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CITY CLERK DEPT
ELECTIONS DIVISION

23 MAR 15 AM 10:07

City of Phoenix
CITY CLERK DEPARTMENT**48 HOUR Election Funding Disclosure Report (Dark Money)**

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 www.phoenix.gov/elections.

Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): UNITE HERE Local 11	
Address (Vendor/Payee): 777 S Figueroa St, Ste 4050, Los Angeles, CA 90017	Expenditure Amount: 3290.83
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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: Brendan Walsh

Signature:

Date: 3/14/23

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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Isabel Rose	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 109.14
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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)

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Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. <input type="checkbox"/> Yes <input type="checkbox"/> No	

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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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

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Employer:	
Amount:	Date of Transfer:
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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Mike Martinez	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 272.85
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.	

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Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. <input type="checkbox"/> Yes <input type="checkbox"/> No	

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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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee):Marilyn Wilbur		
Address (Vendor/Payee):1021 S 7th St Ave., Phoenix, AZ 85007		Expenditure Amount:237.54
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose
Communication Medium:Canvassing		Date of Expenditure:3/13/2023
Description of Purchase:Field Canvassing Expenses (Estimates)		

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #1 (if any)

Additional intermediary sources on page 2

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

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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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	

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Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. <input type="checkbox"/> Yes <input type="checkbox"/> No	

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Name:	
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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Maggie Acosta	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 353.1
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
	<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	

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Address:	
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Amount:	Date of Transfer:
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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee):Kort Turner	
Address (Vendor/Payee):1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount:48.15
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium:Canvassing	Date of Expenditure:3/13/2023
Description of Purchase:Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
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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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

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Amount:	Date of Transfer:
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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Arnette Nehemiah	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 177.47
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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:
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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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
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Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

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48 HOUR Election Funding Disclosure Report (Dark Money)

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 www.phoenix.gov/elections.

Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee):Carrillo Andres	
Address (Vendor/Payee):1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount:400.42
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium:Canvassing	Date of Expenditure:3/13/2023
Description of Purchase:Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Cooper Kuantayria	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 360.83
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Dickson Joseph	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 277.7
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee):Dunlap Aleasha	
Address (Vendor/Payee):1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount:276.97
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
Communication Medium:Canvassing	Date of Expenditure:3/13/2023
Description of Purchase:Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> 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:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> 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: 1378.3
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose
Communication Medium: Canvassing		Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)		

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> 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:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Everett Mandy		
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007		Expenditure Amount: 92.5
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose
Communication Medium: Canvassing		Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)		

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Gonzalez Victor	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 263.43
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Hernandez Ana	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 400
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
Communication Medium: Canvassing	<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose
Date of Expenditure: 3/13/2023	
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Herrera Luis	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 171.23
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
Communication Medium: Canvassing	<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose
Date of Expenditure: 3/13/2023	
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Jarquin Edith	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 323.33
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Landa Hernandez Yolanda	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 191.37
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Lechuga Rosario	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 229.03
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Lopez Deborah	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 279.9
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Martinez Vicente	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 176
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee):McMurry Ryan	
Address (Vendor/Payee):1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount:317.93
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium:Canvassing	Date of Expenditure:3/13/2023
Description of Purchase:Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Melendez Cristina	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 322.92
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Merriman Jacqueline	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 251.37
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Ortiz Lorena		
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007		Expenditure Amount: 173.43
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose
Communication Medium: Canvassing		Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)		

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Pacheco Morales Irma	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 240.77
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
	<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Palmer Eldrin	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 178.2
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Quinonez Eli	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 202.92
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Recinos Indris	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 324.58
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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 www.phoenix.gov/elections.

Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Reed Michael	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 322.92
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Reyes Cynthia	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 176
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Rouse Timothy	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 182.97
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee):Shea Parker	
Address (Vendor/Payee):1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount:277.08
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium:Canvassing	Date of Expenditure:3/13/2023
Description of Purchase:Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Shelton Quananis	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 281
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Smith Brea	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 345.83
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee):Swanegan Anthony	
Address (Vendor/Payee):1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount:280.63
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium:Canvassing	Date of Expenditure:3/13/2023
Description of Purchase:Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> 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:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Torres Jose	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 202.92
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee):Valencia Ramirez Herminia	
Address (Vendor/Payee):1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount:400
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium:Canvassing	Date of Expenditure:3/13/2023
Description of Purchase:Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Vantobruk Sigrid	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 1378.3
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Wallace Annjanet	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 248.07
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Washington Garry	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 275.5
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> 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:	Date of Transfer:
A written transfer record was provided by intermediary as required to be able to make the expenditure. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee):Scale to Win	
Address (Vendor/Payee):13742 Harper St Santa Ana CA 92703	Expenditure Amount:57.2
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium:Texting Program	Date of Expenditure:3/13/2023
Description of Purchase:Texting Program Expenses (Estimates)	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Andres Carillo Jr	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 40
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Worker Power PAC	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 570.15
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</i>	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

Intermediary Transfer Information Related to Original Source #2 (if any)

Name:	
Address:	
Employer:	
Amount:	Date of Transfer:
<i>A written transfer record was provided by intermediary as required to be able to make the expenditure.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee):Booking.com		
Address (Vendor/Payee):101 Mission St, San Francisco, CA 94105		Expenditure Amount:548.02
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council	<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose
Communication Medium:Canvassing		Date of Expenditure:3/13/2023
Description of Purchase:Field Canvassing Expenses		

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

48 HOUR Election Funding Disclosure Report (Dark Money)

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Facebook	
Address (Vendor/Payee): 1 Hacker Way, Menlo Park, CA 94025	Expenditure Amount: 500
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council <input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose
Communication Medium: Advertising	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Amazon	
Address (Vendor/Payee): 410 Terry Ave N, Seattle, WA 98109	Expenditure Amount: 199.73
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	



City of Phoenix
CITY CLERK DEPARTMENT

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Person, Association of Persons, or Entity Reporting

Name: Worker Power	<input checked="" type="checkbox"/> New Report OR <input type="checkbox"/> Amendment
Address: 1021 S 7th St Ave., Phoenix, AZ 85007	

Expenditure Information

Name (Vendor/Payee): Jose Torres	
Address (Vendor/Payee): 1021 S 7th St Ave., Phoenix, AZ 85007	Expenditure Amount: 110
Name of Candidate/Ballot Measure: Carlos Garcia	Office Sought (Candidate Only): City Council
<input checked="" type="checkbox"/> Support or <input type="checkbox"/> Oppose	
Communication Medium: Canvassing	Date of Expenditure: 3/13/2023
Description of Purchase: Field Canvassing Expenses	

Original Source #1 Information

Additional original sources 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
<input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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
<input type="checkbox"/> <i>Unknown – Noting that at least one (1) written request was sent to contributor as required, to obtain the information.</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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> 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. <input type="checkbox"/> Yes <input type="checkbox"/> No	