

Amended

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

FOR OFFICE USE ONLY

CITY CLERK
 CITY OF GLENDALE

2015 NOV 25 PM 2: 56

1. Jerry Weiers for Mayor - 2016

Full Name of Committee

5025 N. 81st Dr.

Address

Glendale, AZ 85303 Maricopa

City

ZIP Code

County

Phone

602-677-0755

2.

Jerry Weiers

Sponsoring Organization or Candidate and office

Jerry Weiers - Mayor

Name of Candidate and Office Sought (if applicable)

3A. ID#

12-01

E-Mail Address

Fax #

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: Jerry Weiers For Mayor 2016
 3. Report covering period from 10/23/15 Thru 11/23/15

2. ID# 12-01

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)	6901.00	72336.00
(b) Individuals - aggregate \$50 or less (Total from Schedule A-1)		
(c) Political Committees (Total from Schedule B)	4200.00	6750.00
(d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]	11,101.00	79,086.00
(e) Refund of contributions (Total from Schedule F-2)		
(f) Total Contributions Other than Loans and In-kind [subtract 4(e) from 4(d)]	11,101.00	79,086.00
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	1000.00
7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)		
8. Total Receipts [add 4(f), 5(c), 6, and 7]	12,101.00	80,086.00
DISBURSEMENTS		
9. Expenditures for operating expenses (Total from Schedule D)	3155.03	9046.12
10. Independent Expenditures (Total from Schedule D-1)		
11. Value of In-kind expenditures (Total from Schedule E)	1,000.00	1000.00
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]	4155.03	10,046.12
17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)		
18. Total disbursements [subtract line 17 from line 16]	4155.03	10,046.12
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

11/25/15

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																											
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
Jagger	Jon	E.																										
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LAST	FIRST	MI																										
Senseman	Kathryn																											
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CITY	STATE	ZIP																										
Peoria	AZ	85383																										
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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)																											

*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

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LAST	FIRST	MI																										
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CONTRIBUTIONS more than \$50 - from INDIVIDUALS*

SCHEDULE A

2. ID#

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

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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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LAST	FIRST	MI																										
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Glendale	AZ	85306																										
OCCUPATION	EMPLOYER																											
Monk	Truc Lam Temple																											
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.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Vo</td> <td>Tien</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">1419 E. Hatcher Rd</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Phoenix</td> <td>AZ</td> <td>85020</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2">none</td> </tr> </table>	LAST	FIRST	MI	Vo	Tien		STREET ADDRESS			1419 E. Hatcher Rd			CITY	STATE	ZIP	Phoenix	AZ	85020	OCCUPATION	EMPLOYER		Retired	none		11-23-15	60.00	60.00
LAST	FIRST	MI																										
Vo	Tien																											
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1419 E. Hatcher Rd																												
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Phoenix	AZ	85020																										
OCCUPATION	EMPLOYER																											
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b.	<table border="1"> <tr> <td>LAST</td> <td>FIRST</td> <td>MI</td> </tr> <tr> <td>Nguyen</td> <td>Andrew</td> <td></td> </tr> <tr> <td colspan="3">STREET ADDRESS</td> </tr> <tr> <td colspan="3">6246 W. Garden Dr</td> </tr> <tr> <td>CITY</td> <td>STATE</td> <td>ZIP</td> </tr> <tr> <td>Glendale</td> <td>AZ</td> <td>85304</td> </tr> <tr> <td>OCCUPATION</td> <td colspan="2">EMPLOYER</td> </tr> <tr> <td>Retired</td> <td colspan="2">none</td> </tr> </table>	LAST	FIRST	MI	Nguyen	Andrew		STREET ADDRESS			6246 W. Garden Dr			CITY	STATE	ZIP	Glendale	AZ	85304	OCCUPATION	EMPLOYER		Retired	none		11-23-15	100.00	100.00
LAST	FIRST	MI																										
Nguyen	Andrew																											
STREET ADDRESS																												
6246 W. Garden Dr																												
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OCCUPATION	EMPLOYER																											
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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">none</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	none		11-23-15	100.00	100.00
LAST	FIRST	MI																										
Ha	Kieu																											
STREET ADDRESS																												
7220 N. 27 th Ave #107																												
CITY	STATE	ZIP																										
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Retired	none																											
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LAST	FIRST	MI																										
Bui	Carlson																											
STREET ADDRESS																												
7522 N. 31 st Ave																												
CITY	STATE	ZIP																										
Phoenix	AZ	85051																										
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Mgr.	Self																											
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																										
Kim	Thomas																											
STREET ADDRESS																												
13651 N. 35 th Ave																												
CITY	STATE	ZIP																										
Phoenix	AZ	85029																										
OCCUPATION	EMPLOYER																											
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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																								
NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR																												
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LAST	FIRST	MI																										
Degn	Mick																											
STREET ADDRESS																												
2110 W. Saint Andrews Dr.																												
CITY	STATE	ZIP																										
Casa Grande	AZ	85122																										
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Retired	none																											
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LAST	FIRST	MI																										
Tsu	James	C																										
STREET ADDRESS																												
5127 W. Glendale Ave.																												
CITY	STATE	ZIP																										
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LAST	FIRST	MI																										
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CITY	STATE	ZIP																										
OCCUPATION	EMPLOYER																											
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)		6,901.00	6,901.00																								

*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 # <u>C00219642</u>	NAME, ADDRESS, CITY, STATE AND ZIP <u>Enterprise Holdings, Inc. PAC</u> <u>600 Corporate Park Dr</u> <u>St. Louis, MO 63105</u>	<u>500.00</u>	<u>500.00</u>
	DATE RECEIVED <u>11-13-15</u>			
b.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP <u>Salt River Project Political Involvement Committee</u> <u>PO Box 52025</u> <u>Phoenix, AZ 85072-2025</u>	<u>800.00</u>	<u>800.00</u>
	DATE RECEIVED <u>11-23-15</u>			
c.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP <u>Vietnam Veteran Volunteer Team</u> <u>2228 W. 90th Lane</u> <u>Phoenix, AZ 85037</u>	<u>100.00</u>	<u>100.00</u>
	DATE RECEIVED <u>11-23-15</u>			
d.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP <u>Gila River Indian Community</u> <u>PO Box 2160</u> <u>Sacaton, AZ 85147</u>	<u>2,500.00</u>	<u>2,500.00</u>
	DATE RECEIVED <u>11-23-15</u>			
e.	ID #	NAME, ADDRESS, CITY, STATE AND ZIP <u>Arizona Asian American Seniors Assn.</u> <u>2051 W. Warner Rd. #22</u> <u>Chandler, AZ 85224</u>	<u>300.00</u>	<u>300.00</u>
	DATE RECEIVED <u>11-23-15</u>			
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"/> If last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A)		<u>4,200.00</u>	<u>4,200.00</u>

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.	NAME, ADDRESS, CITY, STATE AND ZIP Law + Reed CPAs 6955 E. Baseline Rd #107 Mesa, AZ 85209 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Campaign rpt fees	11-2-15	1,350.00
4b.	NAME, ADDRESS, CITY, STATE AND ZIP Goosebumps Marketing P.O. box 47338 Phoenix, AZ 85068 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Marketing commission	11-2-15	1,787.03
4c.	NAME, ADDRESS, CITY, STATE AND ZIP Pivox 1144 2nd St, 1st Floor San Francisco CA 94105 DESCRIPTION OF ITEMS OR SERVICES PURCHASED Online fundraising costs	11-23-15	18.00
4d.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4e.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
4f.	NAME, ADDRESS, CITY, STATE AND ZIP DESCRIPTION OF ITEMS OR SERVICES PURCHASED		
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

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.	NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>Carlson Bui</u> <u>7522 N. 31st Ave.</u> <u>Phoenix, AZ 85051</u>	CONTRIBUTION <u>1000.00</u> EXPENDITURE <u>1000.00</u>	DATE <u>11-23-15</u> FAIR MARKET VALUE <u>1,000.00</u>
DESCRIPTION			
OCCUPATION		EMPLOYER	
4b.		CONTRIBUTION EXPENDITURE	
DESCRIPTION			
OCCUPATION		EMPLOYER	
4c.	NAME, ADDRESS, CITY, STATE, ZIP AND ID#	CONTRIBUTION EXPENDITURE	
DESCRIPTION			
OCCUPATION		EMPLOYER	
4d.	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]		<u>1,000.00</u>
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]		