



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

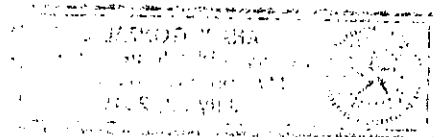
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AUSTIN CITY CLERK
RECEIVED

2016 NOV 3 PM 4 48

1 INDIVIDUAL OR ORGANIZATION NAME <input type="checkbox"/> Filer is an individual	Committee or Organization Name* Workers Defense in Action PAC		
2 INDIVIDUAL OR ORGANIZATION ADDRESS	Address/ PO Box* PO Box 140402		Apartment or Suite Number
	City* Austin	State* TX	Zip Code* 78714
3 COMMITTEE TREASURER NAME (if applicable)	Title Mr	First Name Louis	Middle Initial
	Last Name Malfaro	Suffix	
4 COMMITTEE TREASURER ADDRESS (if applicable)	Address/ PO Box PO Box 140402		Apartment or Suite Number
	City Austin	State TX	Zip Code 78714
5 REPORT DATE	Date Filed (yyyymmdd)* 20161103		

* Indicates a required field





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6 AFFIDAVIT

I swear or affirm upon penalty of perjury that each direct campaign expenditure was made without prior consent, cooperation, strategic communication, consultation, or sharing of material information regarding the communication's content, intended audience, timing, or method of dissemination between an affected candidate, the candidate's campaign staff, the candidate's campaign committee, or an agent or employee of the candidate or the committee, and the person making the expenditure, or that person's agent or employee.

I further swear that this Report of Direct Campaign Expenditures filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-32.

DATE: 11/03/2010

Emily R Timm

AFFIANT'S SIGNATURE

Emily R Timm

PRINT NAME

STATE OF TEXAS

COUNTY OF TRAVIS

This instrument was acknowledged, sworn to and subscribed before me by

Emily Timm

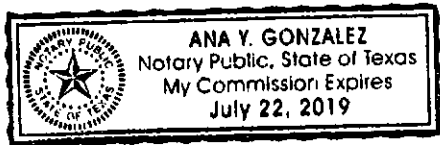
On the 3 day of November, 2010, to certify which witness my hand and official seal.

[Signature]

Notary Public in and for the State of Texas

Ana Y Gonzalez

Typed or Printed Name of Notary





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(Previously Independent Expenditures not by a Candidate)

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.
For additional expenditures, click "Add Another Expenditure Page" below.

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title	Payee First Name*		
		Jacob		
	Organization Name or Payee Last Name, as applicable*		Payee Suffix	
	Aronowitz			
2 PAYEE ADDRESS	Payee Address/ PO Box*		Payee Apartment or Suite Number	
	6403B Chimney Creek Circle			
	Payee City*	Payee State*	Payee Zip Code*	
	Austin	TX	78723	
3 EXPENDITURE DETAILS	Category*		(\$) Expenditure Amount*	
	Salaries/Wages/Contract labor		\$1,473.33	
	Description (If Category is "Other")		Expenditure Date*	
			20161102	

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable			
Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Garza	Delia	District 2	District 2
Casar	Greg	District 4	District 4
Flannigan	Jimmy	District 6	
Pool	Leslie	District 7	District 7



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Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

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1	PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title Payee First Name* Sofia Organization Name or Payee Last Name, as applicable* Alarcon Payee Suffix
2	PAYEE ADDRESS	Payee Address/ PO Box* 317 Strafford Payee City* Laredo Payee Apartment or Suite Number Payee State* TX Payee Zip Code* 78041
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor (\$) Expenditure Amount* \$930.00 Description (If Category is "Other") Expenditure Date* 20161102

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Garza	Delia	District 2	District 2
Casar	Greg	District 4	District 4
Flannigan	Jimmy	District 6	
Pool	Leslie	District 7	District 7



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Itemize each direct campaign expenditure in Sections 1-4.

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1	PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title Sunil	Payee First Name* Sunil	Organization Name or Payee Last Name, as applicable* Joseph	Payee Suffix
2	PAYEE ADDRESS	Payee Address/ PO Box* 205 W. 55th Street		Payee Apartment or Suite Number 	
		Payee City* Austin		Payee State* TX	Payee Zip Code* 78751
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor		(\$) Expenditure Amount* \$930.00	
		Description (If Category is "Other") 		Expenditure Date* 20161102	

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable			
Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Garza	Delia	District 2	District 2
Casar	Greg	District 4	District 4
Flannigan	Jimmy	District 6	
Pool	Leslie	District 7	District 7



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Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

For additional expenditures, click "Add Another Expenditure Page" below.

1	PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title Payee First Name* Emmanuel Organization Name or Payee Last Name, as applicable* Onyera Payee Suffix
2	PAYEE ADDRESS	Payee Address/ PO Box* 2021 Guadalupe Street Payee City* Austin Payee Apartment or Suite Number Payee State* TX Payee Zip Code* 78704
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor (\$) Expenditure Amount* \$744.00 Description (If Category is "Other") Expenditure Date* 20161102

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Garza	Delia	District 2	District 2
Casar	Greg	District 4	District 4
Flannigan	Jimmy	District 6	
Pool	Leslie	District 7	District 7



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Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

For additional expenditures, click "Add Another Expenditure Page" below.

1	PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	Payee First Name* <div style="border: 1px solid black; padding: 2px;">Nick</div>	Organization Name or Payee Last Name, as applicable* <div style="border: 1px solid black; padding: 2px;">Lassus</div>	Payee Suffix <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
2	PAYEE ADDRESS	Payee Address/ PO Box* <div style="border: 1px solid black; padding: 2px;">6403B Chimney Creek</div>		Payee Apartment or Suite Number <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	
		Payee City* <div style="border: 1px solid black; padding: 2px;">Austin</div>		Payee State* <div style="border: 1px solid black; padding: 2px;">TX</div>	Payee Zip Code* <div style="border: 1px solid black; padding: 2px;">78723</div>
3	EXPENDITURE DETAILS	Category* <div style="border: 1px solid black; padding: 2px;">Salaries/Wages/Contract labor</div>		(\$) Expenditure Amount* <div style="border: 1px solid black; padding: 2px;">\$930.00</div>	
		Description (If Category is "Other") <div style="border: 1px solid black; height: 20px; width: 100%;"></div>		Expenditure Date* <div style="border: 1px solid black; padding: 2px;">20161102</div>	

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable			
Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Garza	Delia	District 2	District 2
Casar	Greg	District 4	District 4
Flannigan	Jimmy	District 6	
Pool	Leslie	District 7	District 7



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Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

For additional expenditures, click "Add Another Expenditure Page" below.

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title	Payee First Name*		
		Juan		
	Organization Name or Payee Last Name, as applicable*		Payee Suffix	
	Belman-Guerrero			
2 PAYEE ADDRESS	Payee Address/ PO Box*		Payee Apartment or Suite Number	
	139 W. Saint Elmo		Apt. D203	
	Payee City*		Payee State*	Payee Zip Code*
	Austin		TX	20161102
3 EXPENDITURE DETAILS	Category*		(\$) Expenditure Amount*	
	Salaries/Wages/Contract labor		\$186.00	
	Description (If Category is "Other")		Expenditure Date*	
			20161102	

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Garza	Delia	District 2	District 2
Casar	Greg	District 4	District 4
Flannigan	Jimmy	District 6	
Pool	Leslie	District 7	District 7



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Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

For additional expenditures, click "Add Another Expenditure Page" below.

1	PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title Payee First Name* Raeklevia Organization Name or Payee Last Name, as applicable* Mathis Payee Suffix
2	PAYEE ADDRESS	Payee Address/ PO Box* 1012 Columbia Ave Payee City* Jacksonville Payee Apartment or Suite Number Payee State* TX Payee Zip Code* 75766
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor (\$) Expenditure Amount* \$868.99 Description (If Category is "Other") Expenditure Date* 20161102

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable			
Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Garza	Delia	District 2	District 2
Casar	Greg	District 4	District 4
Flannigan	Jimmy	District 6	
Pool	Leslie	District 7	District 7



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Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

For additional expenditures, click "Add Another Expenditure Page" below.

1	PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title Payee First Name* Alicia Organization Name or Payee Last Name, as applicable* Thompson Payee Suffix
2	PAYEE ADDRESS	Payee Address/ PO Box* 1300 Crossing Place Payee City* Austin Payee Apartment or Suite Number Apt. 3521 Payee State* TX Payee Zip Code* 78741
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor (\$) Expenditure Amount* \$778.88 Description (If Category is "Other") Expenditure Date* 20161102

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Garza	Delia	District 2	District 2
Casar	Greg	District 4	District 4
Flannigan	Jimmy	District 6	
Pool	Leslie	District 7	District 7



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Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

For additional expenditures, click "Add Another Expenditure Page" below.

1	PAYEE NAME <input type="checkbox"/> Payee is an individual	Organization Name or Payee Last Name, as applicable* ACH Payroll (SurePayroll)		
2	PAYEE ADDRESS	Payee Address/ PO Box* 2350 Ravine Way	Payee Apartment or Suite Number	
		Payee City* Glenview	Payee State* IL	Payee Zip Code* 60025
3	EXPENDITURE DETAILS	Category* Other (use Description field)	(\$) Expenditure Amount* \$932.99	
		Description (If Category is "Other") Employer Taxes- Payroll	Expenditure Date* 20161102	

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable			
Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Garza	Delia	District 2	District 2
Casar	Greg	District 4	District 4
Flannigan	Jimmy	District 6	
Pool	Leslie	District 7	District 7



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Itemize each direct campaign expenditure in Sections 1-4.

For additional expenditures, click "Add Another Expenditure Page" below.

1	PAYEE NAME <input type="checkbox"/> Payee is an individual	Organization Name or Payee Last Name, as applicable* HEB Grocery Store		
2	PAYEE ADDRESS	Payee Address/ PO Box* 1801 E. 51st Street	Payee Apartment or Suite Number	
		Payee City* Austin	Payee State* TX	Payee Zip Code* 78723
3	EXPENDITURE DETAILS	Category* Food/Beverage Expense	(\$) Expenditure Amount* \$206.95	
		Description (If Category is "Other")	Expenditure Date* 20161103	

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable			
Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Garza	Delia	District 2	District 2
Casar	Greg	District 4	District 4
Flannigan	Jimmy	District 6	
Pool	Leslie	District 7	District 7
Alter	Allison	District 10	District 10

Add Another Expenditure Page



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Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1	CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual	Contributor Title <input type="text"/>	Contributor First Name* <input type="text"/>	
		Organization Name or Contributor Last Name, as applicable* <input type="text"/>		Contributor Suffix <input type="text"/>
2	CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* <input type="text"/>		Contributor Apartment or Suite Number <input type="text"/>
		Contributor City* <input type="text"/>		Contributor State* <input type="text"/>
		Contributor Zip Code* <input type="text"/>		
		Contributor Employer* <input type="text"/>		Contributor Occupation* <input type="text"/>
3	CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* <input type="text"/>		(\$) Contribution Amount* <input type="text"/>

Add Another Contribution Page