FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00090532 3 COMMITTEE NAME **OFFICE USE ONLY** Workers Defense In Action Date Received **ELECTRONICALLY FILED** 01/15/2021 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 140402 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78714 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Louis NAME NICKNAME LAST **SUFFIX** Malfaro STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** PO Box 140402 STREET **ADDRESS** (Residence or Business) Austin, TX 78714 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** TX Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 448-0130 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 12/08/2020 12/31/2020 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Other X Runoff 12/15/2020 General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12	COMMITTEE NAME			13 Filer	· ID	(Ethics Commission Filers)
	Workers Defense In Action 000			90532		
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Jimmy Flannigan Counc	cil Member, D	istrict 6	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		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.)				
	CONTRIBUTION TOTALS	PLEDGES, LOANS,	POLITICAL CONTRIBUTIONS (OTHER THOS GUARANTEES OF LOANS) qualifies for the higher itemization threshold	HAN	\$	0.00
		2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOA	ANS)	\$	0.00
	EXPENDITURE TOTALS	3. TOTAL POLITICAL E	XPENDITURES OF \$100 OR LESS, UNLES	SS ITEMIZED	\$	0.00
		4. TOTAL POLITICA	L EXPENDITURES		\$	28,201.45
	CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE G PERIOD	LAST DAY	\$	79,656.00
	OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS A REPORTING PERIOD	AS OF THE	\$	0.00
16	AFFIDAVIT					
			I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
				Louis Malfard		
			Signature	e of Campaign	Treasur	er
	AFFIX NOTARY	STAMP / SEAL ABOVE				
				, this the _		day
	of	, 20, to certify v	which, witness my hand and seal of office.			
	Signature of officer adr	ministering oath	Printed name of officer administering oath	Title	of office	er administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

3 of 19				
17 COMMITTEI Workers De	E NAME efense In Action	18 Filer ID 00090532	(Ethics Commission Filers)	
	19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 28,201.45	
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1:	
Sch: 1/16 Rpt: 4/19	Workers Defense In Action 00090532
4 Date	5 Payee name
12/17/2020	Banks, Andrew
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$115.00	5700 BOROS DR
Ψ113.00	3700 BORGS BR
Expenditure from	
corporate funds	Austin, TX 78754
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Gross Wages
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	- 1
Date	Douge name
	Payee name
12/16/2020	Betancourt, Guadalupe
Amount (\$)	Payee address; City; State; Zip Code
\$165.00	199 Jarbridge Dr.
Expenditure from corporate funds	Kyle, TX 78640
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Contractor: Lit drop hours
	Contractor. En drop nours
0 1: 0.11.7.7.1.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onponditure to senionic ere-	
Date	Payee name
12/17/2020	Bhat, Prema
Amount (\$)	Payee address; City; State; Zip Code
\$345.00	4229 SANDORNA VIEW
Ψ545.00	4223 SANDORIVA VIEW
Expenditure from	
corporate funds	Leander, TX 78641
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LAFLINDITURE	Check if Austin, TX, officeholder living expense
	Gross Wages
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/16 Rpt: 5/19	Workers Defense In Action 00090532
4 Date	5 Payee name
12/17/2020	Brenning, Carl
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$460.00	6012 DIAMONDLEAF BEND
Expenditure from corporate funds	Austin, TX 78724
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Gross wages
	Gross wages
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	<u> </u>
Date	Payee name
12/17/2020	Brunell, Adam
Amount (\$)	Payee address; City; State; Zip Code
\$1,903.75	911 KIRSCHNER ROAD
	Unit A
Expenditure from corporate funds	Austin, TX 78758
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Crees wages
	Gross wages
Complete ONLY if disease	Condidate/Office helder name Office accords
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/17/2020	Burns, Briana
Amount (\$)	Payee address; City; State; Zip Code
\$126.50	901 CANNONEER LANE
- "	
Expenditure from corporate funds	Austin, TX 78757
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Gross wages
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/16 Rpt: 6/19	Workers Defense In Action 00090532
4 Date	5 Payee name
12/17/2020	Caballero, Roberto
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,277.00	5200 NORTH LAMAR
	#203
Expenditure from corporate funds	Austin, TX 78751
<u> </u>	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Gross Wages
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/17/2020	Chacon, Gianna
Amount (\$)	Payee address; City; State; Zip Code
\$1,944.00	4011 ALABAMA STREET
	#5308
Expenditure from	El Paso, TX 79930
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Gross wages
	Cross wages
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/15/2020	Chipotle
Amount (\$)	Payee address; City; State; Zip Code
\$120.97	6301 West Parmer Ln.
	#201
Expenditure from corporate funds	Austin, TX 78729
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Food for team
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/16 Rpt: 7/19	Workers Defense In Action	00090532
4 Date	5 Payee name	<u>'</u>
12/16/2020	Cruz, Digna	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	e
\$150.00	8312 N Interstate 35	
	3120	
Expenditure from corporate funds	Austin, TX 78753	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Contractor: Lit drop hours
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		office field
Date	Payee name	
12/17/2020	Diaz de Leon, Blanca	
Amount (\$)	Payee address; City; State; Zip Cod	е
\$655.50	3801 VANDERVEER DRIVE	
Expenditure from		
corporate funds	El Paso, TX 79938	
PURPOSE OF	, , ,	b) Description
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Gross Wages
		ű
Complete ONLY if direct	Candidate/Officeholder name Office soug	nt Office held
expenditure to benefit C/O	-1	
Date	Payee name	
12/17/2020	Ellis, Ashley	
Amount (\$)	Payee address; City; State; Zip Cod	e
\$230.00	8450 CAMBRIDGE STREET	
Expenditure from corporate funds	Houston, TX 77054	
PURPOSE		b) Description
OF	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Gross Wages
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	nt Office held
3.50	•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/16 Rpt: 8/19	Workers Defense In Action 00090532
4 Date	5 Payee name
12/16/2020	Garcia, Marcos
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$165.00	1915 Wells Branch Pkwy
Evnanditura from	Apt 303
Expenditure from corporate funds	Austin, TX 78728
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Contractor: Lit drop hours
	Contactor. Lit drop notice
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/16/2020	Gonzalez, Karen
Amount (\$)	Payee address; City; State; Zip Code
\$165.00	6506 Woodhue Drive
Expenditure from	
corporate funds	Austin, TX 78745
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Mages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Contractor: Lit drop hours
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/16/2020	Guzman, Fidel
Amount (\$)	Payee address; City; State; Zip Code
\$300.00	5701 Johnny Morris Rd.
Expenditure from	#35
corporate funds	Austin, TX 78724
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Contractor: Lit drop hours
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/16 Rpt: 9/19	Workers Defense In Action 00090532
4 Date	5 Payee name
12/15/2020	HEB
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5.37	12860 Research Blvd.
Expenditure from corporate funds	Austin, TX 78750
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Supplies
	<u> </u>
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
12/13/2020	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$35.00	1801 E. 51st St.
Expenditure from	
corporate funds	Austin, TX 78723
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Supplies Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Supplies
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/17/2020	Horner, Katelyn
Amount (\$)	Payee address; City; State; Zip Code
\$954.50	900 PEQUES STREET
	#310
Expenditure from corporate funds	San Marcos, TX 78666
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Gross wages
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiolitile to belieff C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/16 Rpt: 10/19	Workers Defense In Action 00090532
4 Date	5 Payee name
12/17/2020	Hughes, Amparo
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$242.27	12100 Metric Blvd
	#1918
Expenditure from corporate funds	Austin, TX 78758
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Gross wages
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/16/2020	Iturbe, Janett
Amount (\$)	Payee address; City; State; Zip Code
\$165.00	1010 Immanuel Rd
Expenditure from corporate funds	Pflugerville, TX 78660
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Controctory Lit drop hours
	Contractor: Lit drop hours
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/17/2020	Kadir, Omar
Amount (\$)	Payee address; City; State; Zip Code
\$840.00	602 STONEY BROOK DRIVE
,,,,,,,	
Expenditure from corporate funds	Round Rock, TX 78681
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Gross wages
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense 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: 8/16 Rpt: 11/19	Workers Defense In Action 00090532
•	
4 Date	5 Payee name
12/17/2020	Laeky , Meriam
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,783.00	1001 SPEIGHT AVENUE
	#426
Expenditure from corporate funds	Waco, TX 76706
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Gross wages
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/08/2020	Lebin Yates LLC
Amount (\$)	Payee address; City; State; Zip Code
\$49.95	PO Box 41112
Expenditure from corporate funds	Austin, TX 78704
·	1
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Legal Fees
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	v
Date	Payee name
12/16/2020	Marroquin, Eva
Amount (\$)	Payee address; City; State; Zip Code
\$540.00	8312 N IH35
	#1141
Expenditure from corporate funds	Austin, TX 78753
•	I ma
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Contractor: Lit drop hours
	Softwater. En drop flours
Complete ONLY if direct	Candidate/Officeholder name Office sought Office hald
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/16 Rpt: 12/19	Workers Defense In Action 00090532
4 Date	5 Payee name
12/17/2020	Matrunola, Concetta
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$690.00	8000 HWY 290 WEST
	#10205
Expenditure from corporate funds	Austin, TX 78736
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Gross wages
	Gross wages
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
12/17/2020	Mein, Todd
Amount (\$)	Payee address; City; State; Zip Code
\$1,760.00	7000 PRISCILLA DRIVE
Expenditure from corporate funds	Austin, TX 78752
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Gross wages
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/16/2020	Mercado, Killian
Amount (\$)	Payee address; City; State; Zip Code
\$165.00	1010 Immanuel Rd
	#105
Expenditure from corporate funds	Pflugerville, TX 78660
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITONE	Contractor: Lit drop hours
	Contractor: Lit drop hours
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense Event Expense Loan Repayment/Reimbu

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

Fees
Feed
Feod/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
4. Total manage Colorabile 54	
1 Total pages Schedule F1:	
Sch: 10/16 Rpt: 13/19	Workers Defense In Action 00090532
4 Date	5 Payee name
12/16/2020	Ocampo, Graciela
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$240.00	123 Woods View Ct.
,	
Expenditure from	Coder Creek TV 70012
corporate funds	Cedar Creek, TX 78612
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Contractor: Lit drop hours
	Contractor. Lit drop flours
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
SAPORALIZATO TO DOTICITE O/O	
Date	Payee name
12/14/2020	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$0.12	11066 Pecan Park Blvd
Ψ0.12	#307
Expenditure from	
corporate funds	Cedar Park, TX 78613
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experialitate to beliefit 6/0	'
Date	Payee name
12/14/2020	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$18.71	11066 Pecan Park Blvd
Ψ15.71	#307
Expenditure from	
corporate funds	Cedar Park, TX 78613
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense
	Check if Austin, TX, officeholder living expense
	Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiulture to benefit C/O	1

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1. Total pages Calculute 54				
1 Total pages Schedule F1:				
Sch: 11/16 Rpt: 14/19	Workers Defense In Action 00090532			
4 Date	5 Payee name			
12/14/2020	Office Depot			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$0.36	11066 Pecan Park Blvd			
	#307			
Expenditure from				
corporate funds	Cedar Park, TX 78613			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense Printing			
	T Tillung			
O Complete ONLY if allow	Condidate/Officeholder name Office accepts			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
12/16/2020	Paredes, Fausto			
Amount (\$)	Payee address; City; State; Zip Code			
\$465.00	8312 N IH35			
·	#1141			
Expenditure from				
corporate funds	Austin, TX 78753			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Contractor: Lit drop hours			
	Contractor. En drop nours			
Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
<u> </u>				
Date	Payee name			
12/17/2020	Rentala, Anindu			
Amount (\$)	Payee address; City; State; Zip Code			
\$460.00	9230 KNOLL CREST LOOP			
Expenditure from corporate funds	Austin, TX 78759			
•				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Salaries/Wages/Contract Labor			
	Gross wages			
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OH				

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1 Total pages Schedule F1:					
Sch: 12/16 Rpt: 15/19	Workers Defense In Action 00090532				
4 Date	5 Payee name				
12/17/2020	Rocha, Marcos				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$1,247.75	2215 LAWNMONT AVE				
Ψ1,2-11.10	#113				
Expenditure from					
corporate funds	Austin, TX 78756				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Salaries/Wages/Contract Labor				
-	Crees wages				
	Gross wages				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
experialities to beliefft C/OI	•				
Date	Payee name				
12/17/2020	Romero, Paola				
Amount (\$)	Payee address; City; State; Zip Code				
\$235.00	7922 ACACIA FALLS CT				
Ψ200.00	1022 NONON TINEES OF				
Expenditure from					
corporate funds	Houston, TX 77047				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Salaries/Wages/Contract Labor				
	Cross Wages				
	Gross Wages				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
experientare to benefit Gree					
Date	Payee name				
12/12/2020	SMV Prepaid				
Amount (\$)	Payee address; City; State; Zip Code				
\$141.30	3727 N Ventura Dr,				
+ = .=.00					
Expenditure from	Arlington Heighte II 60004				
corporate funds	Arlington Heights , IL 60004				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Transportation Equipment & Related				
	Expense Check if Austin, TX, officeholder living expense Gas cards				
	Gas carus				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
- p					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Advertising Expense Accounting/Banking Consulting Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 13/16 Rpt: 16/19	Workers Defense In Action 00090532			
4	Date	5 Payee name			
	12/16/2020	Salvador, Martin			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$165.00	199 Jarbridge Dr.			
Ш	Expenditure from corporate funds	Kyle, TX 78640			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense			
		Contractor: Lit drop hours			
_	Computate ONLY if direct	Candidata/Officahaldar paga			
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	12/16/2020	Sanchez, Edna			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$165.00				
		Apt 303			
	Expenditure from corporate funds	Austin, TX 78728			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Salaries/Wages/Contract Labor			
		Check if Austin, TX, officeholder living expense			
		Contractor: Lit drop hours			
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	12/17/2020	Serna, Valeria			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$3,344.95	1134 BROOKSWOOD AVENUE			
	Expenditure from corporate funds	Austin, TX 78721			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Gross wages			
		Gioss wayes			
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OH				
\vdash					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 14/16 Rpt: 17/19	Workers Defense In Action 00090532			
4 Date	5 Payee name			
12/13/2020	Staples			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$10.76	1201 Barbara Jordan Blvd			
	Suite 700			
Expenditure from corporate funds	Austin, TX 78723			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Printing Expense			
	Check if Austin, TX, officeholder living expense			
	Printing			
O Commission ONLY if dispose	Condidate/Office helds no year.			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
12/18/2020	SurePayroll			
Amount (\$)	Payee address; City; State; Zip Code			
\$526.04	2350 Ravine Way			
— E	Suite100			
Expenditure from corporate funds	Glenview , IL 60025			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Salaries/Wages/Contract Labor			
	Employer Taxes			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O				
Date	Payee name			
12/17/2020	SurePayroll			
	·			
Amount (\$)	Payee address; City; State; Zip Code			
\$3,070.75	2350 Ravine Way			
Expenditure from	Suite100			
corporate funds	Glenview , IL 60025			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Salaries/Wages/Contract Labor			
	Check if Austin, TX, officeholder living expense Employer taxes			
	Limployer taxes			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	Credit Card Payment The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 15/16 Rpt: 18/19	Workers Defense In Action	00090532			
4 Date	5 Payee name				
12/17/2020	Taylor, Jessica				
6 Amount (\$) \$638.50 Expenditure from corporate funds	7 Payee address; City; State; Zip Code 515 E SLAUGHTER LANE #3318 Austin, TX 78744				
8 PURPOSE OF EXPENDITURE	Galaries/ Wages/ Goritiaet East	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense PS			
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held			
Date	Payee name				
12/17/2020	Timm, Emily				
Amount (\$)	Payee address; City; State; Zip Code				
\$415.32	1204 Greenwood Ave				
Expenditure from corporate funds	Austin, TX 78721				
PURPOSE OF EXPENDITURE	Jaianes/Wages/Contract Eabor	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense S			
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
Date	Payee name				
12/12/2020	Walmart				
Amount (\$) \$49.35	Payee address; City; State; Zip Code 111923 US Hwy 290 E				
Expenditure from corporate funds	Manor, TX 78653				
PURPOSE OF EXPENDITURE	Tood/Develage Expense	el outside of Texas. Complete Schedule T. in, TX, officeholder living expense IVASSEIS			
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1 Total pages Schedule F1: Sch: 16/16 Rpt: 19/19	FILER NAME Workers Defense In Action	3 Filer ID (Ethics Commission Filers) 00090532
4 Date 12/17/2020	5 Payee name Westman, Jacqueline	·
6 Amount (\$) \$1,638.75 Expenditure from corporate funds 8 PURPOSE OF EXPENDITURE	7 Payee address; City; State; Zip Code 1701 UPLAND DRIVE #20 Houston, TX 77043 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gross wages
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
Date 12/09/2020	Payee name Zoom	
Amount (\$) \$15.98 Expenditure from corporate funds PURPOSE OF EXPENDITURE	Payee address; City; State; Zip Code 55 Almaden Boulevard 6th Floor San Jose, CA 95113 (a) Category (See Categories listed at the top of this schedule) Fees (b)	Description Check if travel outside of Texas. Complete Schedule T.
EN ENDITORE		Check if Austin, TX, officeholder living expense Conferencing services
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held