	ation Related to Original Source page 2	#1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	d by intermediary as required to be able to	o make the expenditure. ☐ Yes ☐ No
I CERTIFY, UNDER PENALTY OF PERMY KNOWLEDG	JURY, THAT I HAVE EXAMINED THE CON-	TENTS OF THIS REPORT AND TO THE BES
<sub>Filer Name</sub> . Brendan Walsh	Signature: // 9	Date: 3/15/23

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No	
Intermedian Transfer Information Polated to Original Source	#2 (if any)	
Intermediary Transfer Information Related to Original Source	#2 (II ally)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	(i. d.i.y)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Isabel Rose		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:81.86
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/13/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	
Original Source #1 Informatio	n   Additional original sou	rces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Informa  ☐ Additional intermediary sources on	ation Related to Original Source	e #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	by intermediary as required to be able	to make the expenditure. □ Yes □ No
I CERTIFY, UNDER PENALTY OF PER. MY KNOWLEDG	JURY, THAT I HAVE EXAMINED THE CON E AND BELIEF IT IS TRUE AND COMPLE	TENTS OF THIS REPORT AND TO THE BEST OF TE.
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
	<b>110</b> (15
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
luterum adiam. Transfer Information Poleted to Original Source	#2 (if any)
Intermediary Transfer Information Related to Original Source  Name:	#2 (II ally)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	()
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	│ o make the expenditure.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:

A written transfer record was provided by intermediary as required to be able to make the expenditure. 

Yes 
No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Person	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ	2 85007	
Expenditure Information		
Name (Vendor/Payee):Mike Martinez		
Address (Vendor/Payee):1021 S 7th S	St Ave., Phoenix, AZ 85007	Expenditure Amount:300.14
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/13/2023
Description of Purchase:Field Canvass	sing Expenses (Estimates)	
Original Source #1 Information	1	es on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington, DC 20036		
Employer: N/A		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	by intermediary as required to be able to	make the expenditure. □ Yes □ No
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
I de la Tamasa de la Companya de Companya	#2 (if any)
Intermediary Transfer Information Related to Original Source	#2 (II ally)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	, n = ( u y )
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	
A written transfer record was provided by intermedially as required to be able to	o make the experiantic. 🗀 166 🗀 146
Intermediary Transfer Information Related to Original Source	e #2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Marilyn Wilbu	r	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:267.23
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/13/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	
Original Source #1 Informatio	n	rces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Informa  ☐ Additional intermediary sources on	ation Related to Original Sourc	e #1 (if any)
Name:		
Address:	1.1.0	
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	d by intermediary as required to be able	to make the expenditure.   Yes   No
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	()
Address:	
Employer:	In the transfer
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. ☐ Yes ☐ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ons, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	AZ 85007	
Expenditure Information		
Name (Vendor/Payee):Maggie Acos	sta	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:385.2
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/13/2023
Description of Purchase:Field Canvas	ssing Expenses (Estimates)	
Original Source #1 Information	on	ources on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington	n, DC 20036	
Employer: N/A		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least on	e (1) written request was sent to contrib	outor as required, to obtain the information.
Intermediary Transfer Inform  Additional intermediary sources or	nation Related to Original Sour	ce #1 (if any)
Name:		
Address:		
Employer:	MARIN	
Amount:		Date of Transfer:
A written transfer record was provide	d by intermediary as required to be abl	e to make the expenditure. ☐ Yes ☐ No
	RJURY, THAT I HAVE EXAMINED THE CO SE AND BELIEF IT IS TRUE AND COMPL	ONTENTS OF THIS REPORT AND TO THE BEST C ETE.
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
	40 (15)
Intermediary Transfer Information Related to Original Source  Name:	#2 (If any)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	()
Address:	-
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	<i>112</i> (11 dily)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
	40 //
Intermediary Transfer Information Related to Original Source	#2 (IT any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:

A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Arnette Neher	miah	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:225.5
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	
Original Source #1 Informatio	n	rces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Informa  ☐ Additional intermediary sources on	ation Related to Original Source page 2	e #1 (if any)
Name:		
Address:		
Employer:		
Amount:	* ** * 1 ** ** ** * * * * * * * * * * *	Date of Transfer:
A written transfer record was provided	by intermediary as required to be able	to make the expenditure.   Yes   No
	IURY, THAT I HAVE EXAMINED THE CON E AND BELIEF IT IS TRUE AND COMPLE	TENTS OF THIS REPORT AND TO THE BEST OF IE.
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$5000.00	Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contribute	r as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
I to the form of the Delete day Original Course	40 (:£ a.m.)
Intermediary Transfer Information Related to Original Source  Name:	#2 (If any)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	mz (ii diiy)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	
A written transfer record was provided by intermediary as required to be able to	Thate the experialities.   Tes   No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:

A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Carrillo Andre	s		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:330	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)		
Original Source #1 Informatio	n	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: <sub>N/A</sub>			
Amount: \$25000.00		Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  Additional intermediary sources on page 2			
Name:			
Address:			
Employer:		,	
Amount:		Date of Transfer:	
A written transfer record was provided	by intermediary as required to be able to	make the expenditure. □ Yes □ No	
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			
Filer Name:	Signature:	Date:	

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	r as required, to obtain the information.	
	W2 448	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	#Z (II dily)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if anv)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	│ o make the expenditure. □ Yes □ No	
A WINLOW Harristor record was provided by informediary as required to be able to make the experiences.		
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	

A written transfer record was provided by intermediary as required to be able to make the expenditure. 

\[
\sum \text{Yes} \sum \text{No}
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Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Any person, association of persons or entity, other than a registered candidate committee or political action committee, regardless of legal form, that makes an expenditure for the purpose of influencing the result of a local City of Phoenix election totaling \$10,000 or more within 16 days prior to an election must file this form with the City Clerk within 48 hours of making the expenditure (excluding Saturdays/Sundays/legal holidays). This form can be submitted by email, fax or in person to the contact information listed at the bottom of this page. (If an expenditure does not meet this criteria but is still required to be reported pursuant to PCC Ch. 12, Article VII, Division 3, it must be reported on a regular 'Election Funding Disclosure' form instead). Both the 'Campaign Finance Reporting Schedule' (for a list of due dates) and the 'Election Cycle' (for current election cycle dates) can be found online at <a href="https://www.phoenix.gov/elections">www.phoenix.gov/elections</a>.

Person, Association of Person	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Castaneda Ch	narlie	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:192.5
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	
Original Source #1 Informatio	n	urces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: <sub>N/A</sub>		
Amount: \$25000.00 Date Received: 02/13/2023		
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Informa  Additional intermediary sources on	ation Related to Original Source page 2	ce #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		

Signature:

Filer Name:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
1.4 B. T. C. L. C	#9 /:c a)
Intermediary Transfer Information Related to Original Source	#2 (If any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	#2 (if anv)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
	#0 /'S ama
Intermediary Transfer Information Related to Original Source	#2 (If any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Person	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Cooper Kuant	ayria	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:331.25
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvass	sing Expenses (Estimates)	
Original Source #1 Informatio	n	ces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: <sub>N/A</sub>		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount:	- 1 A A A A A A A A A A A A A A A A A A	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Laterand diam. Transfer Information Polated to Original Source	#2 (if any)	
Intermediary Transfer Information Related to Original Source  Name:	#2 (II ally)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		
Intermediary Transfer Information Related to Original Source	. #2 (if any)	
Name:	, "Z (" uliy)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Dickson Jose	ph		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:248.53	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvas	sing Expenses (Estimates)		
Original Source #1 Informatio	n	urces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Date: \_\_

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Lutanna aliana Tanantan Information Boloted to Original Source	#2 (if any)
Intermediary Transfer Information Related to Original Source  Name:	#2 (II ally)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	│ o make the expenditure.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:

A written transfer record was provided by intermediary as required to be able to make the expenditure. 

\[
\sum \text{Yes} \quad \text{No}
\]



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ns, or Entity Reporting	
		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Dunlap Aleas	ha	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:247.07
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	
Original Source #1 Informatio	n ☑ Additional original sourc	es on additional pages attached
Name: AFSCME	or Broad out of the	
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		make the expenditure. □ Yes □ No
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
luterum adiem. Transfer Information Poletad to Original Source	#2 (if any)
Intermediary Transfer Information Related to Original Source  Name:	#2 (II any)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	"2 (" a.y)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure
A Williest transfer record was provided by intermedially as required to be able to	Thanke the experience. El 100 El 10
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, AZ 85007			
Expenditure Information			
Name (Vendor/Payee):Evans Teresa			
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:30	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvas	sing Expenses (Estimates)		
Original Source #1 Informatio	n	ces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington, DC 20036			
Employer: <sub>N/A</sub>			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided	A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Filer Name:

Date: \_\_\_

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
	#Z (II ally)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
	WA //*	
Intermediary Transfer Information Related to Original Source	#2 (If any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Person	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Everett Mand	y	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:280
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	
Original Source #1 Informatio	n	es on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: <sub>N/A</sub>		
Amount: \$25000.00		Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Informa  ☐ Additional intermediary sources on	ation Related to Original Source	#1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	by intermediary as required to be able to	make the expenditure.   Yes  No
	JURY, THAT I HAVE EXAMINED THE CONT E AND BELIEF IT IS TRUE AND COMPLETI	ENTS OF THIS REPORT AND TO THE BEST OF E.

Signature:

Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
lutarina diana Transfer Information Balated to Original Source	#2 (if any)
Intermediary Transfer Information Related to Original Source	#2 (II ally)
Name:	,
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	#2 (II dily)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	, , , , , , , , , , , , , , , , , , ,
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Gallegos Patr	icia	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount: 192.5
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	1
Original Source #1 Informatio	n	rces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	· - · · · · · · · · · · · · · · · · · ·
Employer: <sub>N/A</sub>		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Informa	ation Related to Original Source	e #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	by intermediary as required to be able	to make the expenditure.   Yes   No
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
	HO (15 mm)	
Intermediary Transfer Information Related to Original Source  Name:	#2 (If any)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
lutaring diam. Transfer Information Polated to Original Source	#2 (if any)	
Intermediary Transfer Information Related to Original Source  Name:	#Z (II ally)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No	
Intermediary Transfer Information Related to Original Source	#2 (if anv)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (IT any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	

A written transfer record was provided by intermediary as required to be able to make the expenditure. 

Yes 
No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Gilbreath Pats	sy	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount: 192.5
Name of Candidate/Ballot Measure: Office Sought (Candidate Only): Carlos Garcia City Council		☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	
Original Source #1 Information    Additional original sources on additional pages attached		
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: <sub>N/A</sub>		
Amount: \$25000.00		Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one	(1) written request was sent to contribu	utor as required, to obtain the information.
Intermediary Transfer Informa  ☐ Additional intermediary sources on	ation Related to Original Source page 2	e #1 (if any)
Name:		
Address:		
Employer:		-
Amount:		Date of Transfer:
A written transfer record was provided	A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No	
	IURY, THAT I HAVE EXAMINED THE COME E AND BELIEF IT IS TRUE AND COMPLE	NTENTS OF THIS REPORT AND TO THE BEST OF TE.

Filer Name:

Signature:

Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
	40 // A	
Intermediary Transfer Information Related to Original Source	#2 (IT any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	()	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure	
A Written transfer record was provided by intermediary as required to be able to	make the expenditure. If 100 If 100	
Intermediary Transfer Information Related to Original Source	e #2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure.   Yes   No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Gonzalez Victoria	tor		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:244.5	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvas	sing Expenses (Estimates)		
Original Source #1 Informatio	n	rces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Informa  Additional intermediary sources on	ation Related to Original Source	e #1 (if any)	
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided	by intermediary as required to be able	to make the expenditure.   Yes   No	
	IURY, THAT I HAVE EXAMINED THE CON E AND BELIEF IT IS TRUE AND COMPLE	TENTS OF THIS REPORT AND TO THE BEST OF TE.	
Filer Name:	Signature:	Date:	

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
	W2 W2	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Laterna diam Transfer Information Balated to Original Source	#2 (if any)	
Intermediary Transfer Information Related to Original Source	#2 (II dily)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, AZ 85007			
Expenditure Information			
Name (Vendor/Payee):Gray Ken	<del></del>		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:218.75	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)		
Original Source #1 Information	n	ces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: N/A			
Amount: \$25000.00		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  □ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided	by intermediary as required to be able t	o make the expenditure. ☐ Yes ☐ No	
	URY, THAT I HAVE EXAMINED THE CON E AND BELIEF IT IS TRUE AND COMPLET	TENTS OF THIS REPORT AND TO THE BEST OF E.	
Filer Name:	Signature:	Date:	

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
The state of the s	#0 /if am. \
Intermediary Transfer Information Related to Original Source	#2 (IT any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	#2 (II dily)
Address:	
Employer:	D. L. of Tourist
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	(***
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	о таке те ехрепаните. 🗀 теѕ 🗀 No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Any person, association of persons or entity, other than a registered candidate committee or political action committee, regardless of legal form, that makes an expenditure for the purpose of influencing the result of a local City of Phoenix election **totaling \$10,000 or more within 16 days prior to an election** must file this form with the City Clerk within 48 hours of making the expenditure (excluding Saturdays/Sundays/legal holidays). This form can be submitted by email, fax or in person to the contact information listed at the bottom of this page. (If an expenditure does not meet this criteria but is still required to be reported pursuant to PCC Ch. 12, Article VII, Division 3, it must be reported on a regular 'Election Funding Disclosure' form instead). Both the 'Campaign Finance Reporting Schedule' (for a list of due dates) and the 'Election Cycle' (for current election cycle dates) can be found online at <a href="https://www.phoenix.gov/elections">www.phoenix.gov/elections</a>.

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Hernandez Ar	na		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:333.75	
Name of Candidate/Ballot Measure:	Office Sought (Candidate Only):	☑ Support or ☐ Oppose	
Carlos Garcia	City Council		
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvas	sing Expenses (Estimates)		
Original Source #1 Informatio	n	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington, DC 20036			
Employer: N/A			
Amount: \$25000.00		Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Filer Name:

Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	r as required, to obtain the information.	
	#0 (# a a a )	
Intermediary Transfer Information Related to Original Source	#2 (If any)	
Name:		
Address:	-	
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermedian Transfer Information Bolated to Original Source	#2 (if any)	
Intermediary Transfer Information Related to Original Source	#2 (II ally)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. ☐ Yes ☐ No	
	<b>110</b> 110	
Intermediary Transfer Information Related to Original Source	#2 (If any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Persons, or Entity Reporting		
Name: Worker Power ☑ New Report OR ☐ Amendmen		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Herrera Luis		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:216.7
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	
Original Source #1 Informatio	n	rces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount: Date of Transfer:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		

Filer Name:

Signature:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
lutarina diana Transfer Information Polated to Original Source	#2 (if any)	
Intermediary Transfer Information Related to Original Source	#2 (II ally)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	,, <b>2</b> ( ay)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	()	
Address:		
Employer:		
	1 =	
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. 🗆 Yes 🗀 No	



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Person, Association of Persons, or Entity Reporting			
Name: Worker Power			
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Huynh Ryan			
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:83.01	
Name of Candidate/Ballot Measure:	Office Sought (Candidate Only):	☑ Support or ☐ Oppose	
Carlos Garcia	City Council		
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)		
Original Source #1 Information	n	ces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023			
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  Additional intermediary sources on page 2			
Name:			
Address:			
Employer:		1 0 0 0 0 0	
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	#2 (if any)
	#2 (II dily)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



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Person, Association of Persons, or Entity Reporting		
Name: Worker Power ☑ New Report OR ☐ Amendment		
Address: 1021 S 7th St Ave., Phoenix, A	<b>Z</b> 85007	
Expenditure Information		
Name (Vendor/Payee):Jarquin Edith		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:334.58
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing	,	Date of Expenditure:3/18/2023
Description of Purchase:Field Canvass	sing Expenses (Estimates)	
Original Source #1 Information	n	es on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00 Date Received: 02/13/2023		
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount: Date of Transfer:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		

Date: \_\_

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
	No (re	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. ☐ Yes ☐ No	
lutarina diama Transfer Information Balated to Original Source	#2 (if any)	
Intermediary Transfer Information Related to Original Source  Name:	#2 (II ally)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	<i>"-</i> (",)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	2 #2 (if any)	
Name:	, , _ ( d)	
Address:		
Employer:		
	Data of Transferr	
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure.   Yes  No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Persons, or Entity Reporting			
Name: Worker Power	Name: Worker Power ☑ New Report OR ☐ Amendment		
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Lechuga Rosa	ario		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:245.6	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvas	sing Expenses (Estimates)		
Original Source #1 Informatio	n	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023			
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Informa  ☐ Additional intermediary sources on	ation Related to Original Source	#1 (if any)	
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	r as required, to obtain the information.	
	110 (15 )	
Intermediary Transfer Information Related to Original Source	#2 (If any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
	WO. !!!	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	(**	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	│ o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	



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Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Lopez Debora	h		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:247.43	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing	L ·	Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)		
Original Source #1 Informatio	n ☑ Additional original source	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023			
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Filer Name:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
	no
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	D make the expenditure. ☐ Yes ☐ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. ☐ Yes ☐ No



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Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power ☑ New Report OR ☐ Amendment		
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Martinez Vice	nte	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:223.3
Name of Candidate/Ballot Measure:	Office Sought (Candidate Only):	☑ Support or ☐ Oppose
Carlos Garcia	City Council	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvass	sing Expenses (Estimates)	
Original Source #1 Informatio	n	es on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: <sub>N/A</sub>		
Amount: \$25000.00 Date Received: 02/13/2023		
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		

Signature: \_\_\_\_\_

Filer Name: \_\_\_\_\_

Name: UFCW Western States Council Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620  Employer: NA Amount: \$50000.00  Date Received: 02/13/2023  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: Address: Employer: Amount: A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: Address: Employer: A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: Address: Employer: A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: Address: Employer: A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No	Original Source #2 Information (if any)	
Employer: N/A  Amount: \$50000.00	Name: UFCW Western States Council	
Amount: \$50000.00    Date Received: 02/13/2023     Unknown - Noting that at least one (1) written request was sent to contributor as required, to obtain the information.    Intermediary Transfer Information Related to Original Source #2 (if any)	Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
□ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  Amount:  A written transfer record was provided by intermediary as required to be able to make the expenditure. □ Yes □ No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  A written transfer record was provided by intermediary as required to be able to make the expenditure. □ Yes □ No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  Amount:  A written transfer record was provided by intermediary as required to be able to make the expenditure. □ Yes □ No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  A written transfer record was provided by intermediary as required to be able to make the expenditure. □ Yes □ No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:	Employer: N/A	
□ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: Address: Employer: Amount:  A written transfer record was provided by intermediary as required to be able to make the expenditure. □ Yes □ No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: Address: Employer: A written transfer record was provided by intermediary as required to be able to make the expenditure. □ Yes □ No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: Address: Employer: Amount:  A written transfer record was provided by intermediary as required to be able to make the expenditure. □ Yes □ No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: A written transfer record was provided by intermediary as required to be able to make the expenditure. □ Yes □ No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name: Address: Employer: Employer:	Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>
Name: Address: Employer: Amount: Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.		or as required, to obtain the information.
Name: Address: Employer: Amount: Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.		
Address:  Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No  Intermediary Transfer Information Related to Original Source #2 (if any)  Intermediary Transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:	Intermediary Transfer Information Related to Original Source	#2 (if any)
Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.	Name:	
Amount:  A written transfer record was provided by intermediary as required to be able to make the expenditure.	Address:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.    Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.    Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  Amount:  Date of Transfer:  Address:  Employer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.    Intermediary Transfer Information Related to Original Source #2 (if any)  Intermediary Transfer Information Related to Original Source #2 (if any)  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:	Employer:	
Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure. Yes No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure. Yes No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:	Amount:	Date of Transfer:
Name: Address: Employer: Amount:    A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No   Name:	A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Name: Address: Employer: Amount:    A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes   No   Name:	L. C. L. C. L. C. L. C. Delete de Original Course	40 (is and
Address:  Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.  Yes No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.  Yes No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:		#2 (IT ally)
Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.  Yes No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.  Yes No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:	Name:	
Amount:  A written transfer record was provided by intermediary as required to be able to make the expenditure.   Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.   Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:	Address:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.    Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.    Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:	Employer:	
Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.   Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:	Amount:	Date of Transfer:
Name:  Address:  Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure. Yes No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:	A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Name:  Address:  Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure. Yes No  Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:	Intermediany Transfer Information Related to Original Source	#2 (if any)
Address:  Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.   Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:		m2 (ii diiy)
Employer:  Amount:  Date of Transfer:  A written transfer record was provided by intermediary as required to be able to make the expenditure.   Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:		
Amount:  A written transfer record was provided by intermediary as required to be able to make the expenditure.   Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:		
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:		DetectToucher
Intermediary Transfer Information Related to Original Source #2 (if any)  Name:  Address:  Employer:		
Name: Address: Employer:	A written transfer record was provided by intermediary as required to be able to	o make the expenditure. ☐ Yes ☐ No
Name: Address: Employer:	Intermediary Transfer Information Related to Original Source	#2 (if any)
Employer:		
	Address:	
	Employer:	
		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No		make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Any person, association of persons or entity, other than a registered candidate committee or political action committee, regardless of legal form, that makes an expenditure for the purpose of influencing the result of a local City of Phoenix election totaling \$10,000 or more within 16 days prior to an election must file this form with the City Clerk within 48 hours of making the expenditure (excluding Saturdays/Sundays/legal holidays). This form can be submitted by email, fax or in person to the contact information listed at the bottom of this page. (If an expenditure does not meet this criteria but is still required to be reported pursuant to PCC Ch. 12, Article VII, Division 3, it must be reported on a regular 'Election Funding Disclosure' form instead). Both the 'Campaign Finance Reporting Schedule' (for a list of due dates) and the 'Election Cycle' (for current election cycle dates) can be found online at <a href="https://www.phoenix.gov/elections">www.phoenix.gov/elections</a>.

Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):McConaughy	Bridget	
Address (Vendor/Payee):1021 S 7th St Ave., Phoenix, AZ 85007		Expenditure Amount:203.5
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvass	sing Expenses (Estimates)	
Original Source #1 Informatio	n	urces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any) ☐ Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		

Signature:

Filer Name:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
	W0 (16 )
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	<i>"-</i> ( a)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Person	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Melendez Cris	stina	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:333.75
Name of Candidate/Ballot Measure: Office Sought (Candidate Only): Carlos Garcia City Council		☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvass	sing Expenses (Estimates)	
Original Source #1 Information	n  ☑ Additional original sou	rces on additional pages attached
Name: AFSCME	· · · · · · · · · · · · · · · · · · ·	
Address: 1625 L Street NW Washington,	DC 20036	
Employer: <sub>N/A</sub>		
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Informa  ☐ Additional intermediary sources on	ntion Related to Original Source page 2	e #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	by intermediary as required to be able	to make the expenditure. □ Yes □ No
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
	40 (:5)	
Intermediary Transfer Information Related to Original Source	#2 (If any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
luterum adiam. Transfer Information Polated to Original Source	#2 (if any)	
Intermediary Transfer Information Related to Original Source	#2 (II dily)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#Z (IT any)	
Name:		
Address:		
Employer:	<del></del>	
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	×Z 85007	
Expenditure Information		
Name (Vendor/Payee):Merriman Jac	equeline	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:251.47
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or □ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	ssing Expenses (Estimates)	
Original Source #1 Information	Additional original so	urces on additional pages attached
Name: AFSCME		**************************************
Address: 1625 L Street NW Washington	, DC 20036	
Employer: N/A		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Inform  Additional intermediary sources on	ation Related to Original Source	ce #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	d by intermediary as required to be able	to make the expenditure.   Yes   No
	JURY, THAT I HAVE EXAMINED THE CO E AND BELIEF IT IS TRUE AND COMPLE	NTENTS OF THIS REPORT AND TO THE BEST O
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	//
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	
A Written transfer record was provided by intermediary as required to be able to	make the expenditure. 🗆 Tes 🗀 No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	□ Discription



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Ortiz Lorena			
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:217.8	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvas	sing Expenses (Estimates)		
Original Source #1 Informatio	n	rces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one	(1) written request was sent to contribu	tor as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Date: \_\_

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	<i>"-</i> (" any)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	11 - Nation 1	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		
Intermediary Transfer Information Related to Original Source #2 (if any)		
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	

A written transfer record was provided by intermediary as required to be able to make the expenditure. 

Yes 
No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Pacheco Mora	ales Irma	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:243.77
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	
Original Source #1 Informatio	n	rces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00 Date Received: 02/13/2023		
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	l by intermediary as required to be able	to make the expenditure. □ Yes □ No
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
	<b>115</b> (15	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
I Company to the Comp	#0 /:£ -::: \	
Intermediary Transfer Information Related to Original Source	#2 (If any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. ☐ Yes ☐ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Palmer Eldrin		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:222.93
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvass	sing Expenses (Estimates)	
Original Source #1 Informatio	n ☑ Additional original sou	urces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00 Date Received: 02/13/2023		
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Informa	ation Related to Original Source	e #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No		
	IURY, THAT I HAVE EXAMINED THE COI E AND BELIEF IT IS TRUE AND COMPLE	NTENTS OF THIS REPORT AND TO THE BEST OF TE.
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermedian Transfer Information Polated to Original Source	#2 (if any)	
Intermediary Transfer Information Related to Original Source	#2 (II ally)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No	
Intermediary Transfer Information Related to Original Source	#2 (if anv)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	」 o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Any person, association of persons or entity, other than a registered candidate committee or political action committee, regardless of legal form, that makes an expenditure for the purpose of influencing the result of a local City of Phoenix election totaling \$10,000 or more within 16 days prior to an election must file this form with the City Clerk within 48 hours of making the expenditure (excluding Saturdays/Sundays/legal holidays). This form can be submitted by email, fax or in person to the contact information listed at the bottom of this page. (If an expenditure does not meet this criteria but is still required to be reported pursuant to PCC Ch. 12, Article VII, Division 3, it must be reported on a regular 'Election Funding Disclosure' form instead). Both the 'Campaign Finance Reporting Schedule' (for a list of due dates) and the 'Election Cycle' (for current election cycle dates) can be found online at <a href="https://www.phoenix.gov/elections">www.phoenix.gov/elections</a>.

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Quinonez Eli			
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:309.17	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)	1	
Original Source #1 Informatio	n	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Filer Name: \_\_\_\_

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
	110 (15 )
Intermediary Transfer Information Related to Original Source	#2 (If any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
	#2 (II dily)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	│ o make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Person	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Recinos Indris	3	
Address (Vendor/Payee):1021 S 7th St Ave., Phoenix, AZ 85007 Expenditure Amount:334.17		Expenditure Amount:334.17
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing	1	Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	
Original Source #1 Informatio	n ☑ Additional original so	urces on additional pages attached
Name: AFSCME		***
Address: 1625 L Street NW Washington,	DC 20036	
Employer: <sub>N/A</sub>		
Amount: \$25000.00 Date Received: 02/13/2023		
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount: Date of Transfer:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
1. T. S. J. S. L. S. L. S. Delete de Original Service	#2 (if a.m.)	
Intermediary Transfer Information Related to Original Source	#2 (II ally)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	│ o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ons, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	AZ 85007	
Expenditure Information		
Name (Vendor/Payee):Reed Michae	I	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:326.67
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	ssing Expenses (Estimates)	
Original Source #1 Information	Additional original so	urces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington	, DC 20036	
Employer: N/A		
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
☐ Additional intermediary sources on	ation Related to Original Source page 2	ce #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	d by intermediary as required to be able	to make the expenditure.   Yes   No
	JURY, THAT I HAVE EXAMINED THE CO E AND BELIEF IT IS TRUE AND COMPLE	NTENTS OF THIS REPORT AND TO THE BEST OF ETE.
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
	110 (15 )	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
	#2 (II dily)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	D make the expenditure. ☐ Yes ☐ No	
Intermediary Transfer Information Related to Original Source	#2 (IT any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Renner Mike			
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:218.75	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)		
Original Source #1 Information	n ☑ Additional original source	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: <sub>N/A</sub>			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			
Filer Name:	Signature:	Date:	

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
I to Tour for Information Polated to Original Course	#2 (if and
Intermediary Transfer Information Related to Original Source	#2 (IT any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	#2 (II ally)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	.#2 (if any)
Name:	#2 (II ally)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Reyes Cynthia	a '		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:220	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)		
Original Source #1 Informatio	n	rces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington, DC 20036			
Employer: <sub>N/A</sub>			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			
Filer Name:	Signature:	Date:	

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
	## ## \	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
A William Bullion record was provided by missimissiary as required to 25 and 15		
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Persons, or Entity Reporting			
Name: Worker Power ☑ New Report OR ☐ Amendme		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Rouse Timoth	ıy		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:218.53	
Name of Candidate/Ballot Measure:	Office Sought (Candidate Only):	☑ Support or ☐ Oppose	
Carlos Garcia	City Council		
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvas	sing Expenses (Estimates)		
Original Source #1 Informatio	n ☑ Additional original source	ces on additional pages attached	
Name: AFSCME	· · · · · · · · · · · · · · · · · · ·		
Address: 1625 L Street NW Washington,	DC 20026		
	DC 20036		
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No		make the expenditure. □ Yes □ No	
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Filer Name:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
	#2 /if any)	
Intermediary Transfer Information Related to Original Source	#2 (II ally)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	()	
Address:		
Employer:		
	Date of Transfer:	
Amount:		
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	□ make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ons, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	AZ 85007	
Expenditure Information		
Name (Vendor/Payee):Shea Parker		-
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:359.17
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium: Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canva	ssing Expenses (Estimates)	
Original Source #1 Information	on	urces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington	n, DC 20036	
Employer: N/A		
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Inform  ☐ Additional intermediary sources or	nation Related to Original Source n page 2	ce #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provide	d by intermediary as required to be able	to make the expenditure.   Yes  No
	RJURY, THAT I HAVE EXAMINED THE CO SE AND BELIEF IT IS TRUE AND COMPLE	NTENTS OF THIS REPORT AND TO THE BEST OF ETE.
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
	#2 /:E a.m. \
Intermediary Transfer Information Related to Original Source	#2 (IT any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	( dy)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
71 William Burnier (Good Was provided by Michigan) as required	
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Any person, association of persons or entity, other than a registered candidate committee or political action committee, regardless of legal form, that makes an expenditure for the purpose of influencing the result of a local City of Phoenix election totaling \$10,000 or more within 16 days prior to an election must file this form with the City Clerk within 48 hours of making the expenditure (excluding Saturdays/Sundays/legal holidays). This form can be submitted by email, fax or in person to the contact information listed at the bottom of this page. (If an expenditure does not meet this criteria but is still required to be reported pursuant to PCC Ch. 12, Article VII, Division 3, it must be reported on a regular 'Election Funding Disclosure' form instead). Both the 'Campaign Finance Reporting Schedule' (for a list of due dates) and the 'Election Cycle' (for current election cycle dates) can be found online at <a href="https://www.phoenix.gov/elections">www.phoenix.gov/elections</a>.

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Shelton Quan	anis		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount: 256.23	
Name of Candidate/Ballot Measure:	Office Sought (Candidate Only):	☑ Support or ☐ Oppose	
Carlos Garcia	City Council	= capport of = cappoor	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)		
Original Source #1 Information	n	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington, DC 20036			
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one	(1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount: Date of Transfer:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Filer Name:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. ☐ Yes ☐ No	
	110 Ale	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	#2 (ii diiy)	
Address:		
Employer:		
	Date of Transfer:	
Amount:		
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. U Yes U No	
Intermediary Transfer Information Related to Original Source	• #2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	□ make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Any person, association of persons or entity, other than a registered candidate committee or political action committee, regardless of legal form, that makes an expenditure for the purpose of influencing the result of a local City of Phoenix election totaling \$10,000 or more within 16 days prior to an election must file this form with the City Clerk within 48 hours of making the expenditure (excluding Saturdays/Sundays/legal holidays). This form can be submitted by email, fax or in person to the contact information listed at the bottom of this page. (If an expenditure does not meet this criteria but is still required to be reported pursuant to PCC Ch. 12, Article VII, Division 3, it must be reported on a regular 'Election Funding Disclosure' form instead). Both the 'Campaign Finance Reporting Schedule' (for a list of due dates) and the 'Election Cycle' (for current election cycle dates) can be found online at <a href="https://www.phoenix.gov/elections">www.phoenix.gov/elections</a>.

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Smith Brea	<del></del>		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:331.67	
Name of Candidate/Ballot Measure:	Office Sought (Candidate Only):	☑ Support or ☐ Oppose	
Carlos Garcia	City Council		
Communication Medium:Canvassing	<u> </u>	Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)	<u> </u>	
Original Source #1 Information	n ☑ Additional original source	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington, DC 20036			
Employer: N/A			
Amount: \$25000.00		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one	(1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source #1 (if any)  Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	r as required, to obtain the information.	
	110 CC	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. ☐ Yes ☐ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. ☐ Yes ☐ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Any person, association of persons or entity, other than a registered candidate committee or political action committee, regardless of legal form, that makes an expenditure for the purpose of influencing the result of a local City of Phoenix election **totaling \$10,000** or more within **16 days prior to an election** must file this form with the City Clerk within 48 hours of making the expenditure (excluding Saturdays/Sundays/legal holidays). This form can be submitted by email, fax or in person to the contact information listed at the bottom of this page. (If an expenditure does not meet this criteria but is still required to be reported pursuant to PCC Ch. 12, Article VII, Division 3, it must be reported on a regular 'Election Funding Disclosure' form instead). Both the 'Campaign Finance Reporting Schedule' (for a list of due dates) and the 'Election Cycle' (for current election cycle dates) can be found online at <a href="https://www.phoenix.gov/elections">www.phoenix.gov/elections</a>.

Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Swanegan A	nthony	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:249.27
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvas	sing Expenses (Estimates)	
Original Source #1 Information	on ☑ Additional original so	urces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington	, DC 20036	
Employer: N/A		
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: 02/13/2023
☐ Unknown – Noting that at least one	e (1) written request was sent to contrib	utor as required, to obtain the information.
Intermediary Transfer Inform  ☐ Additional intermediary sources on	ation Related to Original Source page 2	ce #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		to make the expenditure.   Yes   No
I CERTIFY, UNDER PENALTY OF PERMY KNOWLEDG	JURY, THAT I HAVE EXAMINED THE CO E AND BELIEF IT IS TRUE AND COMPLE	NTENTS OF THIS REPORT AND TO THE BEST OF ETE.

Filer Name:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contribute	r as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
	40 ff
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	, , , ,
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Torres Jose		
Address (Vendor/Payee):1021 S 7th St Ave., Phoenix, AZ 85007 Expenditure Amount:330.42		
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/18/2023
Description of Purchase:Field Canvass	sing Expenses (Estimates)	
Original Source #1 Information   Additional original sources on additional pages attached		
Name: AFSCME		
Address: 1625 L Street NW Washington, DC 20036		
Employer: <sub>N/A</sub>	, , , , , , , , , , , , , , , , , , , ,	
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)  Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (it any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
	#0 #5 a mad
Intermediary Transfer Information Related to Original Source	#2 (IT any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	. #2 (if any)
Name:	,,,_ (ii diiy)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure
A written transfer record was provided by intermediary as required to be able to	Thake the expenditure. 🗀 100 🗀 100
Intermediary Transfer Information Related to Original Source	e #2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	□ o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Valencia Ram	irez Herminia		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:330	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)		
Original Source #1 Information	n  ☑ Additional original sou	rces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any) ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
	wa wa
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
	<i>"- "-</i> "
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. ☐ Yes ☐ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Vantobruk Sig	rid		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:30	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)		
Original Source #1 Informatio	n	ces on additional pages attached	
Name: AFSCME		····	
Address: 1625 L Street NW Washington, DC 20036			
Employer: N/A			
Amount: \$25000.00		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)   Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Date: \_\_

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
	"~ \" \" \" \"	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
1 4	#2 /is and	
Intermediary Transfer Information Related to Original Source	#Z (II ally)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Wallace Annja	net		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:250	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)		
Original Source #1 Information	n	ces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: <sub>N/A</sub>			
Amount: \$25000.00		Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:	7.2	Date of Transfer:	
A written transfer record was provided	by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			
Filer Name:	Signature:	Date:	

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	#E (II dily)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	#2 (II dily)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Washington G	arry		
Address (Vendor/Payee):1021 S 7th S	St Ave., Phoenix, AZ 85007	Expenditure Amount: 249.63	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/18/2023	
Description of Purchase:Field Canvass	sing Expenses (Estimates)		
Original Source #1 Information	n	ces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: <sub>N/A</sub>			
Amount: \$25000.00		Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			
Filer Name:	Signature:	Date:	

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
I to a literatura Tanan familia familia Delete de Original Course	#9 /:E am. \
Intermediary Transfer Information Related to Original Source	#2 (II any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if anv)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
	## /**
Intermediary Transfer Information Related to Original Source	#2 (If any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Scale to Win			
Address (Vendor/Payee):13742 Harp	er St Santa Ana CA 92703	Expenditure Amount:52.14	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Texting Progr	am	Date of Expenditure:3/14/2023	
Description of Purchase:Texting Progr	am Expenses		
Original Source #1 Information	n	ces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: <sub>N/A</sub>			
Amount: \$25000.00 Date I		Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Informa  ☐ Additional intermediary sources on	ation Related to Original Source	#1 (if any)	
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No			
	IURY, THAT I HAVE EXAMINED THE CONT E AND BELIEF IT IS TRUE AND COMPLET	TENTS OF THIS REPORT AND TO THE BEST OF E.	
Filer Name:	Signature:	Date:	

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	( 4)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. ☐ Yes ☐ No
A miller dansor record mas provided by intermedially as required to be able to	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):UNITE HERE	Local 11		
Address (Vendor/Payee):777 S Figue	eroa St, Ste 4050, Los Angeles, CA	Expenditure Amount:281.15	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Calling Progra		Date of Expenditure:3/13/2023	
Description of Purchase:Calling Progra	am Expenses		
Original Source #1 Information	n	ces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington, DC 20036			
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
	by intermediary as required to be able to		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	-
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
The state of the s	40 /if am A
Intermediary Transfer Information Related to Original Source	#2 (If any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	#Z (II dily)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	nz (n uny)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Person	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Miguel Aragor	1	
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:30.62
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/14/2023
Description of Purchase:Field Canvas	sing Expenses	
Original Source #1 Informatio	n	rces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00		Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Additional intermediary sources on	ation Related to Original Sourc	e #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	I by intermediary as required to be able	to make the expenditure. □ Yes □ No
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediant Transfer Information Polated to Original Source	#2 (if any)
Intermediary Transfer Information Related to Original Source  Name:	#Z (II dily)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	□ Discription
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Andres Carillo			
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:41	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/13/2023	
Description of Purchase:Field Canvass	sing Expenses		
Original Source #1 Informatio	n	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington, DC 20036			
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:	<u> </u>		
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided	by intermediary as required to be able to	make the expenditure. □ Yes □ No	
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Filer Name:

Date: \_

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
	No. 455
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
Literature Transfer Information Deleted to Original Source	#2 (if any)
Intermediary Transfer Information Related to Original Source Name:	#Z (II ally)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	e #2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able t	o make the expenditure. □ Yes □ No
A William Burnstor rooted was provided by intermedially development to be able to	
Intermediary Transfer Information Related to Original Source	e #2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Persons, or Entity Reporting			
Name: Worker Power ☑ New Report OR ☐ Amendment		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Ana Diaz			
Address (Vendor/Payee):1021 S 7th S	St Ave., Phoenix, AZ 85007	Expenditure Amount:41.04	
Name of Candidate/Ballot Measure:	Office Sought (Candidate Only):	☑ Support or ☐ Oppose	
Carlos Garcia	City Council		
Communication Medium:Canvassing		Date of Expenditure:3/8/2023	
Description of Purchase:Field Canvass	sing Expenses		
Original Source #1 Information	n	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington, DC 20036			
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Filer Name:

Date: \_\_

Original Source #2 Information (if any)	····	
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
	## /**	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	,,_ (,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure ☐ Yes ☐ No	
A willien transfer record was provided by intermediary as required to be able to	make the experience: _ vee _ vee	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. ☐ Yes ☐ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

Person, Association of Person	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Ana Diaz		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:36.01
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing	<u> </u>	Date of Expenditure:3/11/2023
Description of Purchase:Field Canvass	sing Expenses	
Original Source #1 Information	n	rces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: <sub>N/A</sub>		
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Informa  ☐ Additional intermediary sources on	ntion Related to Original Source	e #1 (if any)
Name:		- 1
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	by intermediary as required to be able t	o make the expenditure. □ Yes □ No
	URY, THAT I HAVE EXAMINED THE CON E AND BELIEF IT IS TRUE AND COMPLET	TENTS OF THIS REPORT AND TO THE BEST OF IE.
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
	40 (15 )	
Intermediary Transfer Information Related to Original Source	#2 (If any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
	#2 (II ally)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	」 o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. ☐ Yes ☐ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

erson, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
ddress: 1021 S 7th St Ave., Phoenix, A	Z 85007	•
xpenditure Information		
ame (Vendor/Payee):Ana Diaz		
ddress (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:41.01
ame of Candidate/Ballot Measure: arlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
ommunication Medium:Canvassing	-	Date of Expenditure:3/14/2023
escription of Purchase:Field Canvas	sing Expenses	
riginal Source #1 Informatio	n	urces on additional pages attached
ame: AFSCME		
ddress: 1625 L Street NW Washington	DC 20036	
mployer: <sub>N/A</sub>		
Amount: \$25000.00		Date Received: 02/13/2023
Unknown – Noting that at least one	e (1) written request was sent to contrib	utor as required, to obtain the information.
Additional intermediary sources on	ation Related to Original Source page 2	e #1 (if any)
ame:		
ddress:		
mployer:		
mount:		Date of Transfer:
written transfer record was provided	l by intermediary as required to be able	to make the expenditure. □ Yes □ No
CERTIFY, UNDER PENALTY OF PER	by intermediary as required to be able JURY, THAT I HAVE EXAMINED THE CO E AND BELIEF IT IS TRUE AND COMPLE	NTENTS OF THE

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
	<i>u</i> - <i>u</i>
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	<i></i> ( a)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure
A written transfer record was provided by intermedially as required to be able to	make the experience. If the I had
Intermediary Transfer Information Related to Original Source	e #2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Mark Alcala			
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:23	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/12/2023	
Description of Purchase:Field Canvass	sing Expenses		
Original Source #1 Informatio	n ☑ Additional original source	ces on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: N/A			
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any) ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Date: \_\_\_

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Luturus diam Transfer Information Balated to Original Source	#2 (if any)
Intermediary Transfer Information Related to Original Source	#2 (II ally)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if anv)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
7 miles and see a	
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Persons, or Entity Reporting		
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Mark Alcala		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount: 10.01
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing	<u> </u>	Date of Expenditure:3/14/2023
Description of Purchase:Field Canvas	sing Expenses	
Original Source #1 Informatio	n	ces on additional pages attached
Name: AFSCME		· · · · · · · · · · · · · · · · · · ·
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00 Date Received: 02/13/2023		Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		

Signature:

Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
L. C. T. C. L. C.	#9 (if am.)
Intermediary Transfer Information Related to Original Source	#2 (IT any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	#Z (II ally)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	n make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	#Z (II dily)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Perso	ns, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007	
Expenditure Information		
Name (Vendor/Payee):Mark Alcala		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:66.55
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/15/2023
Description of Purchase:Field Canvas	sing Expenses	
Original Source #1 Informatio	Additional original sou	urces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington,	DC 20036	
Employer: N/A		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information    Additional intermediary sources on	ation Related to Original Source page 2	e #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	d by intermediary as required to be able	to make the expenditure. □ Yes □ No
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermedian, Transfer Information Polated to Original Source	#2 (if any)	
Intermediary Transfer Information Related to Original Source  Name:	#2 (II dily)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	<i>"- (",y)</i>	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. 🗆 res 🗀 No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	」 o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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erson Association of Dorsons, or Entity Panorting

reison, Association of reison	is, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, Az	2 85007	
Expenditure Information		
Name (Vendor/Payee):Brea Smith		
Address (Vendor/Payee):1021 S 7th S	St Ave., Phoenix, AZ 85007	Expenditure Amount:26.98
Name of Candidate/Ballot Measure:	Office Sought (Candidate Only):	☑ Support or ☐ Oppose
Carlos Garcia	City Council	
Communication Medium:Canvassing		Date of Expenditure:3/12/2023
Description of Purchase:Field Canvass	sing Expenses	
Original Source #1 Information	∩ ☑ Additional original sour	rces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington, DC 20036		
Employer: N/A		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)   Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount:	34	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure.   Yes  No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: <sub>N/A</sub>		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:	" a (ii aiiy)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	. #2 (if any)	
Name:	(ii aiiy)	
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



Phoenix City Code (PCC), Chapter 12, Article VII, Division 3

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Person, Association of Perso	ons, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, A	AZ 85007	
Expenditure Information		
Name (Vendor/Payee):Brea Smith		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:40.02
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose
Communication Medium:Canvassing		Date of Expenditure:3/14/2023
Description of Purchase:Field Canvas	ssing Expenses	<b>L</b>
Original Source #1 Information	on	urces on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington	, DC 20036	
Employer: N/A		
Amount: \$25000.00		Date Received: 02/13/2023
☐ Unknown – Noting that at least one	e (1) written request was sent to contrib	outor as required, to obtain the information.
Intermediary Transfer Inform  Additional intermediary sources on	ation Related to Original Source	ce #1 (if any)
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided	d by intermediary as required to be able	e to make the expenditure.   Yes  No
	JURY, THAT I HAVE EXAMINED THE CO E AND BELIEF IT IS TRUE AND COMPL	NTENTS OF THIS REPORT AND TO THE BEST OF ETE.
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: N/A	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	( cy)
Address:	
Employer:	
	Date of Transfer:
Amount:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. 🗆 Yes 🗀 No
Intermediary Transfer Information Related to Original Source	+#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No



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Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Jose Torres	- "		
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:17.83	
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	☑ Support or ☐ Oppose	
Communication Medium:Canvassing		Date of Expenditure:3/15/2023	
Description of Purchase:Field Canvas	sing Expenses		
Original Source #1 Informatio	n  ☑ Additional original source	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington,	DC 20036		
Employer: N/A			
Amount: \$25000.00		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided	by intermediary as required to be able to	make the expenditure.   Yes   No	
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			
Filer Name:	Signature:	Date:	

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	#2 (II dily)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No
Intermediary Transfer Information Related to Original Source	.#2 (if any)
Name:	#Z (II dily)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No



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Person Association of Persons or Entity Penarting

reisoli, Association of reisol	is, or Entity Reporting	
Name: Worker Power		☑ New Report OR ☐ Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007		
Expenditure Information		
Name (Vendor/Payee):Jose Torres		
Address (Vendor/Payee):1021 S 7th S	St Ave., Phoenix, AZ 85007	Expenditure Amount:111.33
Name of Candidate/Ballot Measure:	Office Sought (Candidate Only):	☑ Support or ☐ Oppose
Carlos Garcia	City Council	□ Support of □ Oppose
	City Council	D ( ( 5 ))
Communication Medium:Canvassing		Date of Expenditure:3/12/2023
Description of Purchase:Field Canvass	sing Expenses	
Original Source #1 Information	n	es on additional pages attached
Name: AFSCME		
Address: 1625 L Street NW Washington, DC 20036		
Employer: <sub>N/A</sub>		
Amount: \$25000.00		Date Received: <sub>02/13/2023</sub>
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.		
Intermediary Transfer Information Related to Original Source #1 (if any)		
□ Additional intermediary sources on page 2		
Name:		
Address:		
Employer:		
Amount:		Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No		
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.		
Filer Name:	Signature:	Date:

Original Source #2 Information (if any)		
Name: UFCW Western States Council		
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620		
Employer: N/A		
Amount: \$50000.00	Date Received: 02/13/2023	
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.	
	10 (15 )	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes   No	
Intermediary Transfer Information Related to Original Source	#2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	
Intermediary Transfer Information Related to Original Source	e #2 (if any)	
Name:		
Address:		
Employer:		
Amount:	Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No	



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Person, Association of Persons, or Entity Reporting			
Name: Worker Power		☑ New Report OR ☐ Amendment	
Address: 1021 S 7th St Ave., Phoenix, A	Z 85007		
Expenditure Information			
Name (Vendor/Payee):Michael Reed			
Address (Vendor/Payee):1021 S 7th	St Ave., Phoenix, AZ 85007	Expenditure Amount:246.93	
Name of Candidate/Ballot Measure:	Office Sought (Candidate Only):	☑ Support or ☐ Oppose	
Carlos Garcia	City Council		
Communication Medium:Canvassing		Date of Expenditure:3/11/2023	
Description of Purchase:Field Canvass	sing Expenses		
Original Source #1 Information	n	es on additional pages attached	
Name: AFSCME			
Address: 1625 L Street NW Washington, DC 20036			
Employer: <sub>N/A</sub>			
Amount: \$25000.00		Date Received: <sub>02/13/2023</sub>	
☐ Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.			
Intermediary Transfer Information Related to Original Source #1 (if any)  ☐ Additional intermediary sources on page 2			
Name:			
Address:			
Employer:			
Amount:		Date of Transfer:	
A written transfer record was provided by intermediary as required to be able to make the expenditure. ☐ Yes ☐ No			
I CERTIFY, UNDER PENALTY OF PERJURY, THAT I HAVE EXAMINED THE CONTENTS OF THIS REPORT AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS TRUE AND COMPLETE.			

Signature:

Date:

Original Source #2 Information (if any)	
Name: UFCW Western States Council	
Address: 8530 Stanton Ave Suite 2A, Buena Park, CA 90620	
Employer: <sub>N/A</sub>	
Amount: \$50000.00	Date Received: 02/13/2023
☐ Unknown – Noting that at least one (1) written request was sent to contribute	or as required, to obtain the information.
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure.   Yes  No
	<b>"- "</b>
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	make the expenditure. ☐ Yes ☐ No
Intermediary Transfer Information Related to Original Source	#2 (if any)
Name:	<i>""</i> (" d.1.y)
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to	o make the expenditure. □ Yes □ No
Intermediary Transfer Information Related to Original Source	e #2 (if any)
Name:	
Address:	
Employer:	
Amount:	Date of Transfer:

A written transfer record was provided by intermediary as required to be able to make the expenditure.  $\square$  Yes  $\square$  No