

POLITICAL COMMITTEE
CITY OF Glendale
CAMPAIGN FINANCE REPORT
2015 November Special Election

FOR OFFICE USE ONLY
CITY CLERK
CITY OF GLENDALE
2015 NOV 24 PM 4:44

1. Weiers for Mayor
Full Name of Committee

5025 N. 81st Dr.
Address

Glendale, AZ 85303 Maricopa
City ZIP Code County Phone

2. Jerry Weiers
Sponsoring Organization or Candidate and office

Jerry Weiers - Mayor
Name of Candidate and Office Sought (if applicable)

E-Mail Address Fax #

602-677-0755

3A. ID#

12-01

4. REPORTING PERIOD (Please check appropriate box)

DUE BETWEEN

- January 31 Report - For Period of _____* thru December 31, 2014 January 1, 2015 and January 31, 2015
- June 30 Report - For Period of January 1, 2015 thru May 31, 2015 June 1, 2015 and June 30, 2015
- Pre-Election Report - For Period of June 1, 2015 thru October 22, 2015 October 23, 2015 and October 30, 2015
- Post-Election Report - For Period of October 23, 2015 thru November 23, 2015 November 24, 2015 and December 3, 2015
- January 31, Report - For Period of November 24, 2015 thru December 31, ____** January 1, ____** and January 31, ____**

5. SUMMARY	Column A Total This Reporting Period	Column B Election Period Total To Date
5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee)		19,079.42
5b Cash on Hand at the Beginning of this Reporting Period	81,173.33	
5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8)	12,101.00	80,086.00
5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B]	93,274.33	99,165.42
6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines]		-
6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18)	4,155.03	10,046.12
7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d]	89,119.30	89,119.30

*Insert date which is 21 days after date of last election (A.R.S. §16-913).

**This will depend on the year next election is held. The "due between" year will be the year of an election and the date following "December 31" will be the immediately prior year.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

1. Committee Name: Weiers for Mayor
 3. Report covering period from 10-23-15 Thru 11-23-15

2. ID#

RECEIPTS	COLUMN A THIS PERIOD	COLUMN B CAMPAIGN TO DATE
4. Contributions other than loans and in-kind:		
(a) Individuals - more than \$50 (Total from Schedule A)		
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)		
(c) Political Committees (Total from Schedule B)		
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]		
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]		
5. (a) Loans made or guaranteed by candidate (Total from Schedule C)		
(b) All other loans (Total from Schedule C-1)		
(c) Total Loans [add 5(a) and 5(b)]		
6. In-kind contributions (Total from Schedule E)	1,000.00	
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
8. Total Receipts [add 4(f), 5(c), 6, and 7]		
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)		
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of In-kind expenditures (Total from Schedule E)	1,000.00	
12. Loans made by reporting committee (Total from Schedule D-2)		
13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)		
(b) Repayment of all other loans (Total from Schedule D-5)		
(c) Total Loan Repayments [add 13(a) and 13(b)]		
14. Transfers to other political committees (Total from Schedule D-6)		
15. Any other disbursement (Total from Schedule D-7)		
16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]		
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]		
19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)	/	

20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.

Jerry Weiers
 Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

Date

11/24/2015

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#

12-01

1. Committee Name Weiers for Mayor

3. Report covering period from 10-23-15 thru 11-23-15

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE																								
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5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A]																											

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CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
12-01

1. Committee Name Weiers for Mayor

3. Report covering period from 10-23-15 thru 11-23-15

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
4a.	NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR			
	LAST FIRST MI <u>McCarthy Diane</u> STREET ADDRESS <u>5835 W. Belmont Ave.</u> CITY STATE ZIP <u>Glendale AZ 85301</u> OCCUPATION EMPLOYER <u>Director West-mec</u>	11-13-15	200.00	200.00
	LAST FIRST MI <u>Paceley Barry</u> STREET ADDRESS <u>5201 E. Osborn Rd.</u> CITY STATE ZIP <u>Phoenix AZ 85018</u> OCCUPATION EMPLOYER <u>Builder Paceley Constr. Inc.</u>	11-13-15	250.00	250.00
	LAST FIRST MI <u>Le Mai Thanh Van</u> STREET ADDRESS <u>14433 S. 18th St.</u> CITY STATE ZIP <u>Phoenix AZ 85048</u> OCCUPATION EMPLOYER <u>Media TNT AZ Radio</u>	11-23-15	200.00	200.00
	LAST FIRST MI <u>Dang Kevin</u> STREET ADDRESS <u>23417 N. 64th Ave</u> CITY STATE ZIP <u>Glendale AZ 85310</u> OCCUPATION EMPLOYER <u>Pharmacist Banner</u>	11-23-15	60.00	60.00
	LAST FIRST MI <u>Vu Dang T</u> STREET ADDRESS <u>1419 E. Hatcher Rd.</u> CITY STATE ZIP <u>Phoenix AZ 85020</u> OCCUPATION EMPLOYER	11-23-15	60.00	60.00
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CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

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c.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Ha</td> <td>Kieu</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">7220 N. 27th Ave #107</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Phoenix</td> <td>AZ</td> <td>85051</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Ha	Kieu		STREET ADDRESS			7220 N. 27 th Ave #107			CITY	STATE	ZIP	Phoenix	AZ	85051	OCCUPATION	EMPLOYER		Retired			11-23-15	100.00	100.00
LAST	FIRST	MI																										
Ha	Kieu																											
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d.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Bui</td> <td>Carlson</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">7522 N. 31st Ave</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Phoenix</td> <td>AZ</td> <td>85051</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Mgr.</td> <td colspan="2"></td> </tr> </table>	LAST	FIRST	MI	Bui	Carlson		STREET ADDRESS			7522 N. 31 st Ave			CITY	STATE	ZIP	Phoenix	AZ	85051	OCCUPATION	EMPLOYER		Mgr.			11-23-15	471.00	471.00
LAST	FIRST	MI																										
Bui	Carlson																											
STREET ADDRESS																												
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e.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Kim</td> <td>Thomas</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">13651 N. 35th Ave</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Phoenix</td> <td>AZ</td> <td>85029</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Dentist</td> <td colspan="2">Sonoran Sky Dental</td> </tr> </table>	LAST	FIRST	MI	Kim	Thomas		STREET ADDRESS			13651 N. 35 th Ave			CITY	STATE	ZIP	Phoenix	AZ	85029	OCCUPATION	EMPLOYER		Dentist	Sonoran Sky Dental		11-23-15	100.00	100.00
LAST	FIRST	MI																										
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OCCUPATION	EMPLOYER																											
Dentist	Sonoran Sky Dental																											
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A (If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A)																											

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#
12-01

1. Committee Name Weiers for Mayor

3. Report covering period from 10-23-15 thru 11-23-15

4	CONTRIBUTIONS	DATE RECEIVED	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR				
4a.	<p>LAST FIRST MI <u>Dean Mick</u></p> <p>STREET ADDRESS <u>2110 N. Saint Andrews Dr.</u></p> <p>CITY STATE ZIP <u>Casa Grande AZ 85122</u></p> <p>OCCUPATION EMPLOYER <u>Retired</u></p>	11-23-15	100.00	100.00
b.	<p>LAST FIRST MI <u>Tsu James C</u></p> <p>STREET ADDRESS <u>5127 W. Glendale Ave.</u></p> <p>CITY STATE ZIP <u>Glendale AZ 85301</u></p> <p>OCCUPATION EMPLOYER <u>Mgr. GS Supermarket</u></p>	11-23-15	200.00	200.00
c.	<p>LAST FIRST MI</p> <p>STREET ADDRESS</p> <p>CITY STATE ZIP</p> <p>OCCUPATION EMPLOYER</p>			
d.	<p>LAST FIRST MI</p> <p>STREET ADDRESS</p> <p>CITY STATE ZIP</p> <p>OCCUPATION EMPLOYER</p>			
e.	<p>LAST FIRST MI</p> <p>STREET ADDRESS</p> <p>CITY STATE ZIP</p> <p>OCCUPATION EMPLOYER</p>			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A (If last page of Schedule A, transfer total to Detailed Summary Page Line 4(z), Column A)		690.00	690.00

*If contributions of \$50 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1.

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

2. ID#
12-01

1. Committee Name Weiers for Mayor

3. Report covering period from 10-23-15 thru 11-23-15

4		CONTRIBUTIONS	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TOTAL THIS CAMPAIGN TO DATE
		IDENTITY OF CONTRIBUTOR AND DATE RECEIVED		
4a	ID # C00219642	NAME, ADDRESS, CITY, STATE AND ZIP Enterprise Holdings, Inc. PAC 600 Corporate Park Dr St. Louis, MO 63105	500.00	500.00
	DATE RECEIVED 11-13-15			
b.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP Salt River Project Political Involvement Committee PO Box 52025 Phoenix, AZ 85072-2025	800.00	800.00
	DATE RECEIVED 11-23-15			
c.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP Vietnam Veteran Volunteer Team 2228 W. 90th Lane Phoenix, AZ 85037	100.00	100.00
	DATE RECEIVED 11-23-15			
d.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP Gila River Indian Community PO Box 2160 Sacaton, AZ 85147	2,500.00	2,500.00
	DATE RECEIVED 11-23-15			
e.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP Arizona Asian American Seniors Assn. 2051 W. Warner Rd. #22 Chandler, AZ 85224	300.00	300.00
	DATE RECEIVED 11-23-15			
f.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
g.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
h.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
i.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP		
	DATE RECEIVED			
5.	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B <input checked="" type="checkbox"/> last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A]		4,200.00	4,200.00

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

2. ID#
12-01

1. Committee Name Weiers for Mayor

3. Report covering period from 10-23-15 thru 11-23-15

4	IN-KIND CONTRIBUTIONS and EXPENDITURES	DATE	FAIR MARKET VALUE						
	NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN								
4a.	<table border="1"> <tr> <td data-bbox="217 548 662 667">NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>Carlson Bui</u> <u>7522 N. 31st Ave.</u> <u>Phoenix, AZ 85051</u></td> <td data-bbox="662 548 1110 667">CONTRIBUTION EXPENDITURE</td> </tr> <tr> <td colspan="2" data-bbox="217 667 1110 722">DESCRIPTION <u>Food & drink</u></td> </tr> <tr> <td data-bbox="217 722 662 779">OCCUPATION</td> <td data-bbox="662 722 1110 779">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>Carlson Bui</u> <u>7522 N. 31st Ave.</u> <u>Phoenix, AZ 85051</u>	CONTRIBUTION EXPENDITURE	DESCRIPTION <u>Food & drink</u>		OCCUPATION	EMPLOYER	11-23-15	1,000.00
NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>Carlson Bui</u> <u>7522 N. 31st Ave.</u> <u>Phoenix, AZ 85051</u>	CONTRIBUTION EXPENDITURE								
DESCRIPTION <u>Food & drink</u>									
OCCUPATION	EMPLOYER								
4b.	<table border="1"> <tr> <td data-bbox="217 779 662 898">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td data-bbox="662 779 1110 898">CONTRIBUTION EXPENDITURE</td> </tr> <tr> <td colspan="2" data-bbox="217 898 1110 953">DESCRIPTION</td> </tr> <tr> <td data-bbox="217 953 662 1010">OCCUPATION</td> <td data-bbox="662 953 1110 1010">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE								
DESCRIPTION									
OCCUPATION	EMPLOYER								
4c.	<table border="1"> <tr> <td data-bbox="217 1010 662 1129">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td data-bbox="662 1010 1110 1129">CONTRIBUTION EXPENDITURE</td> </tr> <tr> <td colspan="2" data-bbox="217 1129 1110 1184">DESCRIPTION</td> </tr> <tr> <td data-bbox="217 1184 662 1241">OCCUPATION</td> <td data-bbox="662 1184 1110 1241">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE								
DESCRIPTION									
OCCUPATION	EMPLOYER								
4d.	<table border="1"> <tr> <td data-bbox="217 1241 662 1360">NAME, ADDRESS, CITY, STATE, ZIP AND ID#</td> <td data-bbox="662 1241 1110 1360">CONTRIBUTION EXPENDITURE</td> </tr> <tr> <td colspan="2" data-bbox="217 1360 1110 1415">DESCRIPTION</td> </tr> <tr> <td data-bbox="217 1415 662 1472">OCCUPATION</td> <td data-bbox="662 1415 1110 1472">EMPLOYER</td> </tr> </table>	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE	DESCRIPTION		OCCUPATION	EMPLOYER		
NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE								
DESCRIPTION									
OCCUPATION	EMPLOYER								
5.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [if last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A]		1,000.00						
6.	ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E [if last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A]								

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

2. ID#

12-01

1. Committee Name Weiers for Mayor

3. Report covering period from 10-23-15 thru 11-23-15

4	EXPENDITURES	DATE EXPENDITURE MADE	AMOUNT OF THE EXPENDITURE
NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE			
4a.	<p>NAME, ADDRESS, CITY, STATE AND ZIP <i>Law & Reed CPAs 6955 E. Baseline Rd #107 Mesa, AZ 85209</i></p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED <i>Campaign rpt fees</i></p>	11-2-15	1,350.00
4b.	<p>NAME, ADDRESS, CITY, STATE AND ZIP <i>Goosebumps Marketing P.O. Box 47338 Phoenix, AZ 85068</i></p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED <i>Marketing commission</i></p>	11-2-15	1,787.03
4c.	<p>NAME, ADDRESS, CITY, STATE AND ZIP <i>Pirya 1144 2nd St, 1st Floor San Francisco CA 94105</i></p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED <i>Online fundraising costs</i></p>	11-23-15	18.00
4d.	<p>NAME, ADDRESS, CITY, STATE AND ZIP</p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED</p>		
4e.	<p>NAME, ADDRESS, CITY, STATE AND ZIP</p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED</p>		
4f.	<p>NAME, ADDRESS, CITY, STATE AND ZIP</p> <p>DESCRIPTION OF ITEMS OR SERVICES PURCHASED</p>		
5	ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D (If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A)		3,155.03

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