FEC FORM 1	STATEMEN ORGANIZA		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
Workers First			
	P.O Box 97241		
ADDRESS (number and stre	et)		
(Check if addres is changed)	S		
	Phoenix │ │ │ │ │ │ │ │ │ │ │ │ │ CITY ▲		AZ 85060 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL AD	DRESS		
 (Check if addres is changed) 	s dacey@tmwcompliance	e.com	
	Optional Second E-Mail Add	ress ce.com	
COMMITTEE'S WEB PAGE (Check if addres is changed)			
2. DATE 05	18 / Y Y Y Y 18		
3. FEC IDENTIFICATIO	N NUMBER ► C CO	0777771	
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)	
I certify that I have examin	ed this Statement and to the best of	of my knowledge and belief it i	s true, correct and complete.
Type or Print Name of Trea	asurer Montoya, Dacey, , ,		
Signature of Treasurer	Montoya, Dacey, , ,	[Electronically Filed]	Date 05 18 2023
NOTE: Submission of false,		nay subject the person signing th ION SHOULD BE REPORTED V	is Statement to the penalties of 52 U.S.C. §30109
Office Use Only		For further information col Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	

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TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	e the candidate
Name of Candidate	
Candidate Office Sought: House Senate President	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate	
Party Committee: (National, State (Democr (d) This committee is a or subordinate) committee of the Republic	ratic, can, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected organization is a:
Corporation Corporation w/o Capital Stock Labo	r Organization
	perative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	ated fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid	I PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	·
Joint Fundraising Representative:	

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

(i)

1.	L																С			_	
2.	L														J	[С				

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	FEC Form 1 (Revised 02/2009) Pa	age 🕻	3
V	rite or Type Committee Name		
	Workers First PAC		
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC NONE	C Sp	onsor

Mailing Address																																	
																				L				l									
									CI	ΤY										ST	ATE		•				ZIF	۰ c	OE	DE			
Relationship: Connected C	Drga	aniz	zatio	on	C	A	Affili	iate	ed (Org	aniz	zatio	on	l	loin	t Fi	und	rais	ing	Re	pre	sei	ntat	ive]	_ead	der	ship	D P/	AC :	Spo	nsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Montoya, E	acey, , ,			
Full Name				
Mailing Address	P.O Box 97241			
	Phoenix			85060
	С	ITY 🔺	STATE 🔺	ZIP CODE
Title or Position ▼				
Treasurer		Tele	ephone number	602 - 228 - 8902

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Montoya, Dacey, , ,
of Treasurer	
Mailing Address	P.O Box 97241
	Phoenix AZ 85060 Image: Imag
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	,
Treasurer	Image: Telephone number 602 - 228 - 8902

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Full Name of Designated Agent	Badillo, Jorge, , ,	
Mailing Address	P.O Box 97241	
	Phoenix AZ 85060 Image: Imag	
		P CODE
Title or Position		
	Telephone number	

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of	f America		
Mailing Address	7217 Aurora Road		
	Aurora	OH 44202	2
	CITY A	STATE 🔺	ZIP CODE
Name of Bank, Depository, e	etc.		
Mailing Address			
	CITY ▲	STATE A	ZIP CODE ▲