FORM. GPAC **GENERAL-PURPOSE COMMITTEE COVER SHEET PG 1** CAMPAIGN FINANCE REPORT Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00083026 3 COMMITTEE NAME OFFICE USE ONLY Workers Defense Action Fund PAC Date Received OCC RECEIVED AT COMMITTEE ADDRESS / PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE NOV 5'18 PM1:30 **ADDRESS** PO BOX 143001 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78714 Receipt # Amount Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST MI **TREASURER** Ms. Emma NAME **NICKNAME** LAST SUFFIX Ruiz CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: -ZIP CODE STATE: **TREASURER** 5903 Swayden Lane STREET **ADDRESS** (Residence or Business) Austin, TX 78745 STREET OR PO BOX; **CAMPAIGN** APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 5903 Swayden Lane MAILING **ADDRESS** Austin, TX 78745 Change of Address CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** (956) 454-4048 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 Month Month Year Day Year Day COVERED 09/28/2018 THROUGH 10/27/2018 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff . Other 11/06/2018 X General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

_									
12	COMMITTEE NAME	Sund Dag			1	13 Filer		(Ethics Comm	nission Filers)
	Workers Defense Action	HUND PAC	<u> </u>	·		0008	3026		
14	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Sheryl Cole St	ate Representa	ative			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	<u> </u>	·				<u> </u>
	•				•				
	*	2. Measures	A. Supported						
		(Describe by date and location of election and nature of issue.)							
			B. Opposed						
						•			
		3. Officeholders Assisted (Identify by name or, if							
	. •	applicable, classify by party.)							-
15	CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, check here if this report	OR GUARAN	TEES OF LOANS)			\$		0.00
		2. TOTAL POLITICA	·	_ 			_		
		(OTHER THAN PLE			S OF LOANS)		\$		20,000.00
	EXPENDITURE TOTALS	3. TOTAL POLITICAL E	EXPENDITUR	ES OF \$100 OR LES	SS, UNLESS ITE	MIZED	\$		0.00
		4. TOTAL POLITICA	L EXPENDI	TURES			\$		22,952.15
	CONTRIBUTION BALANCE	5. TOTAL POLITICAL O		ONS MAINTAINED A	AS OF THE LAST	DAY	\$		25,309.71
	OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE I			LOANS AS OF	THE .	\$		0.00
16	AFFIDAVIT	· · · · · · · · · · · · · · · · · · ·					_		
	,	•		I swear, or affirm, ur true and correct and under Title 15, Elect	d includes all info	erjury, tha rmation r	at the acc equired t	companying o be reporte	report is d by me
					Signature of Ca	ampaion '	Treasure	r	•
			1		3.3	b		-	
	AFFIX NOTARY	STAMP / SEAL ABOVE			,				
	Sworn to and subscribed	before me, by the said _				this the _			day
		, 20, to certify \	which, witness	my hand and seal o	of office.		,		
	•	•						Ŧ	
	Signature of officer ad	ministering oath	Printed name	of officer administer	ing oath	Title	of office	r administeri	ng oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

					•				Page 3	of 50
12 COMMITTEE NAME			•			13 Fil	er ID	(Ethics Co	mmission	Filers)
Workers Defense Actio	n Fund PAC	•				00	083026			
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		upported	Lewis Conway Jr.	Austin City	/ Council			·	
(Attach lists on plain paper to complete this report if necessary.)		В. О	pposed							
	Measures (Describe by date and location of election and nature of issue.)	A. Sı	upported		•					
		B. O	pposed	(*.				•	
	3. Officeholders Assisted	·		"					•	
	(Identify by name or, if applicable, classify by party.)	ı								
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		upported	Stephanie Gharakh	nanian Au	stin Comr	nunity Co	ollege Bo	ard of Tr	ustees
(Attach lists on plain paper to complete this report if necessary.)		B. O	pposed							·
	Measures (Describe by date and location of election and nature of issue.)	A. St	upported						• • •	
		B. O	pposed	·					,	
·	Officeholders Assisted (Identify by name or, if applicable, classify by party.)									-
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	· .									

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

ı		·				4 c	of 50
		EE NAME Defense Action Fund PAC	18 Filer ID 00083026	(Ethic	cs Comm	nission File	rs)
		E SUBTOTALS SCHEDULE			SUBTOT	AL AMOU	INT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	/	20,0	00.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	DR .	\$,		
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	ATION OR .	\$			
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$			
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	t' .	\$			
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$			
9.		SCHEDULE E: LOANS	. "	\$	•		
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$		22,	952.15
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	ONS	\$			
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$			
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<u> </u>							

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/50
2	FILER NAME Workers Def	ense Action Fund PAC		3 Filer ID (Ethics Commission Filers) 00083026
4	Date 10/19/2018	 5 Full name of contributor out-of-state PAC (ID#:_New American Leaders Action Fund 6 Contributor address; City; State; Zip Code 25 West 39th Street 14th Floor New York, NY 10018 		7 Amount of Contribution (\$) \$14,000.00
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Date 10/12/2018	Full name of contributor out-of-state PAC (ID#:_ Workers Defense In Action PAC Contributor address; City; State; Zip Code PO Box 140402 Austin, TX 78714		Amount of Contribution (\$) \$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
	Date 10/26/2018	Full name of contributor out-of-state PAC (ID#:_ Yes On Prop E PAC Contributor address; City; State; Zip Code PO Box 301074		Amount of Contribution (\$) \$1,000.00
<u> -</u>	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions)	
	· · · · · · · · · · · · · · · · · · ·	parion y coo due (coo moradans)	- ·	,
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SCHEDULE F1

Accounting/Banking Fees
Consulting Expense Food/Beverage Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Mense/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabad de E1	
1 Total pages Schedule F1:	
Sch: 1/45 Rpt: 6/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/18/2018	7-Eleven
C Amazint (d)	7 Davis address. Chu Ctata. 7is Cada
6 Amount (\$)	7 Payee address; City State; Zip Code
, \$3.58	5101 N. Lamar
Expenditure from corporate funds	Austin, TX 78751
8 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	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
•	Food for Canvassers
	1 out for Carryassers
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Cole, Sheryl State Representative District 46
Date	Payee name
10/18/2018	7-Eleven
Amount (\$)	Payee address; City; State, Zip Code
\$3.58	5101 N. Lamar
	·
Expenditure from corporate funds	Austin, TX 78751
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) FOOD/Reverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Food for Canvassers
•	1 000 107 0011703013
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experientare to benefit C/O	Conway Jr., Lewis
Date [']	Payee name
10/18/2018	7-Eleven)
	/
Amount (\$)	Payee address; City, State Zip Code
, \$3.58	5101 N. Lamar
Expenditure from corporate funds	Austin, TX 78751
<u> </u>	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Food for Canvassers
	1 Journal California
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	T Gharakhanian, Stephanie
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SCHEDULE F1

	EXPENDITURE CATEGO	RIES 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	Food/Beverage Expense	Polling Expense	, Travel in District
Contributions/ Donations Made By Candidate/Officeholder/Pol/tica		Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains	how to complete this form.	
Total pages Schedule F1:	2 FILER NAME	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission File
Sch: 2/45 Rpt: 7/50	Workers Defense Action Fund PAC		00083026 ·
Date	5 Payee name		_ L
10/18/2018	Alvarado, Daniel	,	-
Amount (\$)		e; Zip Code	
` ,	1612 NEW YORK AVE	e, zip code	
\$125.29	1012 NEW TORK AVE		
Expenditure from			
corporate funds	Austin, TX 78702		
PURPOSE	(a) Category (See Categories listed at the top of this so	hedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if trave	el outside of Texas. Complete Schedule T.
- ALLIGHTORE			tin, TX, officeholder fiving expense
		Wages Befo	ore laxes
Complete ONLY if direct	•	Office sought	Office held
expenditure to benefit C/OI	¹ Cole, Sheryl	State Representative Dis	trict 46
Date	Payee name		
10/18/2018	Alvarado, Daniel		
Amount (\$)		; Zip Code	
\$125.29	1612 NEW YORK AVE	, zip code	•
\$123,25	1012 NEW TORK AVE		
Expenditure from	Accepting TW 70700		
corporate funds	Austin, TX 78702		
PURPOSE OF	(a) Category (See Categories listed at the top of this so		
EXPENDITURE	Salaries/Wages/Contract Labor	<u>L</u>	el outside of Texas. Complete Schedule T.
		اسا (tin, TX, officeholder living expense
		Wages Befo	ore raxes
<u>-</u> -			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	· ·	Office sought	· Office held
expenditure to benefit Crof	Conway Jr., Lewis		
Date	Рауее пате	•	
10/18/2018	Alvarado, Daniel	•	
Amount (\$)		e; Zip Code	·
\$125.29	1612 NEW YORK AVE	, <u>-ip</u>	
Φ12.23	TOTE NEW TOTAL AVE		
Expenditure from		a.	
corporate funds	Austin, TX 78702		
PURPOSE	(a) Category (See Categories listed at the top of this sc	hedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check-if trave	el outside of Texas. Complete Schedule T.
CAP ENDITORE	•	, <u> </u>	tin, TX, officeholder living expense
		Wages Befo	ore Taxes
		i	
	·		
Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made ByCandidate/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 complete this fo	orm.
1 Total pages Schedule F1: Sch: 3/45 Rpt: 8/50	FILER NAME Workers Defense Action Fund PAC	3 Filer ID (Ethics Commission Filers) 00083026
4 Date 10/04/2018	5 Payee name Alvarado, Daniel	
6 Amount (\$) \$264.80	7 Payee address; City; State; Zip Code 1612 NEW YORK AVE	
Expenditure from corporate funds	Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	Chec	otion k if travel outside of Texas. Complete Schedule ⊤. k if Austin, TX, officeholder living expense S Before Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Cole, Sheryl State Representativ	Office held e District 46
Date 10/04/2018	Payee name Alvarado, Daniel	
Amount (\$) \$264.80	Payee address; City; State; Zip Code 1612 NEW YORK AVE	e. A
Expenditure from corporate funds	Austin, TX 78702	
PURPOSE OF EXPENDITURE	Chec	otion k if travel outside of Texas. Complete Schedule T. k if Austin, TX, officeholder living expense Before Taxes
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Conway Jr., Lewis	Office held
Date 10/04/2018	Payee name Alvarado, Daniel	
Amount (\$) \$264.80	Payee address; City; State; Zip Code 1612 NEW YORK AVE	
Expenditure from corporate funds	Austin, TX 78702	· · · · · · · · · · · · · · · · · · ·
PURPOSE OF EXPENDITURE	Chec	ntion sk if travel outside of Texas. Complete Schedule ⊤. sk if Austin, ⊤X, officeholder living expense s Before Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H Gharakhanian, Stephanie	Office held

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	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 h	ow to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 4/45 Rpt: 9/50	Workers Defense Action Fund PAC		00083026
4 Date	5 Payee name		
10/18/2018	Arguello, Aaron		
	-	Zin Codo	
6 Amount (\$)		Zip Code	
\$491.11	1137 MANSELL AVE	•	,
Expenditure from corporate funds	Austin, TX 78721		
8 PURPOSE	(a) Category (See Categories listed at the top of this sche	dule) (b) Description	
OF TARREST OF	Salaries/Wages/Contract Labor	· · · · · ·	outside of Texas. Complete Schedule T.
EXPENDITURE	, .	Check if Austin,	TX, officeholder living expense
	,	Wages Before	e Taxes
9 Complete ONLY if direct		ffice sought	Office held
expenditure to benefit C/OI	¹ Cole, Sheryl S	tate Representative Distri	ict 46
Date	Payee name		
10/18/2018	Arguello, Aaron	•	
		7 0	
Amount (\$)		Zip Code	
\$491.11	1137 MANSELL AVE		
Expenditure from corporate funds	Austin, TX 78721		· :
PURPOSE	(a) Category (See Categories listed at the top of this sche	dule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel of	outside of Texas. Complete Schedule T.
EXPERDITORE		i -	TX, officeholder living expense
		Wages Before	e Taxes
Complete ONLY if direct		ffice sought	Office held
expenditure to benefit C/O	Conway Jr., Lewis		•
Date	Payee name	 	
10/18/2018	Arguello, Aaron		
·		Zip Code	
Amount (\$) \$491.11	1137 MANSELL AVE	Elp Gode	
Ф 4 31,11	1137 MANGELE AVE		•
Expenditure from			
corporate funds	Austin, TX 78721		
PURPOSE	(a) Category (See Categories listed at the top of this sche	dule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	اسما	outside of Texas, Complete Schedule T.
			. TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/O	·, ·	ffice sought	Office held
experience to belief C/Of	Gharakhanian, Stephanie		
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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:	
Sch: 5/45 Rpt: 10/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/04/2018	Arguello, Aaron
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$491.11	1137 MANSELL AVE
Expenditure from corporate funds	Austin, TX 78721
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 Wages Before Taxes
	wages before taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/04/2018	Arguello, Aaron
Amount (\$)	Payee address; City; State; Zip Code
\$491.11	1137 MANSELL AVE
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
,	Wages Before Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Conway Jr., Lewis
Date	Payee name
10/04/2018	Arguello, Aaron
Amount (\$)	Payee address; City; State; Zip Code
\$491.11	1137 MANSELL AVE
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
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Wages Before Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Gharakhanian, Stephanie
	Version VI 0 620

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment			ards/Memonals Exper Services			e . /Contract Labor		OTHER (enter	nstrict a category not listed	above)
	Credit Card Fayment	. –	The I	nstruction Guide e	explains how to co	omplé	ete this form.				
1	Total pages Schedule F1:	2 FI	ILER NAME					3	Filer ID	(Ethics Commi	ssion Filers)
	Sch: 6/45 Rpt: 11/50	W	Vorkers Defense	e Action Fund F	PAC			·	00083026		
4	Date	5 Pa	ayee name	,	,						
	10/24/2018		VS Pharmacy							•	
6	Amount (\$)	7 P	ayee address;	City;	State; Zip Co	ode	· · · · · · · · · · · · · · · · · · ·				
•	\$3.09		701 Briarcliff Bl	•			•				
	75.55				_						
Г	Expenditure from	_	uctin TV 79723	.							
<u> </u>	d corporate funds		ustin, TX 78723			la.					•
8	PURPOSE . OF		ategory (See Cate			(b)	Description				•
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							Canvassing s			,	
							ŭ	•	•		
9	Complete ONLY if direct	Cai	ndidate/Officeholo	der name	Office sou	iaht	<u> </u>		Office h	neld	
	expenditure to benefit C/OI		le, Sheryl			•	entative Distr	ict 4			
_	5 :					_					
	Date		ayee name		•					,	
	10/24/2018	٥	VS Pharmacy		<u>.</u>					· .	
	Amount (\$)	[ayee address;	City;	State; Zip Co	ode					
	\$3.09	1	701 Briarcliff Bl	vd.							
_	T Expenditure from									-	
L	corporate funds	Α	ustin, TX 78723	3	-						•
	PURPOSE	(a) C	ategory (See Cate	cories listed at the top	of this schedule)	(b)	Description			•	
	OF EXPENDITURE		ffice Overhead				Check if travel	outsi	de of Texas. Cor	mplete Schedule T.	
	EXPENDITORE						ш		officeholder livin	ng expense	
							Canvassing s	sup	plies		
					-						
	Complete ONLY if direct expenditure to benefit C/OI		ndidate/Officehold		Office sou	ught			Office h	neld .	•
		. Co	nway Jr., Lewis	· .	·						
	Date		ayee name								
	10/24/2018	С	VS Pharmacy				÷ ,				
	Amount (\$)	P	ayee address;	City:	State; Zip Co	ode					
	\$3.09	1	701 Briarcliff Bl	∕d.				•.			
	- F 19										
	Expenditure from corporate funds	А	ustin, TX 78723	3						•	
	PURPOSE	(a) C	ategory (See Cate	nories listed at the ten	of this schedule)	(b)	Description .				
	OF		office Overhead			Ι΄΄		outsi	de of Texas. Cor	mplete Schedule T.	
	EXPENDITURE			i de estas	•		_		officeholder livin	ig expense	
				•			Canvassing s	sup	plies		
					•	L					
	Complete ONLY if direct		ndidate/Officehole		Office sou	ught			Office h	eld	
	expenditure to benefit C/O	ן Gh	arakhanian, Ste	ephanie							

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

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

Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries The Instruction Guide explains how to o	OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/45 Rpt: 12/50	Workers Defense Action Fund PAC	00083026
4 Date	5 Payee name	
10/24/2018	Convergence Targeted Communications	
\$5,000.00 Expenditure from corporate funds	7 Payee address; City; State; Zip C 1221 Connecticut Ave NW Suite 300 Washington, DC 20036	Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ad Design
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ought Office held
Date	Payee name	
10/10/2018	Domino's	
Amount (\$) \$11.04 Expenditure from corporate funds	Payee address; City; State; Zip 0 5811 Berkman Dr Suite 134 Austin, TX 78723	Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food for Canvassers
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so H Cole, Sheryl State R	ought Office held epresentative District 46
Date 10/10/2018	Payee name Domino's	
Amount (\$) \$11.04 Expenditure from corporate funds PURPOSE	Payee address; City; State; Zip C 5811 Berkman Dr Suite 134 Austin, TX 78723 (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 Food for Canvassers
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H Conway Jr., Lewis	ought Office held

SCHEDULE F1

CONTRIBUTION			•	٠				-	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		EXPENDITURE CA Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expens Legal Services The Instruction Guide ex	Loan Re Office O Polling E Printing Salaries	payment verhead/ Expense Expense Wages/(Reimbursement Rental Expense Contract Labor		Transportation E Travel in District Travel Out of Dis		,
1 Total pages Schedule F1:	2 FILER NAMI					3	Filer ID	(Ethics Commi	ssion Filers)
Sch: 8/45 Rpt: 13/50	Workers De	efense Action Fund P.	AC				00083026		
4 Date 10/10/2018	5 Payee name Domino's	•		,					•
6 Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode	•				
\$11.04	5811 Berkr	· -	• •		•				
-	Suite 134	•							
Expenditure from corporate funds	Austin, TX	78723							
8 PURPOSE OF EXPENDITURE		ee Categories listed at the top or rage Expense	f this schedule)		_	ı, TX,	officeholder living	plete Schedule T. g expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	•	iceholder name an, Stephanie	Office so	ught			Office he	eld	:
Date	Payee name						••		
10/22/2018	El Rancho		•						
Amount (\$)	Payee addre	ss; City;	State; Zip C	ode	•	-			
\$4.59	6800 Berkr	nan Dr.							
Expenditure from corporate funds	Austin, TX	78723							
PURPOSE		ee Categories listed at the top o	f this schedule)	(b) I	Description				
OF EXPENDITURE	Food/Beve	rage Expense		[_		de of Texas. Com officeholder living	plete Schedule T.	
					Food for Can			CAPETISE	
,									
Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office so State R	-	entative Distr	rict 4	Office he	eld	
Date	Payee name								
10/22/2018	El Rancho				•				
Amount (\$)	Payee addre	ess; City;	State: Zip C	ode			•	·	
\$4.59	6800 Berkr	nan Dr.							
Expenditure from corporate funds	Austin, TX	78723							
PURPOSE OF EXPENDITURE		iee Categories listed at the top or rage Expense	f this schedule)			n. TX,	officeholder living	plete Schedule T. g expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		iceholder name Lewis	Office so	ught			Office he	eld	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Solicitation/Fundraising Expense 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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/45 Rpt: 14/50	Workers Defense Action Fund PAC	00083026
4 Date	5 Payee name	· · · · · · · · · · · · · · · · · · ·
10/22/2018	El Rancho	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$4.59	6800 Berkman Dr.	
Expenditure from corporate funds	Austin, TX 78723	·
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 Food for Canvassers
	·	Toda for darradderd
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		· · · · · · · · · · · · · · · · · · ·
Data	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
Date 10/18/2018	Payee name Gallegos, Sonia	
		·
Amount (\$)	Payee address; City; State; Zip Code 400 W ST ELMO ROAD	
\$153.33		
Expenditure from	#329	•
corporate funds	Austin, TX 78745	<u> </u>
PURPOSE OF	* , (===================================	Description
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder tiving expense
		Wages Before Taxes
		,
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		sentative District 46
Date	Payee name	
10/18/2018	Gallegos, Sonia	
	Payee address; City; State; Zip Code	
Amount (\$) \$153.33	400 W ST ELMO ROAD	
Ψ105,33	#329	:
:Expenditure from		
corporate funds	Austin, TX 78745	
PURPOSE OF		Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor	Check if Austin, TX, officeholder living expense
		Wages Before Taxes
		•
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		•
1	•	

SCHEDULE F1

Advertision Evnense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
đ. Tatal wawaa Cabadyila E1.	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 10/45 Rpt: 15/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/18/2018	Gallegos, Sonia
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$153.33	400 W ST ELMO ROAD
Ψ135.55	
Expenditure from	#329
corporate funds	Austin, TX 78745
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Wages Before Taxes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Gharakhanian, Stephanie
Date	Payee name
10/04/2018	Gallegos, Sonia
Amount (\$)	Payee address; City; State; Zip Code
\$213.34	400 W ST ELMO ROAD
Φ213.34	•
Expenditure from	#329
corporate funds	Austin, TX 78745
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
, EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Wages Before Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Cole, Sheryl State Representative District 46
Date	Payee name
10/04/2018	Galfegos, Sonia
Amount (\$)	Payee address; City; State; Zip Code
\$213.34	400 W ST ELMO ROAD
Φ213.34	·
Expenditure from	#329
corporate funds	Austin, TX 78745
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Wages Before Taxes
· ·	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Conway Jr., Lewis

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

Candidate/Officeholder/Politica Credit Card Payment	I 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: 11/45 Rpt: 16/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/04/2018	Gallegos, Sonia
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$213.34	400 W ST ELMO ROAD
	#329
Expenditure from corporate funds	Austin, TX 78745
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
	Wages Before Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Gharakhanian, Stephanie
Date	Payee name
10/18/2018	Gertz, Elizabeth
Amount (\$)	Payee address; City; State; Zip Code
\$118.83	1300 CROSSING PLACE
4220100	#2732
Expenditure from	
corporate funds	Austin, TX 78741
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
•	Wages Before Taxes
· · · · · · · · · · · · · · · · · · ·	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
anpondado la Banan ara	Cole, Sheryl State Representative District 46
Date	Payee name
10/18/2018	Gertz, Elizabeth
Amount (\$)	Payee address; City; State, Zip Code
\$118.83	1300 CROSSING PLACE
	#2732
Expenditure from	
corporate funds	Austin, TX 78741
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
	Wages Before Taxes
	Trages before Taxes
Complete ONLY if die	Condidate/Officeholder name Office pought
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Conway Jr., Lewis

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) 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	- Gif I Committee Leg	od/Beverage Expense //Awards/Memorials Expense pal Services le Instruction Guide explai		iense iges/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not liste	ed above)
1 Total pages Schedule F1:	2 FILER NAME				3 Filer ID (Ethics Com	mission Filers)
Sch: 12/45 Rpt: 17/50	Workers Defe	nse Action Fund PAC	•		00083026	
4 Date	5 Payee name				- !	
10/18/2018	Gertz, Elizabe	th				
6 Amount (\$)	7 Payee address;	City; Sta	ate; Zip Cod	e	•	
\$118.83	1300 CROSSI	•	•		•	
	#2732			•		
Expenditure from corporate funds	Austin, TX 787	741 ·				•
8 PURPOSE		· .	10	b) Description		
OF		ategories listed at the top of this es/Contract Labor	schedule)		el outside of Texas, Complete Schedule T	•
EXPENDITURE	Ouralloo, wage	o com acc East		Check if Aust	tin, TX, officeholder living expense	
		•		Wages Befo	ore Taxes	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officel Gharakhanian,		Office soug	ht .	Office held	
Date	Payee name	. · · · · · · · · · · · · · · · · · · ·	•			
10/04/2018	Gertz, Elizabe	th				٠
Amount (\$)	Payee address;	City; St	ate; Zip Cod	e	•	
\$187.29	.1300 CROSSI	NG PLACE	÷			
•	#2732			•		
Expenditure from corporate funds	Austin, TX 787	741				
PURPOSE		Categories listed at the top of this	cobadulo) (b) Description	· · · · · · · · · · · · · · · · · · ·	
OF		es/Contract Labor	surieutie)		el outside of Texas. Complete Schedule T	
EXPENDITURE					tin, TX, officeholder living expense	1
				Wages Befo	ore Taxes	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Office	nolder name	Office sough		Office held	:
	Cole, Sheryl		State Rep	resentative Dis	UTICL 46	÷
Date	Payee name				•	
10/04/2018	Gertz, Elizabe	th				-
Amount (\$)	Payee address:	=	ate: Zip Cod	le		•
\$187.29	1300 CROSSI	NG PLACE			•	
Expenditure from	#2732			-		
corporate funds	Austin, TX 787	741				
PURPOSE	(a) Category (See C	Categories listed at the top of this	schedule) (b) Description	•	
OF EXPENDITURE	Salaries/Wage	es/Contract Labor			el outside of Texas, Complete Schedule T	
·				Wages Befo	tin, TX, officeholder living expense	. 1
]			
Complete ONLY if direct	Candidate/Officel	nolder name	Office soug	ht	Office held	
expenditure to benefit C/O			55 55 39		223 11019	
_		,			<u> </u>	
				÷ .		
I		i.				

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 13/45 Rpt: 18/50	2 FILER NAME (3 Filer ID (Ethics Commission Filers) Workers Defense Action Fund PAC 00083026
•	
4 Date	5 Payee name
10/04/2018	Gertz, Elizabeth
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$187.29	1300 CROSSING PLACE
Expenditure from	#2732
corporate funds	Austin, TX 78741
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
	Wages Before Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Gharakhanian, Stephanie
Date	Payee name
10/01/2018	Google Suites
Amount (\$)	Payee address; City; . State; Zip Code
\$16.87	1600 Amphitheatre Parkway
Expenditure from	
corporate funds	Mountainview, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense Email and Server services
	Entail and deriver derivered
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	4
Date	Payee name
10/26/2018	H-E-B
Amount (\$)	Payee address; City; State; Zip Code
\$17.35	1801 E. 51st
, , , , ,	
Expenditure from corporate funds	Austin, TX 78723
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 Food for Canvassers
·	1 odd fol oddyddodio
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
	·
	·

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

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: 14/45 Rpt: 19/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/26/2018	H-E-B
6 Amount (\$)	7 Payee address; City: State; Zip Code
\$17.35	1801 E. 51st
Expenditure from corporate funds	Austin, TX 78723
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Food for Canvassers
	7 554 151 541 1435515
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/26/2018	H-E-B
Amount (\$)	Payee address; City; State; Zip Code
\$17.35	1801 E. 51st
Expenditure from corporate funds	Austin, TX 78723
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF SYDENDITUDE	Food/Beverage Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Food for Canvassers
	· · · · · · · · · · · · · · · · · · ·
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Gharakhanian, Stephanie
Date	Payee name
10/16/2018	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$115.43	1801 East 51st Stret
·	·
Expenditure from corporate funds	Austin, TX 78723
·	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Canvassing supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Cole, Sheryl State Representative District 46
I	

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica	
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: 15/45 Rpt: 20/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/16/2018	HEB
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$115.43	1801 East 51st Stret
	·
Expenditure from corporate funds	Austin, TX 78723
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVEN PLANTE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Canvassing supplies
	·
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to belief erec	Conway Jr., Lewis
Date	Payee name
10/16/2018	HEB
Amount (\$)	Payee address; City; State; Zip Code
\$115.43	1801 East 51st Stret
Expenditure from	
corporate funds	Austin, TX 78723
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Canvassing supplies
•	Canvassing subplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
0-1-	
Date 10/22/2018	Payee name HEB
•	
Amount (\$)	Payee address; City; State; Zip Code
\$13.13	1801 E. 51st
Expenditure from	
corporate funds	Austin, TX 78723
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Food for Canvassers
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

		EXPENDITUR	E CATEGOR	RIES FOR	≀во	X 8(a)				-
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Poli Credit Card Payment		Event Expense Fees Food/Beverage Expen Gift/Awards/Memorials Legal Services	.· se	Loan Repa Office Over Polling Exp Printing Ex	ymen rhead pense cpense	t/Reimbursement /Rental Expense		Transportation E Travel in District Travel Out of Di		ed Expense
Cledit Card Payment		The Instruction G	uide explains l	how to cor	mplet	te this form.	_			
1 Total pages Schedule F	.: 2 FILER NAM	IE .	. 				3	Filer ID	(Ethics Comr	nission Fi l ers)
Sch: 16/45 Rpt: 21/50	Workers D	efense Action Fu	ind PAC			•		00083026	*	
4 Date 10/22/2018	5 Payee nam HEB	е								
6 Amount (\$)	7 Payee addr	ess; City;	State;	Zip Cod	de					
\$13.13	_	_		·						
Expenditure from corporate funds	Austin, TX	78723	1				-			
8 PURPOSE OF EXPENDITURE		See Categories listed at t erage Expense	he top of this sche	edule) 	 	= '	n, TX,	, afficeholder living	iplete Schedule T. g expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/		ficeholder name Lewis	· O	Office souç	ght			Office h	eld	
Date	Payee nam	е								
10/22/2018	HEB					•				
Amount (\$)	Payee addr 3 1801 E. 53	-	State;	Zip Cod	de					
Expenditure from corporate funds	Austin, TX	78723			•					
PURPOSE OF EXPENDITURE		See Categories listed at t Prage Expense	he top of this sche	edule)		<u> </u>	n, TX,	, officeholder livin	iplete Schedule T. g expense	
Complete ONLY if direct expenditure to benefit Co	O. I	fficeholder name an, Stephanie	C	Office soug	ght		•	Office h	eld	
Date	Payee nam	e								
10/24/2018	Harland C	larke				•				
Amount (\$) \$158.6	Payee addr 7 15955 La	ess; City; Cantera Parkway	•	Zip Cod	de					
Expenditure from corporate funds	San Antor	io, TX 78256								•
PURPOSE OF EXPENDITURE	(a) Category (Accounting	See Categories listed at t g/Banking	he top of this sche	edule)			n, TX,	ide of Texas. Com	iplete Schedule T. g expense	· .

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Office held

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

Candidate/Officeholder/Politica Credit Card Payment	I 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: 17/45 Rpt: 22/50	Workers Defense Action Fund PAC 00083026	
4 Date	5 Payee name	
10/04/2018 ·	Horn, Selene	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$42.63	4605 CEDAR POINT DRIVE	
Expenditure from corporate funds	Austin, TX 78723	
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	
•	Wages Before Taxes	
6 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	and the state of the	
<u> </u>	Ode, Sheryi State Representative District 40	
Date	Payee name	
10/04/2018	Horn, Selene	
Amount (\$)	Payee address; City; State; Zip Code	
\$42,63	4605 CEDAR POINT DRIVE	
Expenditure from corporate funds	Austin, TX 78723	
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	
•	Wages Before Taxes	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	Conway Jr., Lewis	
Date	Payee name	
10/04/2018	Horn, Selene	
Amount (\$)	Payee address; City; State; Zip Code	
\$42.63	4605 CEDAR POINT DRIVE	
,		
Expenditure from corporate funds	Austin, TX 78723	
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 Wages Before Taxes	
	vvayes before Taxes	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		
	оналаманан, этернане	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Polling Expense Travel in District Printing Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 18/45 Rpt: 23/50 Workers Defense Action Fund PAC 00083026 4 Date Payee name 10/26/2018 Huerta, Mayra 6 Amount (\$) Payee address; State; Zip Code City: \$32.15 1803 E ANDERSON LANE #2133 Expenditure from Austin, TX 78752 corporate funds PURPOSE 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Canvassing supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Cole, Sheryl State Representative District 46 Date Payee name 10/26/2018 Huerta, Mayra .Amount (\$) Payee address; City: State; Zip Code \$32.15 1803 E ANDERSON LANE #2133 Expenditure from Austin, TX 78752 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Canvassing supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Conway Jr., Lewis Date Payee name 10/26/2018 Huerta, Mayra Amount (\$) Payee address; City: State; Zip Code \$32.15 1803 E ANDERSON LANE #2133 Expenditure from Austin, TX 78752 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Canvassing supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Gharakhanian, Stephanie

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

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: 19/45 Rpt: 24/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/25/2018	Intuit QuickBooks
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15.99	2632 Marine Way
Expenditure from corporate funds	Mountainview, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
·	Accounting software
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H
Date	Payee name
10/18/2018	Johnson, Elbert
Amount (\$)	Payee address; City; State; Zip Code
\$7.75	6507 AUBURNDALE ST
Expenditure from corporate funds	Austin, TX 78723
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Wages Before Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	
Date	Payee name
10/18/2018	Johnson, Elbert
Amount (\$)	Payee address; City; State; Zip Code
\$23.25	6507 AUBURNDALE ST
Expenditure from	
corporate funds	Austin, TX 78723
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 Wages Before Taxes
,	vvayes before taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 20/45 Rpt: 25/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/18/2018	Johnson, Elbert
6 Amount (\$)	7 Payee address; City, State; Zip Code
\$23.25	6507 AUBURNDALE ST
Expenditure from corporate funds	Austin, TX 78723
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 Wages Before Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held Gharakhanian, Stephanie
Date	Payee name
10/04/2018	Johnson, Elbert
Amount (\$)	Payee address; City; State; Zip Code
\$107.21	6507 AUBURNDALE ST
Expenditure from corporate funds	Austin, TX 78723
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wages Before Taxes
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held Cole, Sheryl State Representative District 46
Date	Payee name
10/04/2018	Johnson, Elbert
Amount (\$)	Payee address; City; State; Zip Code
\$107.21	6507 AUBURNDALE ST
Expenditure from corporate funds	Austin, TX 78723
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Wages Before Taxes
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held Conway Jr., Lewis
,	

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	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: 21/45 Rpt: 26/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/04/2018	Johnson, Elbert
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$107.21	6507 AUBURNDALE ST
Expenditure from corporate funds	Austin, TX 78723
·	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Mages/Contract Lahor 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
	Wages Before Taxes
	77.agus 2010.10 7.a.100
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onpolitations to belieft of of	Gharakhanian, Stephanie
Date	Payee name
10/13/2018	La Michoacana
Amount (\$)	Payee address; City; State; Zip Code
\$1,44	5706 Manor Road
Φ1, 44	
Expenditure from	Suite-B
corporate funds	Austin, TX 78723
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.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Food for Canvassers
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Cole, Sheryl State Representative District 46
Date	Payno namo
•	Payee name
10/13/2018	La Michoacana
Amount (\$)	Payee address; City; State; Zip Code
\$1.44	5706 Manor Road
	Suite B
Expenditure from corporate funds	Austin, TX 78723
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Food for Canvassers
	332 (3) 333333.3
Commission Chill M St. off	Condidate Office holder name Office pought
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Conway Jr., Lewis

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 22/45 Rpt: 27/50	2 FILER NAME Workers Defense Action Fund PAC 3 Filer ID (Ethics Commission Filers) 00083026
·	
4 Date	5 Payee name
10/13/2018	La Michoacana
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1.44	5706 Manor Road
	Suite B
Expenditure from corporate funds	Austin, TX 78723
8 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	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Food for Canvassers
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/27/2018	La Michoacana
Amount (\$)	Payee address; City; State; Zip Code
\$2,90	6908 Cameron Rd.
Expenditure from corporate funds	Austin, TX 78752
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 Food for Canvassers
	Food for Carryassers
	· · · · · · · · · · · · · · · · · · ·
Complete <u>QNLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
expenditure to benefit Gro	Cole, Sheryl State Representative District 46
Date	Payee name
10/27/2018	La Michoacana
Amount (\$)	Payee address; City; State; Zip Code
\$2.90	6908 Cameron Rd.
\$2,00	,
Expenditure from corporate funds	Austin, TX 78752
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.
CAI CHOITOILE	Check if Austin, TX, officeholder living expense
	Food for Canvassers
·	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Conway Jr., Lewis
,	
Forms provided by Toyas F	thise Commission Various others state by us

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

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

Travel Out of District

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: 23/45 Rpt: 28/50	Workers Defense Action Fund PAC 00083026	
4 Date	5 Payee name	
10/27/2018	La Michoacana	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2.90	6908 Cameron Rd.	
Expenditure from corporate funds	Austin, TX 78752	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Food/Beverage Expense	
	Check if Austin, TX, officeholder living expense	
	Food for Canvassers	
-		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oi	Candidate/Officeholder name Office sought Office held	
experientare to benefit or or	Gharakhanian, Stephanie	
Date	Payee name	
10/18/2018	Llovera, Javier	
Amount (\$)	Payee address; City; State; Zip Code	
\$49.08	1705 CROSSING PLACE	
	#106A	
Expenditure from corporate funds	Austin, TX 78741	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Mages/Contract Lahor 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	
Wages Before Taxes		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	Cole, Sheryl State Representative District 46	
Date	Davisa nama	
10/18/2018	Payee name Llovera, Javier	
Amount (\$)	Payee address; City; State; Zip Code	
\$49.08	1705 CROSSING PLACE	
Expenditure from	#106A	
corporate funds	Austin, TX 78741	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	
En Environ	Check if Austin, TX, officeholder living expense	
	Wages Before Taxes	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experiordire to better C/OH Conway Jr., Lewis		
· '		
'		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica	
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: 24/45 Rpt: 29/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/18/2018	Llovera, Javier
6 Amount (\$)	7 Payee address; City, State; Zip Code
\$49.08	1705 CROSSING PLACE
	#106A
Expenditure from corporate funds	Austin, TX 78741
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI EXIDITORE	Check if Austin, TX, officeholder living expense
•	Wages Before Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Doto	
Date 10/04/2018	Payee name Llovera, Javier
Amount (\$) \$140,79	Payee address; City; State; Zip Code 1705 CRÓSSING PLACE
Φ140.13	
Expenditure from	#106A
corporate funds	Austin, TX 78741
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
	Wages Before Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OF	1 Cole, Sheryl State Representative District 46
Date	Payee name
10/04/2018	Llovera, Javier
Amount (\$)	Payee address; City; State; Zip Code
\$140.79	1705 CROSSING PLACE`
Expenditure from	#106A
corporate funds	Austin, TX 78741
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 Wages Before Taxes
	Truges before tunes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OF	
	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By
Condidate/Officeholder/Political Cor

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 Salaries/Wages/Contract Labor

Cardidate/Oniceriolder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:			
Sch: 25/45 Rpt: 30/50	Workers Defense Action Fund PAC 00083026		
4 Date	5 Payee name		
10/04/2018	Llovera, Javier		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$140.79	1705 CROSSING PLACE		
	#106A		
Expenditure from corporate funds	Austin, TX 78741		
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 Wages Before Taxes		
	Viagos Bolois Viales		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O			
Date _.	Payee name		
10/18/2018	Mefford, Charles		
Amount (\$)	Payee address; City; State; Zip Code		
\$303.54	11316 JOLLYVILLE RD		
	#212		
Expenditure from corporate funds	Austin, TX 78759		
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		
	Wages Before Taxes		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Date	Payee name		
10/18/2018	Mefford, Charles		
Amount (\$)	Payee address; City; State; Zip Code		
\$303.54	11316 JOLLYVILLE RD		
+	#212		
Expenditure from corporate funds	Austin, TX 78759		
PURPOSE			
OF .	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Wages Before Taxes		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O	H Conway Jr., Lewis		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Accounting/Banking Fees Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 26/45 Rpt: 31/50 Workers Defense Action Fund PAC 00083026 4 Date Payee name 10/18/2018 Mefford, Charles 6 Amount (\$) Payee address: City: State: Zip Code \$303.53 11316 JOLLYVILLE RD #212 Expenditure from corporate funds Austin, TX 78759 **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages Before Taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Gharakhanian, Stephanie Date Payee name 10/04/2018 Mefford, Charles Payee address; Amount (\$) City: State: Zip Code \$312.58 11316 JOLLYVILLE RD #212 Expenditure from Austin, TX 78759 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages Before Taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Cole, Sheryl State Representative District 46

\$312.58

Payee name

#212

Mefford, Charles
Payee address;

Austin, TX 78759

11316 JOLLYVILLE RD

Candidate/Officeholder name

Conway Jr., Lewis

City:

(a) Category (See Categories listed at the top of this schedule)

Salaries/Wages/Contract Labor

Date

10/04/2018

Amount (\$)

Expenditure from

OF

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

corporate funds

State; Zip Code

Office sought

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

Wages Before Taxes

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

Candidate/Officeholder/Politica Credit Card Payment		Salaries/Wages/Contract Labor xplains how to complete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 27/45 Rpt: 32/50	Workers Defense Action Fund P	AC	00083026
4 Date	5 Payee name		
10/04/2018	Mefford, Charles	·.	
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
\$312.58	11316 JOLLYVILLE RD		
Formandia was forma	#212		
Expenditure from corporate funds	Austin, TX 78759		
8 PURPOSE	(a) Category (See Categories listed at the top of	of this schedule) (b) Description	,
OF EXPENDITURE	Salaries/Wages/Contract Labor		outside of Texas. Complete Schedule T.
	•	-	n, TX, officeholder living expense
		Wages Befor	re raxes
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name H. Gharakhanian, Stephanie	Office sought	. Office held
Date	Рауее пате		
10/18/2018	Mendez, Silke		•
Amount (\$)	Payee address; City;	State; Zip Code	
\$68.46	600 BARWOOD PARK		
	#600		
Expenditure from corporate funds	Austin, TX 78753	•	
PURPOSE	(a) Category (See Categories listed at the top of	of this schedule) (b) Description	-
OF EXPENDITURE	Salaries/Wages/Contract Labor		outside of Texas. Complete Schedule T.
		Wages Befor	n, TX, officeholder living expense
		vvages belok	ic raics
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/O	H Cole, Sheryl	State Representative Distr	•
,	·	'	
Date	Payee name		
10/18/2018	Mendez, Silke		· .
Amount (\$)	Payee address; City;	State; Zip Code	
\$68.46	600 BARWOOD PARK	•	
Expenditure from	#600		
corporate funds	Austin, TX 78753		. ·
PURPOSE	(a) Category (See Categories listed at the top of	of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor		outside of Texas. Complete Schedule T.
LAILIBITORE	1	<u> </u>	n, TX, officeholder living expense
	1.	Wages Before	re raxes
	<u> </u>		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held
experiorare to belieff C/O	H Conway Jr., Lewis		·
		·	

SCHEDULE F1

	EXPENDITURE CATEGOR	RIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	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)
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
Sch: 28/45 Rpt: 33/50	Workers Defense Action Fund PAC		00083026
4 Date	5 Payee name		
10/18/2018	Mendez, Silke	. • •	
6 Amount (\$) \$68.46 Expenditure from corporate funds	7 Payee address; City; State; 600 BARWOOD PARK #600 Austin, TX 78753	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	Check if travel outs	side of Texas. Complete Schedule T. (, officeholder living expense 「axes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ffice sought	Office held
Date	Payee name		
10/04/2018	Morales, Nancy		
Amount (\$) \$105.92 Expenditure from corporate funds	Payee address; City; State; PO BOX 4636 Austin, TX 78765	Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	Check if travel outs	side of Texas. Complete Schedule T. K, officeholder living expense Faxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	•	office sought State Representative District	Office held 46
Date 10/04/2018	Payee name Morales, Nancy		
Amount (\$) \$105.92	Payee address; City; State; PO BOX 4636	Zip Code	
corporate funds	Austin, TX 78765		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	Check if travel outs	side of Texas. Complete Schedule T. (, officeholder living expense Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		office sought	Office held

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

Candidate/Officeholder/Politica Credit Card Payment	I 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: 29/45 Rpt: 34/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/04/2018	Morales, Nancy
6 Amount (\$)	7 Payee address; City; State: Zip Code
\$105.92	PO BOX 4636
— Eunanditura fran	
Expenditure from corporate funds	Austin, TX 78765
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Wages Before Taxes
	Tragge Belove Taxos
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	
10/09/2018	Payee name Morales
Amount (\$)	Payee address; City; State; Zip Code
\$97.82	PO BOX 4636
Expenditure from corporate funds	Austin, TX 78765
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
	Wages
Commission ONII Wife discont	On all date / Office health a market
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H Cole, Sheryl State Representative District 46
	State Representative District 40
Date	Payee name
10/09/2018	Morales
Amount (\$)	Payee address; City; State; Zip Code
\$97.82	PO BOX 4636
Expenditure from	
corporate funds	Austin, TX 78765
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 Wages
	vvayes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
	· · · · · · · · · · · · · · · · · · ·
·	

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Fees

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Polling Expense Printing Expense Salaries/Wages/Contract Labor row to complete this form.	Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
Sch: 30/45 Rpt: 35/50	Workers Defense Action Fund PAC		00083026
4. Date	5 Payee name		
10/09/2018	Morales		
6 Amount (\$)		Zip Code	
\$97.82	PO BOX 4636		
Expenditure from corporate funds	Austin, TX 78765		· · · · · · · · · · · · · · · · · · ·
8 PURPOSE OF	(a) Category (See Categories listed at the top of this sche		
EXPENDITURE	Salaries/Wages/Contract Labor	<u> </u>	tside of Texas. Complete Schedule T. X, officeholder living expense
		Wages	
			·
9 Complete ONLY if direct		ffice sought	Office held
expenditure to benefit C/OI	H Gharakhanian, Stephanie		,
Date	Payee name		
10/18/2018	Munoz, Manuel		
Amount (\$)	l	Zip Code	
\$96.87	9121 NORTH PLAZA	•	•
Expenditure from	#925		
corporate funds	Austin, TX 78753		
PURPOSE OF	(a) Category (See Categories listed at the top of this sche		teide of Tours Complete Cabrillia T
EXPENDITURE .	Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. X, officeholder living expense
		Wages Before	
<u>, </u>			* *.
Complete ONLY if direct		ffice sought	Office held
expenditure to benefit C/OI	H Cole, Sheryl S	tate Representative Distric	t 46
Date	Payee name		
10/18/2018	Munoz, Manuel	·	
Amount (\$)	l , *	Zip Code	· · · · · · · · · · · · · · · · · · ·
\$96.87	9121 NORTH PLAZA		•
Expenditure from	#925	·	;
corporate funds	Austin, TX 78753	· · · · · · · · · · · · · · · · · · ·	
PURPOSE OF	(a) Category (See Categories listed at the top of this sche		teirle of Tayge Complain Cabadida T
EXPENDITURE	Salaries/Wages/Contract Labor	<u> </u>	tside of Texas. Complete Schedule T. X, officeholder living expense
		Wages Before	
Complete ONLY if direct expenditure to benefit C/O		ffice sought	Office held
	÷	•	,
==================================	All the Comment of th		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling 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: 31/45 Rpt: 36/50	Workers Defense Action Fund PAC (Etnics Commission Filers) 00083026		
4 Date	5 Payee name		
10/18/2018	Munoz, Manuel		
6 Amount (\$)	7 Payee address; City, State, Zip Code		
\$96.87	9121 NORTH PLAZA		
•	#925		
Expenditure from corporate funds	Austin, TX 78753		
·	· · · · · · · · · · · · · · · · · · ·		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Salaries/Wages/Contract Labor		
	Check if Austin, TX, officeholder living expense		
'	Wages Before Taxes		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI	Gharakhanian, Stephanie		
Date	Power name		
10/04/2018	Payee name		
10/04/2018	Munoz, Manuel		
Amount (\$)	Payee address; City; State; Zip Code		
\$20.67	9121 NORTH PLAZA		
	#925		
Expenditure from	Austin, TX 78753		
corporate funds	The state of the s		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Salaries/Wages/Contract Labor		
	Check if Austin, TX, officeholder living expense		
	Wages Before Taxes		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI	Cole, Sheryl State Representative District 46		
Date	Payee name		
10/04/2018	Munoz, Manuel		
Amount (\$)	Payee address; City; State, Zip Code		
\$20.67	9121 NORTH PLAZA		
	#925		
Expenditure from corporate funds	Austin, TX 78753		
·			
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	Salaries/Wages/Contract Labor		
	Wages Before Taxes		
	Trages Belote Taxes		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
experimente to benefit C/O	Conway Jr., Lewis		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Solicitation/Fundraising Expense Advertising Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Accounting/Banking Transportation Equipment & Related Expense Food/Beverage Expense Consulting Expense Travel in District Contributions/ Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 32/45 Rpt: 37/50 Workers Defense Action Fund PAC 00083026 4 Date 5 Payee name 10/04/2018 Munoz, Manuel 6 Amount (\$) Payee address; City: State; Zip Code \$20.67 9121 NORTH PLAZA #925 Expenditure from Austin, TX 78753 corporate funds PURPOSE 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages Before Taxes Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Gharakhanian, Stephanie Date Payee name 10/18/2018 Olvera, Maria Amount (\$) Payee address; State; Zip Code City; \$126.58 900 BROKEN FEATHER #170 Expenditure from Pflugerville, TX 78660 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages Before Taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Cole, Sheryl State Representative District 46 Payee name 10/18/2018 Olvera, Maria Amount (\$) Pavee address: City: State; Zip Code \$126.58 900 BROKEN FEATHER #170 Expenditure from Pflugerville, TX 78660 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages Before Taxes

Candidate/Officeholder name

Conway Jr., Lewis

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Office held

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

Candidate/Officenolder/Politica 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: 33/45 Rpt: 38/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/18/2018	Olvera, Maria
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$126.58	900 BROKEN FEATHER
	#170
Expenditure from corporate funds	`Pflugerville, TX 78660
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
	Wages Before Taxes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
expenditure to benefit Cros	Gharakhanian, Stephanie
Date	Payee name
10/26/2018	Oriental Express
Amount (\$)	Payee address; City; State; Zip Code
\$18.19	7517 Cameron Rd. #130
Expenditure from corporate funds	Austin, TX 78752
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
··	Food for Canvassers
•	·
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Cole, Sheryl State Representative District 46
Date	Payee name
10/26/2018	Oriental Express
Amount (\$)	Payee address; City; State; Zip Code
\$18.19	7517 Cameron Rd. #130
210.12	1011 Guilletoff Nu. #130
Expenditure from	
corporate funds	Austin, TX 78752
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
	Check if Austin, TX, officeholder living expense
٠.	Food for Canvassers
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H Conway Jr., Lewis
	<u>. </u>

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 34/45 Rpt: 39/50	Workers Defense Action Fund PAC 00083026
4 Date 10/26/2018	5 Payee name Oriental Express
6 Amount (\$) \$18.19	7 Payee address; City; State; Zip Code 7517 Cameron Rd. #130
Expenditure from corporate funds	Austin, TX 78752
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food for Canvassers
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H Gharakhanian, Stephanie
Date 10/18/2018	Payee name Perkins, Stephen
Amount (\$) \$328.08 Expenditure from corporate funds	Payee address; City; State; Zip Code 1230 38 1/2 STREET #234 Austin, TX 78722
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wages Before Taxes
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H Cole, Sheryl State Representative District 46
Date 10/18/2018	Payee name Perkins, Stephen
Amount (\$) \$328.08 Expenditure from corporate funds	Payee address; City; State; Zip Code 1230 38 1/2 STREET #234 Austin, TX 78722
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wages Before Taxes
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Conway Jr., Lewis

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made ByCandidate/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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 35/45 Rpt: 40/50	2 FILER NAME Workers Defense Action Fund PAC 3 Filer ID (Ethics Commission Filers) 00083026
4 Date 10/18/2018	5 Payee name Perkins, Stephen
6 Amount (\$) \$328.08	7 Payee address; City, State; Zip Code 1230 38 1/2 STREET #234
Expenditure from corporate funds	Austin, TX 78722
8 PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wages Before Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H Gharakhanian, Stephanie
Date 10/04/2018	Payee name Perkins, Stephen
Amount (\$) \$207.96 Expenditure from	Payee address; City; State; Zip Code 1230 38 1/2 STREET #234
corporate funds	Austin, TX 78722
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wages Before Taxes
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held Cole, Sheryl State Representative District 46
Date 10/04/2018	Payee пате Perkins, Stephen
Amount (\$) \$207.96 Expenditure from corporate funds	Payee address; City; State; Zip Code 1230 38 1/2 STREET #234 Austin, TX 78722
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wages Before Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held Conway Jr., Lewis

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		mmittee	Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	Expense	Printin Salari	-	e //Contract:Labor		Travel in District Travel Out of Distric OTHER (enter a cat		above)	
1	Total pages Schedule F1:	2	FILER NAME						T3	Filer ID (I	Ethics Commis	sion Filers)	_
_	Sch: 36/45 Rpt: 41/50			- efense Action Fur	nd PAC					00083026		ŕ	
_	· · · · · · · · · · · · · · · · · · ·	_						· · · · · · · · · · · · · · · · · · ·	<u> </u>				
4		5	Payee name										•
	10/04/2018		Perkins, St	<u> </u>								•	
6	Amount (\$)	7	Payee addre	ess; City;	State	Zip	Code	٠.				•	
	\$207.96		1230 38 1/2	2 STREET				•					
			,#234							•			
	Expenditure from corporate funds		Austin, TX	78722		•							
8	PURPOSE	(a)	Category (c	ee Categories listed at the			(b)	Description			•		_
•	OF	17		ages/Contract La		eaule)	(-'	_	l outs	ide of Texas. Complet	te Schedule T.		
,	EXPENDITURE		Odianos, TT	ages, Comitaer Ea	501			Check if Austi	n, TX	, officeholder living ex	pense		
			, ,	•				Wages Befo	re T	axes			
				٠,									
9	Complete ONLY if direct	(Candidate/Off	iceholder name	. (Office s	sought			Office held			_
	expenditure to benefit C/OF	۱ (Sharakhania	an, Stephanie		-7.44							
	Date		Payee name	!						•			
	10/04/2018		Rockhold, I	Michael	÷							•	
	Amount (\$)		Payee addre	ess; City;	State	· Zip	Code					-	_
	\$266.08		908 ADAM	S AVE						•			
			#120				-						
Г	Expenditure from corporate funds		Killeen, TX	76541						•			
							[as						_
	PURPOSE OF	(a)		ee Categories listed at the		edule)	(0)	Description	Loute	ide of Texas. Complet	to Schadula T		
	EXPENDITURE		Salaries/w	ages/Contract La	bor			<u> </u>		, officeholder living ex			
						•		Wages Befo				-	
								•					
_	Complete ONLY if direct	٠	Candidate/Off	iceholder name		Office s	ought		-	Office held			
	expenditure to benefit C/OF	۱,	Cole, Sheryl				_	sentative Dist	rict	46			
	Date		Payee name										=
	10/04/2018		Rockhold, I										
	Amount (\$)		Payee addre		State	; Zip	Code						_
	\$266.08		908 ADAM	·	Siale	, zip	Couc						
	Ψ200.00			JAVL						•			
_	Expenditure from		#120										
<u> </u>	corporate funds		Killeen, TX	76541									
	PURPOSE	(a)	Category (S	ee Categories listed at the	e top of this sch	edule)	(b)	Description	•				
	OF . EXPENDITURE		Salaries/W	ages/Contract La	bor			_		ide of Texas. Complet			
	·							Wages Befo		, officeholder living ex	pense		•
								wayes belo	1 . [OVE2			
													_
	Complete ONLY if direct expenditure to benefit C/OF			iceholder name`	C	Office s	sought			Office held		т	
	experientare to benefit G/OI	• (Conway Jr.,	Lewis				•					
											•		
									٠				

SCHEDULE F1

Advertising Expense Accounting/Banking

Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME . 3 Filer ID (Ethics Commission Filers)
Sch: 37/45 Rpt: 42/50	Workers Defense Action Fund PAC 00083026
4 Date	5 Payee name
10/04/2018	Rockhold, Michael
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$266.08	908 ADAMS AVE
Evnanditura from	#120
Expenditure from corporate funds	Killeen, TX 76541
8 PURPOSÉ	(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
·	Wages Before Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oh	
Date	Payee name
10/18/2018	Schwartz, Zachary
Amount (\$)	Payee address; City; State; Zip Code
\$295.79 ·	5302 HALWILL PL
Expenditure from corporate funds	Austin, TX 78723
PURPOSE OF	(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
,	Wages Before Taxes
	Tragged 2010 1 Wildow
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Cole, Sheryl State Representative District 46
Date .	Payee name
10/18/2018	Schwartz, Zachary
Amount (\$)	Payee address; City; State; Zip Code
\$295.79	5302 HALWILL PL
Expenditure from	
corporate funds	Austin, TX 78723
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 Wages Before Taxes
	I vages before ranes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Conway Jr., Lewis
<u> </u>	· · · · · · · · · · · · · · · · · · ·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Accounting/Banking

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	y - Gift/Awards/Memorials Expense P al Committee Legal Services S	Polling Expense Travel in District Printing Expense Travel Out of District Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains ho	<u> </u>
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 38/45 Rpt: 43/50	Workers Defense Action Fund PAC	00083026
4 Date	5 Payee name	
10/18/2018	Schwartz, Zachary	
·		Zin Godo
6 Amount (\$)		Zip Code
\$295.79	5302 HALWILL PL	 •
`	1	
Expenditure from corporate funds	Austin, TX 78723	
•		Into a literatura
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedu	
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Wages Before Taxes
		vvages before Taxes
	<u> </u>	
9 Complete ONLY if direct		fice sought Office held
expenditure to benefit C/O	^H Gharakhanian, Stephanie	
Date	Payee name	
10/04/2018		
10/04/2016	Schwartz, Zachary	<u> </u>
Amount (\$)	Payee address; City; State; 2	Zip Code
\$237.67	5302 HALWILL PL	
Expenditure from	Austin, TX 78723	
corporate funds		·
PURPOSE	(a) Category (See Categories listed at the top of this schedu	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
	,	Wages Before Taxes
	·	
Complete ONLY if direct		fice sought Office held
expenditure to benefit C/O	^H Cole, Sheryl Sta	ate Representative District 46
D-1-		
Date	Payee name	
10/04/2018	Schwartz, Zachary	
Amount (\$)	Payee address; City; State; 2	Zip Code
\$237.67	5302 HALWILL PL	
Expenditure from	Auctin TV 70722	•
corporate funds	Austin, TX 78723	<u> </u>
PURPOSE	(a) Category (See Categories listed at the top of this schedu	lule) (b) Description
OF EXPENDITURE /	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
CALCADITORE .		Check if Austin, TX, officeholder living expense
	,	Wages Before Taxes
	·	L.
Complete ONLY if direct		fice sought Office held
expenditure to benefit C/OI		
	-	; [
Forms provided by Texas E	thics Commission www.ethics.sta	ate.tx.us Version V1.0.62

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -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	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: 39/45 Rpt: 44/50	Workers Defense Action Fund PAC 00083026 .
4 Date	5 Payee name
10/04/2018	Schwartz, Zachary
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$237.67	5302 HALWILL PL
— Formandia va Avana	
Expenditure from corporate funds	Austin, TX 78723 .
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 Wages Before Taxes
	vvages before Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/18/2018	SurePayroll
Amount (\$)	Payee address; City; State; Zip Code
\$728.12	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	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Employer Taxes
·	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payes name
10/10/2018	Payee name SurePayroll
Amount (\$)	
\$16.82	Payee address; City; State; Zip Code 2350 Ravine Way
Ψ10.02	·
Expenditure from	Suite100
corporate funds	Glenview, IL 60025
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Employer Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

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Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officehokler/Politica Credit Card Payment	al Committee 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.	
Total pages Schedule F1: Sch: 40/45 Rpt: 45/50	2 FILER NAME Workers Defense Action Fund PAC		3 Filer ID (Ethics Commission Filers) 00083026
4 Date	5 Payee name		
10/10/2018	SurePayroll		
6 Amount (\$) \$16.82	7 Payee address; City; State 2350 Ravine Way Suite100	Zip Code	
Expenditure from corporate funds	Glenview, IL 60025		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Fees	Check if travel of	outside of Texas. Complete Schedule T. TX, officeholder living expense
•	·] '` '	,
Complete ONLY if direct expenditure to benefit C/Oh		Office sought	Office held
Date	Payee name		
10/10/2018	SurePayroll		· .
Amount (\$)	Payee address; City: State	; Zip Code	
\$16.82	2350 Ravine Way		· ·
Expenditure from corporate funds	Suite100 Glenview, IL 60025		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Fees	Check if travel of	outside of Texas. Complete Schedule T. TX, officeholder living expense (CS
Complete <u>ONLY</u> if direct expenditure to benefit C/O		Office sought	Office held
Date	Payee name		
10/04/2018	SurePayroll		
Amount (\$)		, Zip Code	·
\$284.47	2350 Ravine Way		
Expenditure from corporate funds	Suite100 Glenview, IL 60025		•
PURPOSE	·		·
OF EXPENDITURE	(a) Category (See Categories listed at the top of this sch Fees	Check if travel o	outside of Texas. Complete Schedule T. TX, afficeholder living expense (CS
Complete ONLY if direct expenditure to benefit C/Ol	1.1	Office sought State Representative Distri	Office held
•			

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees
Food/Beverage Expense
Gift/Awards/Memorials Ex

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

Candidate/Officeholder/Political Credit Card Payment		OTHER (enter a category not listed above)
1 Total pages Schedule F1	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 41/45 Rpt: 46/50	Workers Defense Action Fund PAC	00083026
4 Date	5 Payee name	
10/04/2018	SurePayroll	· .
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$284.47	2350 Ravine Way	· · · · · · · · · · · · · · · · · · ·
	Suite100	
Expenditure from corporate funds	Glenview, IL 60025	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel of	outside of Texas. Complete Schedule T.
	¹ ·	, TX, officeholder living expense
	Employer Tax	ces
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Conway Jr., Lewis	Office held
Date	Payee name	
10/04/2018	SurePayroll	
Amount (\$)	Payee address; City; State; Zip Code	
\$284.47	2350 Ravine Way	• .
	Suite100	
Expenditure from corporate funds	Glenview, IL 60025	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel of	outside of Texas. Complete Schedule T.
	·	n, TX, officeholder living expense
	Employer Tax	ces .
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
onkonomic is a control	Gharakhanian, Stephanie	
Date	Payee name	
10/16/2018	United States Postal Service	
Amount (\$)	Payee address; City; State; Zip Code	
\$70.00	900 Blackson Avenue	
dik form		-
Expenditure from corporate funds	Austin, TX 78723	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.
E/((E((0))		n, TX, officeholder living expense
	Canvassing s	supplies
	<u> </u>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
expenditure to benefit 6/6/	H Cole, Sheryl State Representative Distri	ict 46
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Gift/Awards/Memorials Expense Consulting Expense Contributions/ Donations Made By Polling Expense Travel in District Travel Out of District Printing Expense Candidate/Officeholder/Political Committee Credit Card Payment Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 42/45 Rpt: 47/50 Workers Defense Action Fund PAC 00083026 4 Date Payee name 10/16/2018 United States Postal Service Amount (\$) Payee address; City; State; Zip Code \$70.00 900 Blackson Avenue Expenditure from Austin, TX 78723 corporate funds 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Canvassing supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Conway Jr., Lewis Date Payee name 10/16/2018 United States Postal Service Amount (\$) Payee address; City: State; Zip Code \$70.00 900 Blackson Avenue Expenditure from Austin, TX 78723 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas, Complete Schedule T. Office Overhead/Rental Expense EXPENDITURE Check if Austin, TX, officeholder living expense Canvassing supplies Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Gharakhanian, Stephanie Date Payee name 10/26/2018 University Federal Credit Union Amount (\$) Payee address; City; State: Zip Code \$3.00 4611 Guadalupe Street Expenditure from Austin, TX 78751 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Banking Fee Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Consulting Expense Travel in District Contributions/ Donations Made By -Gift/Awards/Memorials Expense Printing Expense Travel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor-OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. (Ethics Commission Filers) Total pages Schedule F1: 2 FILER NAME Filer ID Sch: 43/45.Rpt: 48/50 Workers Defense Action Fund PAC 00083026 Date Payee name 10/19/2018 University Federal Credit Union Amount (\$) Payee address; City: State: Zip Code \$3.00 4611 Guadalupe Street Expenditure from Austin, TX 78751 corporate funds 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Banking Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/18/2018 Vasquez, Jackelyn Pavee address: Amount (\$) City: State: Zip Code \$36.16 33 PR 931 Expenditure from corporate funds Weir, TX 78674 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages Before Taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Cole, Sheryl State Representative District 46 Date Payee name 10/18/2018 Vasquez, Jäckelyn Payee address; State; Zip Code Amount (\$) City: \$36.16 33 PR 931 Expenditure from Weir, TX 78674 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages Before Taxes Candidate/Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Conway Jr., Lewis

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Advertising Expense Event Expense Solicitation/Fundraising Expense Accounting/Banking Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel in District Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Travel Out of District Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: FILER NAME Filer ID (Ethics Commission Filers) Sch: 44/45 Rpt: 49/50 Workers Defense Action Fund PAC 00083026 4 Date Payee name 10/18/2018 Vasquez, Jackelyn 6 Amount (\$) Payee address; State; Zip Code \$36.16 33 PR 931 Expenditure from Weir, TX 78674 corporate funds PURPOSE 8 (a) Category (See Categories listed at the top of this schedule) (b) Description **OF** Check if travel outside of Texas, Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages Before Taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Gharakhanian, Stephanie Date Pavee name 10/16/2018 Ybarra Payee address; Amount (\$) City: State; Zip Code \$83.50 PO BOX 2509 Expenditure from Austin, TX 78708 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Salaries/Wages/Contract Labor **EXPENDITURE** Check if Austin, TX, officeholder living expense Wages Before Taxes Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Cole, Sheryl State Representative District 46 Date Payee name 10/16/2018 Ybarra Payee address; Amount (\$) City: State; Zip Code \$83.50 PO BOX 2509 Expenditure from Austin, TX 78708 corporate funds

PURPOSE

OF

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

(a) Category (See Categories listed at the top of this schedule)

Salaries/Wages/Contract Labor

Candidate/Officeholder name

Conway Jr., Lewis

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

Wages Before Taxes

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

Credit Card Payment	al Committee	The Instruction Guid	le explains how to co	omple	/Contract La			<u> </u>	category no		, c,
1 Total pages Schedule F1:						· [3 Filer		(Ethics C	Commissio	n Filers)
Sch: 45/45 Rpt: 50/50	Workers D	efense Action Fund	d PAC				000	83026			•
4 Date	5 Payee name	e						-			
10/16/2018	Ybarra				-						
6 Amount (\$) \$83.50	7 Payee addr PO BOX 2		State; Zip C	ode						٠	
Expenditure from corporate funds	Austin, TX	78708 -									
8 PURPOSE OF EXPENDITURE		See Categories listed at the /ages/Contract Lab		(b)		if travel ou if Austin,	TX, officet	nolder living	plete Sched Jexpense	ule T.	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		fficeholder name an, Stephanie	Office so	ught				Office he	eld		
Date 10/22/2018	Payee name Zachary	ė									
Amount (\$)	Payee addr	ess; City;	State; Zip C	ode						<u> </u>	
\$272.25	-	19th Street	otato, zip o	000							
Expenditure from corporate funds	Austin, TX	78751									
00.po.a.o 12.100	1										
PURPOSE OF EXPENDITURE		See Categories listed at the	top of this schedule)	(b)	_	if travel or if Austin,	TX, officel	exas. Com	plete Sched g expense	lule T.	·
PURPOSE OF EXPENDITURE	(a) Category (Advertising	See Categories listed at the g Expense			Check	if travel or if Austin,	TX, officel	nolder living	g expense [*]	ule T.	
PURPOSE OF	(a) Category (Advertising	See Categories listed at the	top of this schedule)		Check	if travel or if Austin,	TX, officel		g expense [*]	ule T.	•
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Advertising	See Categories listed at the g Expense			Check	if travel or if Austin,	TX, officel	nolder living	g expense [*]	ule T.	
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Advertising	See Categories listed at the g Expense			Check	if travel or if Austin,	TX, officel	nolder living	g expense [*]	ule T.	
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Advertising	See Categories listed at the g Expense	Office so	ught	Check Check Literatu	if travel or if Austin, ire Des	TX, officel	Office he	g expense [*]	ule T.	
PURPOSE OF EXPENDITURE Complete ONLY if direct	(a) Category (Advertising	See Categories listed at the g Expense	Office so	ught	Check Check Literatu	if travel of	TX, officet	Office he	eld		
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	(a) Category (Advertising	See Categories listed at the g Expense	Office so	ught	Check Check Literatu	if travel or if Austin, Ire Des	TX, officel	Office he	eld		
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	(a) Category (Advertising Advertising Candidate/Of H	See Categories listed at the g Expense	Office so	ught	Check Check Literatu	if travel or if Austin, Ire Des	TX, officel	Office he	eld		
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	(a) Category (Advertising	See Categories listed at the g Expense	Office so	ught	Check Literatu	if travel or if Austin, Ire Des	TX, officel	Office he	g expense		
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	(a) Category (Advertising	See Categories listed at the g Expense	Office so	ught	Check Literatu	if travel or if Austin, Ire Des	TX, officel	Office he	g expense		