

OCC RECEIVED AT NOV 7'18 PM1:44

Use this form to report contributions received and expenditures made between the 9th day before the Election and the day before the Election that have met the monetary thresholds identified in City Code 2-2-29. For detailed instructions on how to complete this form, see the **Pre-Election Report: Political Committees Instruction Guide** 

1	Committee Name*					
COMMITTEE NAME	Workers Defense In	Action PAC				
2	Address/ PO Box			Apartment (	or Suite Number	
COMMITTEE	PO Box 143001					
ADDRESS	City			State	Zip Code	
	Austin			тх	78714	
3 COMMITTEE TREASUR	<u> </u>	st Name			Middle Initial	
NAME	Nickname Emmy	Last Nan	ne		Suffix	×
4	Address/ PO Box		· · · · · · · · · · · · · · · · · · ·	Apartment of	or Suite Number	· · ·
COMMITTEE TREASUR						
ADDRESS	City Austin	· · · · · · · · · · · · · · · · · · ·		State TX	Zip Code 78745	
5 REPORTING PERIOD	Start Date (yyyymmd	id)*	THROUGH	End Dat 201811	te (yyyymmdd)* 06	

<sup>\*</sup> Indicates a required field



6 SCHEDULES		Schedule ATX.7A - Pre-Election Report of Contributions
ATTACHED	İ	•
Check box for each form		Schedule ATX.7F - Pre-Election Report of Expenditures
attached		

#### **AFFIDAVIT**

By signature below, I certify that the Pre-Election Report filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-29 for the reporting period indicated.

Signature of Affiant

### Contribution



### **Pre-Election Report of Contributions: Schedule ATX.7A**

(Attach to Form ATX.7PAC Coversheet)

Itemize each contribution in Sections 1-3. For additional contributions, click "Add Another Contribution Page" below.

\* Indicates a required field

1		
CONTRIBUTOR		
NAME		
Contributor is an individual	Organization Name or Contributor Last Name, as applicable	e*
•		
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR		
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND		
EMPLOYER	Contributor Employer	Contributor Occupation
	Per City Code 2-2-29(d), employer and occupation are requ	aired for individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION		
DETAILS	In-Kind Contribution Description, if applicable	

Add Another Contribution Page



#### Pre-Election Report of Expenditures: Schedule ATX.7F (Attach to Form ATX.7PAC Coversheet)

### **Expenditure**

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

**Note**: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1**: **Report of Direct Campaign Expenditures** 

*	Indica	ates	а	rea	uire	ed	fie	ld
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1 PAYEE			
NAME	Organization Name or Payee Last Name, as applicable*		
Payee is an individual	Office Depot		,
2 PAYEE	Payee Address/ PO Box* 816 Tirado St	Payee Apartment or	Suite Number
ADDRESS	Payee City*	Payee State*	Payee Zip Code*
	Austin	тх	78752
3	Category*	(\$) Expenditure Amo	ount*
EXPENDITURE	Other (use Description field)	\$15.47	
DETAILS	Description (If Category is "Other")	Expenditure Date*	
	Canvassing Supplies	20181106	
i			



### **Pre-Election Report of Expenditures: Schedule ATX.7F**

### **Expenditure**

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form ATX.1: Report of Direct **Campaign Expenditures** 

*	<b>Indicates</b>	а	requir	ed fi	eld

1 PAYEE NAME	Organization Name or Payee Last Name, as applicable *		
Payee is an individual	Pizza Hut		
PAYEE ADDRESS	Payee Address/ PO Box* 6307 A Cameron Road  Payee City*  Austin	Payee Apartment Payee State*	or Suite Number  Payee Zip Code*  11.45
3 EXPENDITURE DETAILS	Category* Food/Beverage Expense Description (If Category is "Other")	(\$) Expenditure A \$11.45  Expenditure Date 20181106	



# Pre-Election Report of Expenditures: Schedule ATX.7F (Attach to Form ATX.7PAC Coversheet)

### **Expenditure**

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

**Note:** To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures** 

\* Indicates a required field

1			
PAYEE			
NAME	Organization Name or Payee Last Name, as applicable *		
Payee is an individual	Pizza Hut		
2	Payee Address/ PO Box*	Payee Apartment o	or Suite Number
PAYEE	6307 A Cameron Rd		
ADDRESS	Payee City*	Payee State*	Payee Zip Code*
	Austin	тх	78723
3	Category*	(\$) Expenditure An	nount*
EXPENDITURE	Food/Beverage Expense	\$101.69	
DETAILS	Description (If Category is "Other")	Expenditure Date*	
		20181106	



### **Pre-Election Report of Expenditures: Schedule ATX.7F**

### **Expenditure**

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form ATX.1: Report of Direct **Campaign Expenditures** 

\* Indicates a required field

1	1	* 0	
Γ			
PAYEE			
NAME	Organization Name or Payee Last Name, as applicable*		
Payee is an individual	Yellow Cab		
2			
	Payee Address/ PO Box*	Payee Apartment	or Suite Number
PAYEE	10630 Joseph Clayton Dr		
ADDRESS	Payee City*	Payee State*	Payee Zip Code*
	Austin	TX	78753
3	· · · · · · · · · · · · · · · · · · ·		
	Category*	(\$) Expenditure A	rmount*
EXPENDITURE	Travel In District	\$38.50	
DETAILS	Description (If Category is "Other")	Expenditure Date	*
		20181106	
		20181106	



## Pre-Election Report of Expenditures: Schedule ATX.7F (Attach to Form ATX.7PAC Coversheet)

### **Expenditure**

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

**Note:** To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures** 

\* Indicates a required field

PAYEE  NAME  Payee is an individual	Organization Name or Payee Last Name, as applicable*	
PAYEE ADDRESS	Payee Address/ PO Box*  Payee City*	Payee Apartment or Suite Number  Payee State* Payee Zip Code*
3 EXPENDITURE	Category*	(\$) Expenditure Amount*
DETAILS	Description (If Category is "Other")	Expenditure Date*