

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

| | | | | |
|--|--|--|--|--------|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00070239 | 2 Total pages filed: 9 | |
| 3 COMMITTEE NAME Workers Defense in Action | | | OFFICE USE ONLY | |
| | | | Date Received ELECTRONICALLY FILED 07/15/2025 | |
| | | | Date Hand-delivered or Date Postmarked | |
| | | | Receipt # | Amount |
| | | | Date Processed | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | | | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 140402 Austin, TX 78714 | |
| 5 CAMPAIGN TREASURER NAME | | | MS / MRS / MR FIRST MI Mr. Louis NICKNAME LAST SUFFIX Malfaro | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | | | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 140402 Austin, TX 78714 | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | | | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 140402 Austin, TX 78714 | |
| 8 CAMPAIGN TREASURER PHONE | | | AREA CODE PHONE NUMBER EXTENSION (469) 657-3924 | |
| 9 REPORT TYPE | | | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | |
| 10 PERIOD COVERED | | | Month Day Year 01/01/2025 THROUGH Month Day Year 06/30/2025 | |
| 11 ELECTION | | | ELECTION DATE Month Day Year ELECTION TYPE <input type="checkbox"/> Primary <input 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

| | |
|---|---|
| 12 COMMITTEE NAME Workers Defense in Action | 13 Filer ID (Ethics Commission Filers) 00070239 |
|---|---|

| | | |
|---|--|--------------|
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported |
| | | B. Opposed |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |
| | | |

| | | |
|-------------------------------|---|--------------|
| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 0.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 0.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 61,006.83 |
| 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.

Mr. 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

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 9

| | | |
|---|---|---|
| 17 COMMITTEE NAME Workers Defense in Action | | 18 Filer ID (Ethics Commission Filers) 00070239 |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ |
| 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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 11. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 13. | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 5,212.81 |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|----------------------------------|---|--|
| 1 Total pages Schedule F4: Sch: 1/6 Rpt: 4/9 | | 2 FILER NAME Workers Defense in Action | | 3 Filer ID (Ethics Commission Filers) 00070239 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution University Federal Credit Union | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$61.23 | (b) Date of Charge 01/02/2025 | (c) Date(s) Credit Card Issuer Paid | |
| 7 PAYEE | | (a) Payee name SurePayroll | | (b) Payee address; City, State, Zip Code 2350 Ravine Way Suite100 Glenview, IL 60025 | |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description Payroll processing fee | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$61.23 | (b) Date of Charge 06/02/2025 | (c) Date(s) Credit Card Issuer Paid | |
| PAYEE | | (a) Payee name SurePayroll | | (b) Payee address; City, State, Zip Code 2350 Ravine Way Suite100 Glenview, IL 60025 | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description Payroll processing fee | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$105.53 | (b) Date of Charge 01/07/2025 | (c) Date(s) Credit Card Issuer Paid | |
| PAYEE | | (a) Payee name Intuit Quickbooks | | (b) Payee address; City, State, Zip Code 2632 Marine Way Mountainview, CA 94043 | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description Accounting system payment | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | |
|--|---|--|---|--|
| 1 Total pages Schedule F4: Sch: 2/6 Rpt: 5/9 | | 2 FILER NAME Workers Defense in Action | | 3 Filer ID (Ethics Commission Filers) 00070239 |
| 4 CREDIT CARD ISSUER | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD | \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$3,675.00 | (b) Date of Charge 01/27/2025 | (c) Date(s) Credit Card Issuer Paid | |
| 7 PAYEE | (a) Payee name Maxwell Locke & Ritter | | (b) Payee address; City, State, Zip Code 401 Congress Ave Suite 1100 Austin, TX 78701 | |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description Payment for 990 filing | |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$107.45 | (b) Date of Charge 02/01/2025 | (c) Date(s) Credit Card Issuer Paid | |
| PAYEE | (a) Payee name Google Suite | | (b) Payee address; City, State, Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043 | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Gmail | | (b) Description Subscription payment for gmail | |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$61.23 | (b) Date of Charge 02/03/2025 | (c) Date(s) Credit Card Issuer Paid | |
| PAYEE | (a) Payee name SurePayroll | | (b) Payee address; City, State, Zip Code 2350 Ravine Way Suite100 Glenview, IL 60025 | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description Payroll processing fee | |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | | Office sought | Office held |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|----------------------------------|---|--|
| 1 Total pages Schedule F4: Sch: 3/6 Rpt: 6/9 | | 2 FILER NAME Workers Defense in Action | | 3 Filer ID (Ethics Commission Filers) 00070239 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$105.53 | (b) Date of Charge 06/07/2025 | (c) Date(s) Credit Card Issuer Paid | |
| 7 PAYEE | | (a) Payee name Intuit Quickbooks | | (b) Payee address; City, State, Zip Code 2632 Marine Way Mountainview, CA 94043 | |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description Accounting system payment | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$105.53 | (b) Date of Charge 02/07/2025 | (c) Date(s) Credit Card Issuer Paid | |
| PAYEE | | (a) Payee name Intuit Quickbooks | | (b) Payee address; City, State, Zip Code 2632 Marine Way Mountainview, CA 94043 | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description Accounting system payment | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$107.45 | (b) Date of Charge 03/02/2025 | (c) Date(s) Credit Card Issuer Paid | |
| PAYEE | | (a) Payee name Google Suite | | (b) Payee address; City, State, Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043 | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Gmail | | (b) Description Subscription payment for gmail | |
| | | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | <input type="checkbox"/> Check if Austin, TX, officeholder living expense | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement
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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)

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| 1 Total pages Schedule F4: Sch: 4/6 Rpt: 7/9 | | 2 FILER NAME Workers Defense in Action | | 3 Filer ID (Ethics Commission Filers) 00070239 | |
| 4 CREDIT CARD ISSUER | | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ | |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | | (a) Amount Charged \$105.53 | (b) Date of Charge 05/07/2025 | (c) Date(s) Credit Card Issuer Paid | |
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| PAYEE | | (a) Payee name SurePayroll | | (b) Payee address; City, State, Zip Code 2350 Ravine Way Suite100 Glenview, IL 60025 | |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description Payroll processing payment | |
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| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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| 1 Total pages Schedule F4: Sch: 5/6 Rpt: 8/9 | 2 FILER NAME Workers Defense in Action | | 3 Filer ID (Ethics Commission Filers) 00070239 |
| 4 CREDIT CARD ISSUER | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$105.53 | (b) Date of Charge 03/07/2025 | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name Intuit Quickbooks | | (b) Payee address; City, State, Zip Code 2632 Marine Way Mountainview, CA 94043 |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description Accounting system payment |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held | | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$107.45 | (b) Date of Charge 04/01/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name Google Suite | | (b) Payee address; City, State, Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043 |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Gmail | | (b) Description Subscription payment for gmail |
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | |
|--|---|----------------------------------|---|
| 1 Total pages Schedule F4: Sch: 6/6 Rpt: 9/9 | 2 FILER NAME Workers Defense in Action | | 3 Filer ID (Ethics Commission Filers) 00070239 |
| 4 CREDIT CARD ISSUER | Name of financial institution see previous | | 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ |
| 6 PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$105.53 | (b) Date of Charge 04/07/2025 | (c) Date(s) Credit Card Issuer Paid |
| 7 PAYEE | (a) Payee name Intuit Quickbooks | | (b) Payee address; City, State, Zip Code 2632 Marine Way Mountainview, CA 94043 |
| 8 PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | | (b) Description Accounting system payment |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held | | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$107.45 | (b) Date of Charge 05/01/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name Google Suite | | (b) Payee address; City, State, Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043 |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Gmail | | (b) Description Subscription payment for gmail |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held | | |
| PAYMENT <input type="checkbox"/> Expenditure from corporate funds | (a) Amount Charged \$107.45 | (b) Date of Charge 06/01/2025 | (c) Date(s) Credit Card Issuer Paid |
| PAYEE | (a) Payee name Google Suite | | (b) Payee address; City, State, Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043 |
| PURPOSE OF EXPENDITURE <input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political | (a) Category (See Categories listed at the top of this schedule) Gmail | | (b) Description Subscription payment for gmail |
| | (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense | | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name Office sought Office held | | |