

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

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| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00090532 | 2 Total pages filed: 17 |
| 3 COMMITTEE NAME Workers Defense In Action | | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 12/07/2020 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 140402 Austin, TX 78714 | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Louis NICKNAME LAST SUFFIX Malfaro | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 140402 Austin, TX 78714 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE TX | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (512) 448-0130 | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | | |
| 10 PERIOD COVERED | Month Day Year Month Day Year 10/26/2020 THROUGH 12/07/2020 | | |
| 11 ELECTION | ELECTION DATE Month Day Year 12/15/2020 | ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | |

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | | |
|---|--|---|
| 12 COMMITTEE NAME Workers Defense In Action | | 13 Filer ID (Ethics Commission Filers) 00090532 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported James Flannigan Council Member, District 6 |
| | | B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 29,000.00 |
| EXPENDITURE TOTALS | 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 13,550.28 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 88,690.00 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

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|--|
| 16 AFFIDAVIT <p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p> <p style="text-align: right;">Louis Malfaro _____ Signature of Campaign Treasurer</p> <p>AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p> <p>_____ Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath</p> |
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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 3 of 17

| | | |
|---|---|---|
| 12 COMMITTEE NAME Workers Defense In Action | | 13 Filer ID (Ethics Commission Filers) 00090532 |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Allison Alter Council Member, District 10 |
| | | B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | | |

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
4 of 17

| | | |
|---|---|---|
| 17 COMMITTEE NAME Workers Defense In Action | | 18 Filer ID (Ethics Commission Filers) 00090532 |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 29,000.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input type="checkbox"/> SCHEDULE E: LOANS | \$ |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 13,550.28 |
| 11. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 14. | <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 560.91 |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/2 Rpt: 5/17 |
| 2 FILER NAME Workers Defense In Action | | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 11/25/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AUS Springdale LLC <hr/> 6 Contributor address; City; State; Zip Code 4 Embarcadero Center Suite 3620 San Francisco, CA 94111 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 11/14/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Education Austin PAC <hr/> Contributor address; City; State; Zip Code 316 W. 12th Street Suite 202 Austin, TX 78701 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 11/03/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pastor, Andy <hr/> Contributor address; City; State; Zip Code 930 Caslano Cv Austin, TX 78732 | Amount of Contribution (\$) \$1,500.00 |
| Principal occupation / Job title (See Instructions) Real Estate | | Employer (See Instructions) Endeavor |
| Date 11/23/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick, Rose <hr/> Contributor address; City; State; Zip Code 730 Belvin San Marcos, TX 78666 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) Real Estate | | Employer (See Instructions) Corridor Title |
| Date 11/29/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Presidium Group <hr/> Contributor address; City; State; Zip Code 3100 McKinnon Suite 250 Dallas, TX 75201 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/2 Rpt: 6/17

2 FILER NAME

Workers Defense In Action

3 Filer ID (Ethics Commission Filers)
00090532

4 Date

12/02/2020

5 Full name of contributor

☒ out-of-state PAC (ID#: C00712109)

The Action PAC

7 Amount of Contribution (\$)

\$2,500.00

6 Contributor address; City; State; Zip Code

3041 Mission Street

#307

San Francisco, CA 94110

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|--|---|---|
| 1 Total pages Schedule F1: Sch: 1/10 Rpt: 7/17 | 2 FILER NAME Workers Defense In Action | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 12/05/2020 | 5 Payee name Amazon | |
| 6 Amount (\$) \$54.95 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 410 Terry Ave. North Seattle, WA 98109-5210 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/05/2020 | Payee name Amazon | |
| Amount (\$) \$18.39 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 410 Terry Ave. North Seattle, TX 98109-5210 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 11/20/2020 | Payee name Amazon | |
| Amount (\$) \$108.24 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 410 Terry Ave. North Seattle, WA 98109-5210 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 2/10 Rpt: 8/17 | 2 FILER NAME Workers Defense In Action | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 11/19/2020 | 5 Payee name Amazon | |
| 6 Amount (\$) \$178.51 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 410 Terry Ave. North Seattle, WA 98109-5210 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/03/2020 | Payee name Banks, Andrew | |
| Amount (\$) \$184.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 5700 BOROS DR Austin, TX 78754 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/03/2020 | Payee name Brenning, Carl | |
| Amount (\$) \$299.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 6012 DIAMONDLEAF BEND Austin, TX 78724 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 3/10 Rpt: 9/17 | 2 FILER NAME Workers Defense In Action | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 12/03/2020 | 5 Payee name Brunell, Adam | |
| 6 Amount (\$) \$339.25 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 911 KIRSCHNER ROAD Unit A Austin, TX 78758 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 11/29/2020 | Payee name CVS Pharmacy | |
| Amount (\$) \$9.57 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 5526 S. Congress Ave. Austin, TX 78745 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/03/2020 | Payee name Chacon, Gianna | |
| Amount (\$) \$414.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4011 ALABAMA STREET #5308 El Paso, TX 79930 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 4/10 Rpt: 10/17 | 2 FILER NAME Workers Defense In Action | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 12/03/2020 | 5 Payee name Diaz de Leon, Blanca | |
| 6 Amount (\$) \$414.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3801 VANDERVEER DRIVE El Paso, TX 79938 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 11/28/2020 | Payee name HEB | |
| Amount (\$) \$3.34 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1801 E. 51st St. Austin, TX 78723 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 11/28/2020 | Payee name HEB | |
| Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1801 E. 51st St. Austin, TX 78723 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 5/10 Rpt: 11/17 | 2 FILER NAME Workers Defense In Action | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 12/03/2020 | 5 Payee name Horner, Katelyn | |
| 6 Amount (\$) \$391.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 900 PEQUES STREET #310 San Marcos, TX 78666 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/03/2020 | Payee name Laeky , Meriam | |
| Amount (\$) \$425.50 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1001 SPEIGHT AVENUE #426 Waco, TX 76706 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/04/2020 | Payee name MailChimp | |
| Amount (\$) \$38.37 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailchimp monthly subscription |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 6/10 Rpt: 12/17 | 2 FILER NAME Workers Defense In Action | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 12/03/2020 | 5 Payee name Matrunola, Concetta | |
| 6 Amount (\$) \$92.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 8000 HWY 290 WEST #10205 Austin, TX 78736 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/03/2020 | Payee name Mein, Todd | |
| Amount (\$) \$299.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 7000 PRISCILLA DRIVE Austin, TX 78752 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 11/25/2020 | Payee name Raw Paw | |
| Amount (\$) \$270.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 506 East Saint Elmo Road Suite A3 Austin, TX 78745 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-shirts |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 7/10 Rpt: 13/17 | 2 FILER NAME Workers Defense In Action | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 12/03/2020 | 5 Payee name Rocha, Marcos | |
| 6 Amount (\$) \$414.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 2215 LAWNMONT AVE #113 Austin, TX 78756 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/06/2020 | Payee name SVM Prepaid | |
| Amount (\$) \$134.30 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3727 N Ventura Dr Arlington Heights , IL 60004 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas cards |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 11/22/2020 | Payee name SVM Prepaid | |
| Amount (\$) \$1,449.26 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 3727 N Ventura Dr, Arlington Heights , IL 60004 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Travel In District | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas cards |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 8/10 Rpt: 14/17 | 2 FILER NAME Workers Defense In Action | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 12/03/2020 | 5 Payee name Serna, Valeria | |
| 6 Amount (\$) \$1,300.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1134 BROOKSWOOD AVENUE Austin, TX 78721 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/02/2020 | Payee name SurePayroll | |
| Amount (\$) \$87.85 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 2350 Ravine Way Suite100 Glenview , IL 60025 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll processing fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/03/2020 | Payee name Travis County Democratic Party | |
| Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code PO Box 684263 Austin, TX 78768 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Canvass expenditures | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Canvass expenditures |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Alter, Allison | Office sought Council Member, District 10 Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 9/10 Rpt: 15/17 | 2 FILER NAME Workers Defense In Action | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 12/03/2020 | 5 Payee name University Federal Credit Union | |
| 6 Amount (\$) \$12.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 9350 Austin, TX 78766 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fee |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/03/2020 | Payee name Weems, Fontaine | |
| Amount (\$) \$184.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 4205 BALCONES DRIVE Austin, TX 78731 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |
| Date 12/03/2020 | Payee name Westman, Jacqueline | |
| Amount (\$) \$419.75 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1701 UPLAND DRIVE #20 Houston, TX 77043 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages before taxes |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 10/10 Rpt: 16/17 | 2 FILER NAME Workers Defense In Action | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 12/03/2020 | 5 Payee name Westman, Jacqueline | |
| 6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1701 UPLAND DRIVE #20 Houston, TX 77043 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Travel reimbursement |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Flannigan, James "Jimmy" | Office sought Council Member, District 6 Office held |

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule I: Sch: 1/1 Rpt: | 2 FILER NAME Workers Defense In Action | 3 Filer ID (Ethics Commission Filers) 00090532 |
| 4 Date 12/02/2020 | 5 Payee name Google | |
| 6 Amount (\$) 471.37 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee Address; City; State; Zip 1600 Amphitheatre Parkway Mountainview, CA 94043 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Admin |
| Date 12/02/2020 | Payee name Google Suite | |
| Amount (\$) 89.54 <input type="checkbox"/> Expenditure from corporate funds | Payee Address; City; State; Zip 1600 Amphitheatre Parkway Mountainview, CA 94043 | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Admin |