



# Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

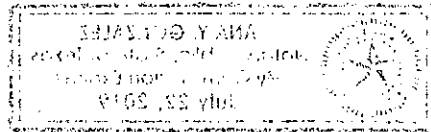
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AUSTIN CITY CLERK  
RECEIVED

2016 NOV 21 PM 4 54

<b>1</b>  <b>INDIVIDUAL OR ORGANIZATION NAME</b>  <input type="checkbox"/> Filer is an individual	<b>Committee or Organization Name*</b> Workers Defense in Action PAC		
<b>2</b>  <b>INDIVIDUAL OR ORGANIZATION ADDRESS</b>	<b>Address/ PO Box*</b> PO Box 140402		<b>Apartment or Suite Number</b> 
	<b>City*</b> Austin	<b>State*</b> TX	<b>Zip Code*</b> 78714
<b>3</b>  <b>COMMITTEE TREASURER NAME (if applicable)</b>	<b>Title</b> Mr.	<b>First Name</b> Louis	<b>Middle Initial</b> 
	<b>Last Name</b> Malfaro	<b>Suffix</b> 	
<b>4</b>  <b>COMMITTEE TREASURER ADDRESS (if applicable)</b>	<b>Address/ PO Box</b> PO Box 140402		<b>Apartment or Suite Number</b> 
	<b>City</b> Austin	<b>State</b> TX	<b>Zip Code</b> 78714
<b>5</b>  <b>REPORT DATE</b>	<b>Date Filed (yyyymmdd)*</b> 20161121		

\* 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: 11/21/16

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

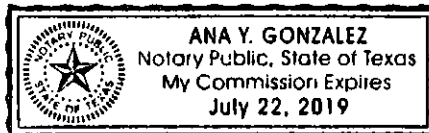
On the 21 day of November, 2016, to certify which witness my hand and official seal.

[Signature]

Notary Public in and for the State of Texas

Ana Gonzalez

Typed or Printed Name of Notary





# Report Of Direct Campaign Expenditures: Schedule ATX.1

(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.

<b>1</b>  <b>PAYEE NAME</b>  <input checked="" type="checkbox"/> Payee is an individual	<table><tr><td>Payee Title</td><td>Payee First Name*</td></tr><tr><td></td><td>Jacob</td></tr><tr><td colspan="2">Organization Name or Payee Last Name, as applicable*</td></tr><tr><td colspan="2">Aronowitz</td></tr><tr><td colspan="2">Payee Suffix</td></tr><tr><td colspan="2"></td></tr></table>	Payee Title	Payee First Name*		Jacob	Organization Name or Payee Last Name, as applicable*		Aronowitz		Payee Suffix							
Payee Title	Payee First Name*																
	Jacob																
Organization Name or Payee Last Name, as applicable*																	
Aronowitz																	
Payee Suffix																	
<b>2</b>  <b>PAYEE ADDRESS</b>	<table><tr><td colspan="2">Payee Address/ PO Box*</td><td colspan="2">Payee Apartment or Suite Number</td></tr><tr><td colspan="2">6403B Chimney Creek Circle</td><td colspan="2"></td></tr><tr><td>Payee City*</td><td>Payee State*</td><td colspan="2">Payee Zip Code*</td></tr><tr><td>Austin</td><td>TX</td><td colspan="2">78722</td></tr></table>	Payee Address/ PO Box*		Payee Apartment or Suite Number		6403B Chimney Creek Circle				Payee City*	Payee State*	Payee Zip Code*		Austin	TX	78722	
Payee Address/ PO Box*		Payee Apartment or Suite Number															
6403B Chimney Creek Circle																	
Payee City*	Payee State*	Payee Zip Code*															
Austin	TX	78722															
<b>3</b>  <b>EXPENDITURE DETAILS</b>	<table><tr><td>Category*</td><td>(\$) Expenditure Amount*</td></tr><tr><td>Salaries/Wages/Contract labor</td><td>\$1,473.33</td></tr><tr><td>Description (If Category is "Other")</td><td>Expenditure Date*</td></tr><tr><td></td><td>20161116</td></tr></table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$1,473.33	Description (If Category is "Other")	Expenditure Date*		20161116								
Category*	(\$) Expenditure Amount*																
Salaries/Wages/Contract labor	\$1,473.33																
Description (If Category is "Other")	Expenditure Date*																
	20161116																

### 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
Alter	Allison	District 10	
Flannigan	Jimmy	District 6	
Pool	Leslie	District 7	District 7



# Report Of Direct Campaign Expenditures: Schedule ATX.1

(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.

<b>1</b>	<b>PAYEE NAME</b>  <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 
<b>2</b>	<b>PAYEE ADDRESS</b>	Payee Address/ PO Box* 317 Strafford  Payee City* Laredo  Payee Apartment or Suite Number  Payee State* TX  Payee Zip Code* 
<b>3</b>	<b>EXPENDITURE DETAILS</b>	Category* Salaries/Wages/Contract labor  (\$) Expenditure Amount* \$988.12  Description (If Category is "Other")  Expenditure Date* 20161116

### 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
Pool	Leslie	District 7	District 7
Flannigan	Jimmy	District 6	
Alter	Allison	District 10	



# Report Of Direct Campaign Expenditures: Schedule ATX.1

(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	<b>PAYEE NAME</b>  <input checked="" type="checkbox"/> Payee is an individual	Payee Title	Payee First Name*	
			Sunil	
		Organization Name or Payee Last Name, as applicable*		Payee Suffix
		Joseph		
2	<b>PAYEE ADDRESS</b>	Payee Address/ PO Box*		Payee Apartment or Suite Number
		205 W. 55th Street		
		Payee City*	Payee State*	Payee Zip Code*
		Austin	TX	78751
3	<b>EXPENDITURE DETAILS</b>	Category*		(\$) Expenditure Amount*
		Salaries/Wages/Contract labor		\$906.75
		Description (If Category is "Other")		Expenditure Date*
				20161116

### 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
Pool	Leslie	District 7	District 7
Flannigan	Jimmy	District 6	
Alter	Allison	District 10	



# Report Of Direct Campaign Expenditures: Schedule ATX.1

(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.

<b>1</b>	<b>PAYEE NAME</b>  <input checked="" type="checkbox"/> Payee is an individual	Payee Title  Payee First Name* Nick  Organization Name or Payee Last Name, as applicable* Lassus  Payee Suffix 
<b>2</b>	<b>PAYEE ADDRESS</b>	Payee Address/ PO Box* 6403B Chimney Creek Circle  Payee City* Austin  Payee Apartment or Suite Number  Payee State* TX  Payee Zip Code* 78723
<b>3</b>	<b>EXPENDITURE DETAILS</b>	Category* Salaries/Wages/Contract labor  (\$) Expenditure Amount* \$860.25  Description (If Category is "Other")  Expenditure Date* 20161116

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
Pool	Leslie	District 7	District 7
Flannigan	Jimmy	District 6	
Alter	Allison	District 10	



# Report Of Direct Campaign Expenditures: Schedule ATX.1

(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.

<b>1</b>	<b>PAYEE NAME</b>  <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 
<b>2</b>	<b>PAYEE ADDRESS</b>	Payee Address/ PO Box* 1012 Columbia Road  Payee City* Jacksonville  Payee Apartment or Suite Number  Payee State* TX  Payee Zip Code* 75766
<b>3</b>	<b>EXPENDITURE DETAILS</b>	Category* Salaries/Wages/Contract labor  (\$) Expenditure Amount* \$933.88  Description (If Category is "Other")  Expenditure Date* 20161116

### 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
Pool	Leslie	District 7	District 7
Flannigan	Jimmy	District 6	
Alter	Allison	District 10	



# Report Of Direct Campaign Expenditures: Schedule ATX.1

(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.

<b>1</b>	<b>PAYEE NAME</b>  <input checked="" type="checkbox"/> Payee is an individual	Payee Title <input type="text"/>	Payee First Name* <input type="text" value="Emmanuel"/>	Organization Name or Payee Last Name, as applicable* <input type="text" value="Onyera"/>	Payee Suffix <input type="text"/>
<b>2</b>	<b>PAYEE ADDRESS</b>	Payee Address/ PO Box* <input type="text" value="2021 Guadalupe"/>		Payee Apartment or Suite Number <input type="text"/>	
		Payee City* <input type="text" value="Austin"/>		Payee State* <input type="text" value="TX"/>	Payee Zip Code* <input type="text" value="78704"/>
<b>3</b>	<b>EXPENDITURE DETAILS</b>	Category* <input type="text" value="Salaries/Wages/Contract labor"/>		(\$ ) Expenditure Amount* <input type="text" value="\$914.50"/>	
		Description (If Category is "Other") <input type="text"/>		Expenditure Date* <input type="text" value="20161116"/>	

#### 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
Pool	Leslie	District 7	District 7
Flannigan	Jimmy	District 6	
Alter	Allison	District 10	





# Report Of Direct Campaign Expenditures: Schedule ATX.1

(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.

<b>1</b>	<b>PAYEE NAME</b>  <input checked="" type="checkbox"/> Payee is an individual	Payee Title  Payee First Name* Kathryn  Organization Name or Payee Last Name, as applicable* Selcraig  Payee Suffix 
<b>2</b>	<b>PAYEE ADDRESS</b>	Payee Address/ PO Box* 6202 Bull Creek Road  Payee City* Austin  Payee Apartment or Suite Number  Payee State* TX  Payee Zip Code* 78757
<b>3</b>	<b>EXPENDITURE DETAILS</b>	Category* Salaries/Wages/Contract labor  (\$) Expenditure Amount* \$131.75  Description (If Category is "Other")  Expenditure Date* 20161116

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



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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.

<b>1</b>	<b>PAYEE NAME</b>  <input checked="" type="checkbox"/> Payee is an individual	Payee Title <input type="text"/>	Payee First Name* <input type="text" value="Alicia"/>	Organization Name or Payee Last Name, as applicable* <input type="text" value="Thompson"/>	Payee Suffix <input type="text"/>
<b>2</b>	<b>PAYEE ADDRESS</b>	Payee Address/ PO Box* <input type="text" value="1300 Crossing Place"/>		Payee Apartment or Suite Number <input type="text"/>	
		Payee City* <input type="text" value="Austin"/>		Payee State* <input type="text" value="TX"/>	Payee Zip Code* <input type="text" value="78741"/>
<b>3</b>	<b>EXPENDITURE DETAILS</b>	Category* <input type="text" value="Salaries/Wages/Contract labor"/>		(\$) Expenditure Amount* <input type="text" value="\$922.25"/>	
		Description (If Category is "Other") <input type="text"/>		Expenditure Date* <input type="text" value="20161116"/>	

#### 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
Pool	Leslie	District 7	District 7
Flannigan	Jimmy	District 6	
Alter	Allison	District 10	



# Report Of Direct Campaign Expenditures: Schedule ATX.1

(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.

<b>1</b>	<b>PAYEE NAME</b> <input type="checkbox"/> Payee is an individual	Organization Name or Payee Last Name, as applicable* ACH Payroll (SurePayroll)		
<b>2</b>	<b>PAYEE ADDRESS</b>	Payee Address/ PO Box* 2350 Ravine Way	Payee Apartment or Suite Number	
		Payee City* Glenview	Payee State* IL	Payee Zip Code* 60025
<b>3</b>	<b>EXPENDITURE DETAILS</b>	Category* Salaries/Wages/Contract labor	(\$ ) Expenditure Amount* \$966.87	
		Description (If Category is "Other")	Expenditure Date* 20161116	

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
Pool	Leslie	District 7	District 7
Flannigan	Jimmy	District 6	
ALter	Allison	District 10	



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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.

<b>1</b>  <b>PAYEE NAME</b>  <input checked="" type="checkbox"/> Payee is an individual	Payee Title	Payee First Name*		
		Lillian		
	Organization Name or Payee Last Name, as applicable*		Payee Suffix	
	Byrd			
<b>2</b>  <b>PAYEE ADDRESS</b>	Payee Address/ PO Box*		Payee Apartment or Suite Number	
	3709 Tom Green			
	Payee City*		Payee State*	Payee Zip Code*
	Austin		TX	78705
<b>3</b>  <b>EXPENDITURE DETAILS</b>	Category*		(\$) Expenditure Amount*	
	Salaries/Wages/Contract labor		\$37.50	
	Description (If Category is "Other")		Expenditure Date*	
			20161116	

#### 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



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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  <b>PAYEE NAME</b>  <input checked="" type="checkbox"/> Payee is an individual	Payee Title	Payee First Name*		
		Catherine		
	Organization Name or Payee Last Name, as applicable*		Payee Suffix	
	Treviño			
2  <b>PAYEE ADDRESS</b>	Payee Address/ PO Box*		Payee Apartment or Suite Number	
	205 W. 55th Street			
	Payee City*		Payee State*	Payee Zip Code*
	Austin		TX	78751
3  <b>EXPENDITURE DETAILS</b>	Category*		(\$) Expenditure Amount*	
	Salaries/Wages/Contract labor		\$176.25	
	Description (If Category is "Other")		Expenditure Date*	
			20161118	

#### 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



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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.

<b>1</b>	<b>PAYEE NAME</b>  <input checked="" type="checkbox"/> Payee is an individual	Payee Title <input type="text"/>	Payee First Name* <input type="text"/>	Organization Name or Payee Last Name, as applicable* <input type="text"/>	Payee Suffix <input type="text"/>
<b>2</b>	<b>PAYEE ADDRESS</b>	Payee Address/ PO Box* <input type="text"/>		Payee Apartment or Suite Number <input type="text"/>	
		Payee City* <input type="text"/>		Payee State* <input type="text" value="TX"/>	Payee Zip Code* <input type="text"/>
<b>3</b>	<b>EXPENDITURE DETAILS</b>	Category* Other (use Description field) <input type="text"/>		(\$) Expenditure Amount* <input type="text"/>	
		Description (If Category is "Other") <input type="text"/>		Expenditure Date* <input type="text"/>	

#### 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)

Add Another Expenditure Page



# Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

## 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.

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

Add Another Contribution Page