

# 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                    |                                                                                                       |                                   |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|--|-----------------------------------|-------------------------|--------|---------------------------------------------------|--|--|---------------------------------|------------|---------|----------------------------|--------------------|-------------------------------|------------------------|--|--|
| <b>1. NAME OF COMMITTEE IN FULL</b><br>Engel for Arizona                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                    |                                                                                                       |                                   |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>ADDRESS</b> (number and street) PO Box 40721                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                    |                                                                                                       |                                   |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>CITY</b><br>Tucson                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <b>STATE</b><br>AZ | <b>ZIP CODE</b><br>85717                                                                              |                                   |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>2. NAME OF CANDIDATE</b><br>Engel, Kirsten, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    | <b>3. OFFICE SOUGHT</b> (State and District)<br>House                      AZ                      06 |                                   |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>4. FEC IDENTIFICATION NUMBER</b><br>C00773820                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                    |                                                                                                       |                                   |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                    |                                                                                                       |                                   |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> <b>A. FULL NAME</b><br/>BRINGING EVERYONE TOGETHER THROUGH ADVOCACY </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> <b>MAILING ADDRESS</b><br/>PO Box 14141 </td> <td style="padding: 5px;"> <b>Transaction ID : 4392305</b> </td> <td style="padding: 5px;"> 10/27/2022 </td> <td style="padding: 5px;"> 1000.00 </td> </tr> <tr> <td style="padding: 5px;"> <b>CITY</b><br/>Saint Paul </td> <td style="padding: 5px;"> <b>STATE</b><br/>MN </td> <td style="padding: 5px;"> <b>ZIP CODE</b><br/>55114-0141 </td> <td colspan="3" style="padding: 5px;"> Occupation </td> </tr> </table>               |                    |                                                                                                       |                                   | <b>A. FULL NAME</b><br>BRINGING EVERYONE TOGETHER THROUGH ADVOCACY                                                                                             |         |  | Name of Employer                  | Date (month, day, year) | Amount | <b>MAILING ADDRESS</b><br>PO Box 14141            |  |  | <b>Transaction ID : 4392305</b> | 10/27/2022 | 1000.00 | <b>CITY</b><br>Saint Paul  | <b>STATE</b><br>MN | <b>ZIP CODE</b><br>55114-0141 | Occupation             |  |  |
| <b>A. FULL NAME</b><br>BRINGING EVERYONE TOGETHER THROUGH ADVOCACY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    |                                                                                                       | Name of Employer                  | Date (month, day, year)                                                                                                                                        | Amount  |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>MAILING ADDRESS</b><br>PO Box 14141                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    |                                                                                                       | <b>Transaction ID : 4392305</b>   | 10/27/2022                                                                                                                                                     | 1000.00 |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>CITY</b><br>Saint Paul                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>STATE</b><br>MN | <b>ZIP CODE</b><br>55114-0141                                                                         | Occupation                        |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> <b>B. FULL NAME</b><br/>CWA COPE PCC </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> <b>MAILING ADDRESS</b><br/>501 3Rd St NW </td> <td style="padding: 5px;"> <b>Transaction ID : 4392256</b> </td> <td style="padding: 5px;"> 10/27/2022 </td> <td style="padding: 5px;"> 5000.00 </td> </tr> <tr> <td style="padding: 5px;"> <b>CITY</b><br/>Washington </td> <td style="padding: 5px;"> <b>STATE</b><br/>DC </td> <td style="padding: 5px;"> <b>ZIP CODE</b><br/>20001-2760 </td> <td colspan="3" style="padding: 5px;"> Occupation </td> </tr> </table>                                             |                    |                                                                                                       |                                   | <b>B. FULL NAME</b><br>CWA COPE PCC                                                                                                                            |         |  | Name of Employer                  | Date (month, day, year) | Amount | <b>MAILING ADDRESS</b><br>501 3Rd St NW           |  |  | <b>Transaction ID : 4392256</b> | 10/27/2022 | 5000.00 | <b>CITY</b><br>Washington  | <b>STATE</b><br>DC | <b>ZIP CODE</b><br>20001-2760 | Occupation             |  |  |
| <b>B. FULL NAME</b><br>CWA COPE PCC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                    |                                                                                                       | Name of Employer                  | Date (month, day, year)                                                                                                                                        | Amount  |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>MAILING ADDRESS</b><br>501 3Rd St NW                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                    |                                                                                                       | <b>Transaction ID : 4392256</b>   | 10/27/2022                                                                                                                                                     | 5000.00 |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>CITY</b><br>Washington                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>STATE</b><br>DC | <b>ZIP CODE</b><br>20001-2760                                                                         | Occupation                        |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> <b>C. FULL NAME</b><br/>GALLEGO FOR ARIZONA </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> <b>MAILING ADDRESS</b><br/>PO Box 1710 </td> <td style="padding: 5px;"> <b>Transaction ID : 4392413</b> </td> <td style="padding: 5px;"> 10/27/2022 </td> <td style="padding: 5px;"> 2000.00 </td> </tr> <tr> <td style="padding: 5px;"> <b>CITY</b><br/>Phoenix </td> <td style="padding: 5px;"> <b>STATE</b><br/>AZ </td> <td style="padding: 5px;"> <b>ZIP CODE</b><br/>85001-1710 </td> <td colspan="3" style="padding: 5px;"> Occupation </td> </tr> </table>                                           |                    |                                                                                                       |                                   | <b>C. FULL NAME</b><br>GALLEGO FOR ARIZONA                                                                                                                     |         |  | Name of Employer                  | Date (month, day, year) | Amount | <b>MAILING ADDRESS</b><br>PO Box 1710             |  |  | <b>Transaction ID : 4392413</b> | 10/27/2022 | 2000.00 | <b>CITY</b><br>Phoenix     | <b>STATE</b><br>AZ | <b>ZIP CODE</b><br>85001-1710 | Occupation             |  |  |
| <b>C. FULL NAME</b><br>GALLEGO FOR ARIZONA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                    |                                                                                                       | Name of Employer                  | Date (month, day, year)                                                                                                                                        | Amount  |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>MAILING ADDRESS</b><br>PO Box 1710                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                    |                                                                                                       | <b>Transaction ID : 4392413</b>   | 10/27/2022                                                                                                                                                     | 2000.00 |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>CITY</b><br>Phoenix                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>STATE</b><br>AZ | <b>ZIP CODE</b><br>85001-1710                                                                         | Occupation                        |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> <b>D. FULL NAME</b><br/>Gilcrease Jr., Glynn, W, , </td> <td style="padding: 5px;"> Name of Employer<br/>Self Employed </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> <b>MAILING ADDRESS</b><br/>2067 E Woodman Dr </td> <td style="padding: 5px;"> <b>Transaction ID : 4392287</b> </td> <td style="padding: 5px;"> 10/26/2022 </td> <td style="padding: 5px;"> 2900.00 </td> </tr> <tr> <td style="padding: 5px;"> <b>CITY</b><br/>Tempe </td> <td style="padding: 5px;"> <b>STATE</b><br/>AZ </td> <td style="padding: 5px;"> <b>ZIP CODE</b><br/>85283-3359 </td> <td colspan="3" style="padding: 5px;"> Occupation<br/>Attorney </td> </tr> </table> |                    |                                                                                                       |                                   | <b>D. FULL NAME</b><br>Gilcrease Jr., Glynn, W, ,                                                                                                              |         |  | Name of Employer<br>Self Employed | Date (month, day, year) | Amount | <b>MAILING ADDRESS</b><br>2067 E Woodman Dr       |  |  | <b>Transaction ID : 4392287</b> | 10/26/2022 | 2900.00 | <b>CITY</b><br>Tempe       | <b>STATE</b><br>AZ | <b>ZIP CODE</b><br>85283-3359 | Occupation<br>Attorney |  |  |
| <b>D. FULL NAME</b><br>Gilcrease Jr., Glynn, W, ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                    |                                                                                                       | Name of Employer<br>Self Employed | Date (month, day, year)                                                                                                                                        | Amount  |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>MAILING ADDRESS</b><br>2067 E Woodman Dr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                    |                                                                                                       | <b>Transaction ID : 4392287</b>   | 10/26/2022                                                                                                                                                     | 2900.00 |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>CITY</b><br>Tempe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <b>STATE</b><br>AZ | <b>ZIP CODE</b><br>85283-3359                                                                         | Occupation<br>Attorney            |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="3" style="padding: 5px;"> <b>E. FULL NAME</b><br/>MADISON PAC; THE </td> <td style="padding: 5px;"> Name of Employer </td> <td style="padding: 5px;"> Date (month, day, year) </td> <td style="padding: 5px;"> Amount </td> </tr> <tr> <td colspan="3" style="padding: 5px;"> <b>MAILING ADDRESS</b><br/>235 State St<br/>Apt 206 </td> <td style="padding: 5px;"> <b>Transaction ID : 4392303</b> </td> <td style="padding: 5px;"> 10/27/2022 </td> <td style="padding: 5px;"> 2000.00 </td> </tr> <tr> <td style="padding: 5px;"> <b>CITY</b><br/>Springfield </td> <td style="padding: 5px;"> <b>STATE</b><br/>MA </td> <td style="padding: 5px;"> <b>ZIP CODE</b><br/>01103-1741 </td> <td colspan="3" style="padding: 5px;"> Occupation </td> </tr> </table>                             |                    |                                                                                                       |                                   | <b>E. FULL NAME</b><br>MADISON PAC; THE                                                                                                                        |         |  | Name of Employer                  | Date (month, day, year) | Amount | <b>MAILING ADDRESS</b><br>235 State St<br>Apt 206 |  |  | <b>Transaction ID : 4392303</b> | 10/27/2022 | 2000.00 | <b>CITY</b><br>Springfield | <b>STATE</b><br>MA | <b>ZIP CODE</b><br>01103-1741 | Occupation             |  |  |
| <b>E. FULL NAME</b><br>MADISON PAC; THE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                    |                                                                                                       | Name of Employer                  | Date (month, day, year)                                                                                                                                        | Amount  |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>MAILING ADDRESS</b><br>235 State St<br>Apt 206                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                    |                                                                                                       | <b>Transaction ID : 4392303</b>   | 10/27/2022                                                                                                                                                     | 2000.00 |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>CITY</b><br>Springfield                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <b>STATE</b><br>MA | <b>ZIP CODE</b><br>01103-1741                                                                         | Occupation                        |                                                                                                                                                                |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>SIGNATURE (optional)</b><br>Rothschild, Jonathan, , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                    |                                                                                                       |                                   | <b>DATE</b><br>10/28/2022                                                                                                                                      |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |
| <b>[Electronically Filed]</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                    |                                                                                                       |                                   | <b>For further information contact:</b><br>Federal Election Commission<br>999 E Street, NW, Washington, DC 20463<br>Toll Free 800-424-9530, Local 202-694-1100 |         |  |                                   |                         |        |                                                   |  |  |                                 |            |         |                            |                    |                               |                        |  |  |

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

**FEC FORM 6**  
(Revised 03/2016)

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

|                                                                                                                                                                                |  |                                                             |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------|--|
| <b>1. NAME OF COMMITTEE IN FULL</b><br>Engel for Arizona                                                                                                                       |  |                                                             |  |
| <b>ADDRESS</b> (number and street) PO Box 40721                                                                                                                                |  |                                                             |  |
| <b>CITY, STATE, and ZIP CODE</b><br>Tucson AZ 85717                                                                                                                            |  |                                                             |  |
| <b>2. NAME OF CANDIDATE</b><br>Engel, Kirsten, , ,                                                                                                                             |  | <b>3. OFFICE SOUGHT</b> (State and District)<br>House AZ 06 |  |
| <b>4. FEC IDENTIFICATION NUMBER</b><br>C00773820                                                                                                                               |  | <i>continuation page</i>                                    |  |
| <b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____ |  |                                                             |  |
| <b>A. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>Model, Allen, , ,<br>225 S18Th St<br>Philadelphia PA 19103                                                                |  |                                                             |  |
| Name of Employer<br>OSC<br><b>Transaction ID : 4392418</b><br>Occupation<br>Lawyer                                                                                             |  | Date (month, day, year)<br>10/27/2022<br>Amount<br>1000.00  |  |
| <b>B. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>MOVE ON UP.ORG PAC<br>PO Box 50118<br>Saint Louis MO 63105-5118                                                           |  |                                                             |  |
| Name of Employer<br><br><b>Transaction ID : 4392300</b><br>Occupation                                                                                                          |  | Date (month, day, year)<br>10/27/2022<br>Amount<br>5000.00  |  |
| <b>C. FULL NAME, MAILING ADDRESS AND ZIP CODE</b><br>UNITE HERE ARIZONA<br>801 N 2Nd Ave<br>Phoenix AZ 85003-1403                                                              |  |                                                             |  |
| Name of Employer<br><br><b>Transaction ID : 4392304</b><br>Occupation                                                                                                          |  | Date (month, day, year)<br>10/27/2022<br>Amount<br>5000.00  |  |
| <b>D. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>                                                                                                                              |  |                                                             |  |
| Name of Employer<br><br>Occupation                                                                                                                                             |  | Date (month, day, year)<br><br>Amount                       |  |
| <b>E. FULL NAME, MAILING ADDRESS AND ZIP CODE</b>                                                                                                                              |  |                                                             |  |
| Name of Employer<br><br>Occupation                                                                                                                                             |  | Date (month, day, year)<br><br>Amount                       |  |