

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

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

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Workers Defense In Action	<b>13 Filer ID</b> (Ethics Commission Filers) 00090532
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported James Flannigan Council Member, District 6
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 29,000.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$ 13,550.28
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 88,690.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Louis Malfaro  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

**GENERAL-PURPOSE COMMITTEE REPORT:  
PURPOSE**

**FORM GPAC  
ADDENDUM**

Page 3 of 17

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

# SUBTOTALS - GPAC

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

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

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

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/2 Rpt: 6/17
<b>2</b> FILER NAME Workers Defense In Action		<b>3</b> Filer ID (Ethics Commission Filers) 00090532
<b>4</b> Date 12/02/2020	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00712109 ) The Action PAC	<b>7</b> Amount of Contribution (\$) \$2,500.00
	<b>6</b> Contributor address; City; State; Zip Code 3041 Mission Street #307 San Francisco, CA 94110	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling 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.

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling 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.

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling 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.

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

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

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

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

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

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