CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

97 (1011 7 (1011 1 111)	THE THE THE					<u> </u>
The C/OH Instruction	Guide explains how to com	plete this form	1 Filer ID(E	thics Comm	nission filers)	2 Total pages filed
3 CANDIDATE /	MS/MRS/MR	FIRST	MI		OFF	ICE USE ONLY
OFFICEHOLDER	Mr.	Rogelio			Date Received	d
NAME	NICKNAME	LAST	SUFFIX		10/26/2015	
	Roy	Morales	Jr.			
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CIT	Y; STATE; ZIP	CODE		
OFFICEHOLDER	2450 Louisiana St					
MAILING	Suite 400-224				Date Hand-deliver	red or Date Postmarked
ADDRESS	Houston TX 77006					
Change of address			,			
5 CANDIDATE /	AREA CODE	PHONE NUMBER	EXTENSION			
OFFICEHOLDER	(713) 320-8167					
PHONE						
6 CAMPAIGN	MS/MRS/MR	FIRST	MI		Receipt #	Amount
TREASURER	Dr.	Dorothy	E.F.		Date Processe	ed
NAME	NICKNAME	LAST	SUFFIX		Date Imaged	
		Caram				
7 CAMPAIGN	STREET ADDRESS (No PO Box Plea	se);	APT/SUITE # ;	;	CITY; STATE;	ZIP CODE
TREASURER	2603 Glen Haven					
ADDRESS						
(Residence)	Houston TX 77025					
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER PHONE	(713) 665-5398					
9 REPORT TYPE	January 15 30th day be	efore election Fin	al repport (Attach C/Ol	H - FR)	Exceeded \$500 limit	
	July 15 X 8th day before	ore election Ru	noff		15th day after campaign	n treasurer appointment(officeholder only)
10 PERIOD	Month Day	Year			Month	Day Year
COVERED	9/25/2015	5	THROUGH		10/2	23/2015
11 ELECTION	ELECTION DATE	ELECTIO	N TYPE	•		
	Month Day Year					
	11/3/2015	Primary	R	unoff	X General	Special
12 OFFICE	OFFICE HELD (if any)		13 ^C	OFFICE SOUGH	HT (if known)	
	N/A		0	City Coun	cil - At Large P	osition 4

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 FILER NAME Rogel	io Morales		15 Filer I	ID (Ethics Com	mission Filers)
	expenditures may have	f political contributions accepted or political exp been made without the candidate's or officehor receive notice of such expenditures.			
16 NOTICE	COMMITTEE TYPE	COMMITTEE NAME			
FROM					
POLITICAL	GENERAL	COMMITTEE ADDRESS			
COMMITTEE(S)					
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAI	ME		
additional pages		COMMITTEE CAMPAIGN TREASURER ADD	DRESS		
17 CONTRIBUTION		AL CONTRIBUTIONS OF \$50 OR			
TOTALS	PLEDGES, LOA	NS, OR GUARANTEES OF LOANS	5), UNLESS ITEMIZE	ים	\$200.00
	2 TOTAL POLITION	CAL CONTRIBUTIONS			
\$12,					\$12,450.00
	·	PLEDGES, LOANS, OR GUARANT			
EXPENDITURE TOTALS	3 TOTAL POLITIC	AL EXPENDITURES OF \$100 OR	LESS, UNLESS ITEM	MIZED	 \$
TOTALS					Ψ
	4 TOTAL POLITIC	CAL EXPENDITURES			
					\$15,260.00
CONTRIBUTION	5 TOTAL POLITIC	AL CONTRIBUTIONS MAINTAINE	D AS OF THE LAST	DAY	
BALANCE	OF REPORTING	S PERIOD			\$1,176.84
OUTSTANDING LOAN	6 TOTAL PRINCIP	PAL AMOUNT OF ALL OUTSTAND	ING LOANS AS OF	THE	
TOTALS	0	HE REPORTING PERIOD	ING LOANS AS OF	· · · · ·	\$3,338.41
18 AFFIDAVIT					
		Lswe	ar or affirm under ne	enalty of periury th	at the accompanying
		report	is true and correct ar	nd includes all info	ormation required to be
		report	ed by me under Title	15, Election Code).
				Roy Morales	
			C:		Office helder
			Signatur	e of Candidate or	Onicenolaef
AFFIX NOT STAMP / SE					
Sworn to and subscribed	before me, by the said	d		, this the	day
of	, 20	, to certify which, witne	ss my hand and seal	of office.	
Signature of officer admir	nistering oath	Print name of officer admini	stering oath	Title of officer	administering oath

SUBTOTALS - COH FORM C/OH **COVER SHEET PG 3** 19 FILER NAME Rogelio Morales 20 Filer ID (Ethics Commission Filers) 21 SCHEDULE SUBTOTALS **SUBTOTAL** NAME OF SCHEDULE **AMOUNT** SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. 11450 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2. 1000 SCHEDULE B: PLEDGED CONTRIBUTIONS 3. SCHEDULE E: LOANS 1200 4. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5. 15260 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD 8. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER 12.

CANDIDATE / OFFICEHOLDER REPORT: NOTICE FROM POLITICAL COMMITTEE(S)

FORM C/OH ADDENDUM

C/OH NAME Rogelio Morales

ACCOUNT # (Ethics Commission filers)

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

M	ONETAR'	Y POLITICAL CONTR	IBUTIONS	5	SCHEDULE A1
Th	e Instruction C	Guide explains how to complete	this form.		1 Total Pages Schedule A1:
2 F	ILER NAME I	Rogelio Morales	3 Filer ID (Ethics Commission filers)		
4 Date		5 Full name of contributor	out of state P	PAC(ID#)	
		Jesus Mayor			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/16/2015		Houston	TX	\$1,000.00
8	Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
	Physician			Self employed	
4	Date	5 Full name of contributor	out of state P	PAC(ID#)	
		Beirne, Maynard & Parsons, L.L.P.			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/16/2015		Houston	TX 77056	\$500.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state P	PAC(ID#)	
		Glen Gondo	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/14/2015		Houston	TX 77082	\$500.00
8	Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
	Owner			Self employed	
4	Date	5 Full name of contributor	out of state P	PAC(ID#)	
		Greenberg & Company L.L.P	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/7/2015		Houston	TX 77057	\$2,500.00
8	Principal occ	Lupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
_		lee n	T		
4	Date	5 Full name of contributor	out of state P	AC(ID#)	

M	ONETAR	Y POLITICAL CONT	RIBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to comple	te this form.		1 Total Pages Schedule A1:
2 F	ILER NAME	Rogelio Morales			3 Filer ID (Ethics Commission filers)
		Michael Cianciola			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/29/2015		Houston	TX 77007	100.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		James McSpadden	Ц		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/28/2015		Houston	TX 77077	100.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		John Butler	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/28/2015		Houston	TX 77027	300.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	etions)
	Date	E Full construction of the state of	The sector of state	DAG(ID)()	1
4	Date	5 Full name of contributor George Strake	Out of state	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	9/25/2015		Houston	TX 77056	200.00
8	Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Homero Anchondo			7 Amount of contributions (\$)

MONETA	RY POLITICAL CONTR	SCHEDULE A1			
The Instruction	n Guide explains how to complete	e this form.		1 Total Pages Schedule A1:	
2 FILER NAM	E Rogelio Morales			3 Filer ID (Ethics Commission filers)	
	6 Contributor address;	City;	State; Zip Code		
9/25/2015		Houston	TX 77007	100.00	
8 Principal o	occupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)	
4 Date	5 Full name of contributor	out of state	PAC(ID#)		
	James McIngvale	_		7 Amount of contributions (\$)	
	6 Contributor address;	City;	State; Zip Code	•	
10/12/2015		Houston	TX 77042	500.00	
8 Principal o	occupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)	
Owner			Gallery Furniture		
4 Date	5 Full name of contributor	out of state	PAC(ID#)		
	Margaret Payan	_		7 Amount of contributions (\$)	
	6 Contributor address;	City;	State; Zip Code	•	
10/6/2015		Houston	TX 77024	100.00	
8 Principal c	occupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)	
4 Date	5 Full name of contributor	out of state	PAC(ID#)		
	Dan Moody			7 Amount of contributions (\$)	
	6 Contributor address;	City;	State; Zip Code	•	
10/5/2015		Houston	TX 77098	500.00	
8 Principal o	occupation / Job title (See Instructions)		9 Employer (See Instruc	tions)	

M	ONETAR	Y POLITICAL CONT	SCHEDULE A1		
Th	e Instruction (Guide explains how to comple	1 Total Pages Schedule A1:		
2 F	ILER NAME	Rogelio Morales			3 Filer ID (Ethics Commission filers)
4 Date		5 Full name of contributor Johnathan Yazdani-Beicky	out of state I	PAC(ID#)	7 Amount of contributions (\$)
	10/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	1,000.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Joel Joselevitz	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	10/9/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77025	250.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Patrick Hicks	out of state I	I PAC(ID#)	7 Amount of contributions (\$)
	10/15/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77063	500.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct Hicks Venture	tions)
4	Date	5 Full name of contributor Martin Basaldua	out of state f	PAC(ID#)	7 Amount of contributions (\$)
	10/19/2015	6 Contributor address;	City; Kingwood	State; Zip Code TX 77339	500.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct Self employed	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	

The Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME	Rogelio Morales	3 Filer ID (Ethics Commission filers)		
	Melvin Spinks			7 Amount of contributions (\$)
				, ,
	6 Contributor address;	City;	State; Zip Code	
10/19/2015		Cypress	TX 77429	500.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Massey Villareal	Ш		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/21/2015		Sugar Land	TX 77479	1,000.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Barry Gomel	Ь		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/22/2015		Bellaire	TX 77401	1,000.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Owner				
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Arturo Boada			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/6/2015		Houston	TX 77057	300.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
	ATTACH ADDITION	ONAL COPIES	OF THIS SCHEDUL	E AS NEEDED

NC	NON-MONETARY (IN-KIND) POLITICAL						SCHEDULE A2			
CC	NTRIB	UTIONS								
The	Instruction	Guide explains how to complete	1	Total Pages Sch	nedule A2:					
2 F	LER NAME	Rogelio Morales				3 Fi	iler ID (Ethics Commis	sion filers)		
4 T	OTAL OF U	NITEMIZED IN-KIND POLITICA	L CONTRIBI	JTIONS		\$				
5	Date	6 Full name of contributor	out of state	e PAC(ID#)						
		Lee Cook	_			8	Amount of contributions (\$)	9 In-Kind contribution description		
		7 Contributor address;	City;	State;	Zip Code		 			
	10/24/2015		Houston	TX 77036	;		1000.00	Phone Call		
							Check if travel outsid Schedule T	de of Texas, complete		
10	Principal oc	ccupation / Job title (See Instructions)		11 Employ	/er (See Instru	ction	is)			
	CEO			Phonosco	pe					
		ATTACH ADDITIO	NAL COPIES	S OF THIS	SCHEDUL	E A	S NEEDED			
		If contributor is out-of-state PAC	c, please see in	struction gui	de for additio	nal r	eporting requiremen	ts		

PL	EDGED	CONTRIBUTIONS						SCHEDULE B
The	Instruction (Guide explains how to complet	1	1 Total Pages Schedule B:				
2 FILER NAME Rogelio Morales						3	Filer ID (Ethics Co	ommission filers)
4	TOTAL OF	F UNITEMIZED PLEDGES:	=> => =	:> => => =:	>			
5	Date	6 Full name of pledgor 7 Pledgor address;	out of state City;	PAC(ID#) State;	Zip Code	8	Amount of pledge (\$)	9. In-Kind contribution description
							Check if travel outsid Schedule T	de of Texas, complete
10	Principal occ	upation / Job title (See Instructions)		11 Emplo	yer (See Instru	ıctior	is)	
		ATTACH ADDITION	ONAL COPIES	OF THIS S	CHEDULE	AS	NEEDED	
		If contributor is out-of-state PA	AC, please see in	struction guide	for additiona	ıl rep	orting requiremen	its

LC	DANS			SCHEDULE E			
	The	Instruction Guide explains ho	w to complete this	form.		1 To	otal Pages Schedule E:
2 F	ILER NAME Ro	gelio Morales				3 File	er ID (Ethics Commission filers)
4	TOTAL (OF UNITEMIZED LOANS:	=> => => :	=> => =	>		
5	Date of loan	7 Name of lender	out of state PAC(I	D#)			
		Rogelio Morales				9	Loan Amount (\$)
	10/2/2015						438.41
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Houston	TX	77006		
	Institution?					11	Maturity date
12 Principal occupation / Job title (See Instructions) 13 Employe			loyer (See Instr	uctions)			
14	Description o	f collateral		15	Check if pers		s were deposited into political account
	none					5110)	
16	GUARANTOR	17 Name of guarantor		•		19	Amount Guaranteed (\$)
	INFORMATION						
		18 Guarantor address;	City;	State;	Zip Code		
	not applicable						
20	Principal Occu	pation		21 Emp	loyer	-	

LC	OANS						SCHEDULE E		
	The	Instruction Guide explains ho	w to complete this	form.		1	Total Pages Schedule E:		
2 F	ILER NAME Ro	gelio Morales				3	Filer ID (Ethics Commission filers)		
4	TOTAL (OF UNITEMIZED LOANS:	=> => => =	:> => =	>				
5	Date of loan	7 Name of lender	out of state PAC(I	D#)					
		Rogelio Morales	_			9	Loan Amount (\$)		
	10/17/2015						700.00		
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate		
	Financial		Houston	TX	77006				
	Institution?					11	Maturity date		
12	Principal occu	upation / Job title (See Instruc	ctions)	13 Empl	oyer (See Instr	uction	s)		
14	Description o	f collateral		15			unds were deposited into political account		
	П				(See instruction	oris)			
	none					i			
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)		
	INFORMATION								
		18 Guarantor address;	City;	State;	Zip Code	•			
	not applicable								
20	Principal Occu	<u> </u> pation		21 Emp	loyer				
		•			•				
		ATTACH ADDITION	IAL COPIES OF	THIS SC	HEDUI E A	S NF	FDFD		
		If lender is out-of-state PAC, pl							

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	The Instruction Guide e	xplains how to complete this form.	
1 Total pages Schedule F1:	² FILER NAME Rogelio Mora	les	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/14/2015	Houston sign Company		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
585.70	5801 Chimney rock		
	Houston TX 77081		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Advertising Expense	Signs	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought of	fice held
expendituree to benefit C/OH			
	Roy Morales Campaign	City Council - At Large Position 4	N/A
4 Date	5 Payee name		
10/2/2015	Catherine Morales		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
100.00	8815 Braun valley		
	San Antonio TX 78254		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Tex	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Advertising Expense	Graphic Arts	
	l and g farm		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought of	fice held
expendituree to benefit C/OH			
	Roy Morales Campaign	City Council - At Large Position 4	N/A
4 Date	5 Payee name		
10/4/2015	Joshua Bullard		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
300.00	P.O. Box 667481		
	Houston TX 77266		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: ² FILER NAME Rogelio Morales Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense campaign Support Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH Roy Morales Campaign City Council - At Large Position 4 N/A 4 Date 5 Payee name 10/8/2015 **Clear Wireless** 7 Payee address; 6 Amount (\$) Zip Code City; State; 52.00 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Internet Service OTHER (enter a category not listed above) 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

City Council - At Large Position 4 N/A

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	² FILER NAME Rogelio Morale	es	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name					
10/16/2015	Whats Up Radio Program					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
8,000.00	12337 Jones Rd					
	Suite 450					
	Houston TX 77070					
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description Check if travel outside of Technology Check if Austin, TX, officeho				
9 Complete ONLY if direct	Candidate / Officehoder name	office sought o	ffice held			
expendituree to benefit C/OH	Roy Morales Campaign	City Council - At Large Position 4	N/A			
4 Date	5 Payee name					
10/19/2015	NX Media					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
1,796.95	6118 Aletha					
	Houston TX 77081					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				
	Printing Expense	Check if travel outside of Te Check if Austin, TX, officeho Campaign Material	older living expense			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held			
	Roy Morales Campaign	City Council - At Large Position 4	N/A			
4 Date	5 Payee name					
10/20/2015	Business Extension Bureau					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
1,000.00	P.O. Box 66273					
	Houston TX 77266					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: ² FILER NAME Rogelio Morales Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense OTHER (enter a category not Mail House Expense listed above) 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH Roy Morales Campaign City Council - At Large Position 4 N/A 4 Date 5 Payee name 10/21/2015 **Business Extension Bureau** 7 Payee address; 6 Amount (\$) State; Zip Code City; P.O. Box 66273 1,000.00 Houston TX 77266 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Mail House Expense OTHER (enter a category not listed above) 9 Complete ONLY if direct Candidate / Officehoder name office sought office held

City Council - At Large Position 4 N/A

expendituree to benefit C/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

		plains how to complete this form	1			
1 Total pages Schedule F1:	² FILER NAME Rogelio Morale	S	3 Filer ID (Ethics Commission filers)			
4 Date	5 Payee name					
10/21/2015	Joshua Bullard					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
300.00	P.O. Box 667481					
	Houston TX 77266					
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				
		Check if travel outside of Te	exas. complete Schedule T			
		Check if Austin, TX, officeho				
	F	campaign Support				
	Fees	Campaign Support				
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought o	ffice held			
expendituree to benefit C/OH		-				
	Roy Morales Campaign	City Council - At Large Position 4	N/A			
4 Date	5 Payee name					
10/22/2015	Business Extension Bureau					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
1,000.00	P.O. Box 66273					
·						
	Houston TX 77266					
8 PURPOSE OF EXPENDITURE		(b) Description				
		Check if travel outside of Te	exas, complete Schedule T			
		Check if Austin, TX, officeho				
	OTUED (anter a category not	Mail House Expens				
	OTHER (enter a category not listed above)	Iviali i louse Expens	Se .			
	,					
Complete ONLY if direct	Candidate / Officehoder name o	ffice sought o	ffice held			
expendituree to benefit C/OH	Carratado y Ciniconicaci Hamo	moo oodgiii.				
	Roy Morales Campaign	City Council - At Large Position 4	N/A			
4 Date	5 Payee name					
10/23/2015	Business Extension Bureau					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
1,000.00	P.O. Box 66273	·				
1,000.00	1.0.00.00210					
	Houston TV 77066					
A DUDDOCE OF EVERYDITUES	Houston TX 77266	(h) Decement on				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description				

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: ² FILER NAME Rogelio Morales Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense OTHER (enter a category not Mail House Expense listed above) 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH Roy Morales Campaign City Council - At Large Position 4 N/A 4 Date 5 Payee name 10/21/2015 Paypal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First St 29.30 San Jose CA 95131 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

City Council - At Large Position 4 N/A

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

I IXOM I OLITIOAL	001111111111111111111111111111111111111		
	The Instruction Guide ex	cplains how to complete this form	n.
1 Total pages Schedule F1:	² FILER NAME Rogelio Morale	es	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/19/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
14.80	2211 North First St		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of To	exas, complete Schedule T
		Check if Austin, TX, officeh	
	Fees	Fee	
	1 000		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/OH			
	Roy Morales Campaign	City Council - At Large Position 4	N/A
4 Date	5 Payee name		
10/19/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
14.80	2211 North First St		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of To	exas, complete Schedule T
		Check if Austin, TX, officeh	older living expense
	Fees	Fee	
	1 000		
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/OH			
	Roy Morales Campaign	City Council - At Large Position 4	N/A
4 Date	5 Payee name		
10/15/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
14.80	2211 North First St		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
	1, ,	1, ,	

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: ² FILER NAME Rogelio Morales Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fees Fee 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH Roy Morales Campaign City Council - At Large Position 4 N/A 4 Date 5 Payee name 10/9/2015 Paypal 7 Payee address; 6 Amount (\$) Zip Code City; State; 2211 North First St 7.55 San Jose CA 95131 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

City Council - At Large Position 4 N/A

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission filers) 1 Total pages Schedule F1: ² FILER NAME Rogelio Morales 4 Date 5 Payee name 10/9/2015 Paypal **6** Amount (\$) 7 Payee address; City; State: Zip Code 29.30 2211 North First St San Jose CA 95131 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH Roy Morales Campaign City Council - At Large Position 4 N/A 4 Date 5 Payee name 10/5/2015 Paypal 7 Payee address; 6 Amount (\$) City; State; Zip Code 2211 North First St 14.80 San Jose CA 95131 8 PURPOSE OF EXPENDITURE (a) Category (b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fee Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

City Council - At Large Position 4 N/A

U	NPAID INCURRED OBLIGATIONS SCHEDULE F2								
	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F2:	2	FILER NAME Rogelio	Morales	3 Filer ID (Ethics Commission filers)				
4	TOTAL OF UNITEMIZED UNPA	ID	INCURRED OBLIGATIONS		\$				
5	Date	6	Payee name						
7	Amount (\$)	8	Payee address; City;	Sta	ite; Zip Code				
9	TYPE OF EXPENDITURE		Political		Non-Political				
10	PURPOSE OF EXPENDITURE	(a)	Category	(b) D	Pescription Check if travel outside of Texas, complete Check if Austin, TX, officeholder living exp				
11	Complete ONLY if direct expendituree to benefit C/OH	Ca	andidate / Officehoder name	1	office sought	office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

E	XPENDITURES MADE BY CREDIT CARD SCHEDULE F4								
			The Instruction	on Guide explains	how	to com	plete this form.		
1	Total pages Schedule F4:	2	FILER NAME I	Rogelio Morale	s	3 Filer	r ID (Ethics Commission	filers)	
4	TOTAL OF UNITEMIZED EXPE	NDIT	URES CHARGED TO	O A CREDIT CARE)	\$			
5	Date	6	Payee name						
7	Amount (\$)	8	Payee address;	City;	Sta	ite;	Zip Code		
9	TYPE OF EXPENDITURE		Political			Non-Po	olitical		
10	PURPOSE OF EXPENDITURE	(a) C sched	Category (See Categorie: Jule)	s listed at the top of this	(b) [1	on f travel outside of Texas, co f Austin, TX, officeholder liv	·	Т
11	Complete ONLY if direct expendituree to benefit C/OH	Can	didate / Officehoder ı	name		office	sought	office h	neld

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EX	SCHEDULE G										
MADE FROM P	MADE FROM PERSONAL FUNDS										
	The Instruction Guide explains how to complete this form.										
1 Total Pages Schedule G:	² FILER NAME Rogelio Morales	3 FilerID (Ethics Commission filers)									
4 Date	5 Payee name	·									
6 Amount (\$)	7 Payee Address;	City; State; Zip Code									
Reimbursement from											
political contributions											
intended											
PURPOSE OF EXPENDITURE	(a) Category	(b) Description									
		Check if travel outside of Texas, complete Schedule T									
		Check if Austin, TX, officeholder living expense									
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held									
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDED									

	PAYMENT FROM	POLITICAL CONTRIBUTI	ONS		SCHEDULE H	
	TO A BUSINESS	OF C/OH				
		The Instruction Guide explains h	now to complete this form.			
1	Total Pages Schedule H:	² FILER NAME Rogelio Morales	3 Filer ID (Ethics Comm	nission filers)		
4	Date	5 Business name	-			
6	Amount (\$)	7 Business address;	City;	State;	Zip Code	
8	PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
			Check if travel outside			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officehoder name	Office sought	Office held		
F		ATTACH ADDITIONAL COPIES OF	THIS SCHEDIII E AS I	NEEDED		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

	L EXPENDITURES OLITICAL CONTRIBUTION	IS			SCHEDULE I
	The Instruction Guide explain	ns how to complete th	nis form.		
1 Total Pages Schedule I:	² FILER NAME Rogelio Morales	3 ACCOUNT#	Ethics Commis	sion filers)	
4 Date	5 Payee name				
6 Amount (\$)	7 Payee address;	City;		State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description (S	See instructions	regarding ty	pe of information required)
	ATTACH ADDITIONAL COPIES O	F THIS SCHED	ULE AS NEI	EDED	
•	DITS, GAINS, REFUNDS, A	ND			SCHEDULE K
CONTRIBUTIONS	RETURNED TO FILERS				
The Instructio	n Guide explains how to complete this f	orm.	1 Total Pag	es Schedu	ule K:
2 FILER NAME Rogelio I	Morales		Filer ID (Eth	nics Comm	nission filers)
·	lame of person whom amount is received ddress of person from whom amount is received	ł; City; State; Zip Cod	le	8	Amount (\$)
7 F	Purpose for which amount is received				if political contribution

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

	ANDIDATE / OFFICEHOLDER REPORT: ESIGNATION OF FINAL REPORT	FORM C/OH - FR
	e Instruction Guide explains how to complete this form.	
•• (Complete only if "Report Type" on page 1 is marked "Final Report" ••	<u></u>
1	C/OH NAME	2 ACCOUNT # (Ethics Commission filers)
3	SIGNATURE	•
	I do not expect any further political contributions or political expending that designating a report as a final report terminates my campaign to not accept any campaign contributions or make any campaign expension file.	treasurer appointment. I also understand that I may
		Signature of Candidate / Officeholder
4	FILER WHO IS NOT AN OFFICEHOLDER	
	•• Complete A & B below only if you are not an officeholder. ••	
	A. CAMPAIGN FUNDS	
	Check only one:	
	I do not have unexpended contributions or unexpended interest	est or income earned from political contributions.
	I have unexpended contributions or unexpended interest or in	ncome earned from political contributions. I
	understand that I may not convert unexpended political contri on political contributions to personal use. I also understand the contributions and that I may not retain unexpended contribution political contributions longer than six years after filing this final of unexpended political contributions and unexpended interest accordance with the requirements of Election Code, § 254.20	nat I must file an annual report of unexpended ons or unexpended interest or income earned on all report. Further, I understand that I must dispose st or income earned on political contributions in
	B. ASSETS	
	Check only one:	
	I do not retain assets purchased with political contributions or	r interest or other income from political contributions.
	I do retain assets purchased with political contributions or inte	erest or other income from political contributions.
	I understand that I may not convert assets purchased with populitical contributions to personal use. I also understand that contributions in accordance with the requirements of Election	I must dispose of assets purchased with political
		Signature of Candidate
5	OFFICEHOLDER	
•	•• Complete this section only if you are an officeholder. ••	
	I am aware that I remain subject to filing requirements applica	able to an officeholder who does not have a campaign
	treasurer on file. I am also aware that I will be required to file last required report as an officeholder, I retain political contributions, or assets purchased with political contributions	e reports of unexpended contributions if, after filing the putions, interest or other income from political
		Signature of Officeholder

CANDIDATE / OFFICEHOLDER REPORT OF UNEXPENDED CONTRIBUTIONS

FORM C/OH-UC COVER SHEET PG 1

The C/OH-UC Instruction		1 ACCOUNT # (Ethics Commission filers)					
2 CANDIDATE /	MS/MRS/MR	FIRST	MI	OFFICE	OFFICE USED ONLY		
OFFICEHOLDER				Date Received			
NAME	NICKNAME	LAST	SUFFIX				
3 CANDIDATE /	ADDRESS / PO BOX; APT/ S	SUITE #; CITY;	STATE; ZIP CODE	Date Hand-delivere	ed or Date Postmarked		
OFFICEHOLDER							
ADDRESS							
Change of Address							
4 REPORT TYPE							
	Annual		Final Disposition	Receipt #	Amount		
5 PERIOD COVERED	Month Day Yea	ar	Month Day Year	Date Processed	<u>l</u>		
		THROUGH	н	Date Imaged			
6 TOTALS	1 . TOTAL AMOUNT OF OF DEC. 31 OF THE PRI		LITICAL CONTRIBUTIONS AS	\$			
			THER INCOME EARNED ON NS DURING THE PREVIOUS	\$			
7 AFFIDAVIT			I swear, or affirm, unde accompanying report is information required to Election Code.	s true and correc	t and includes all		
				Roy Morales			
			Signature C	Candidate or Office	ceholder		
AFFIX NOTARY STAMP / SEA	AL ABOVE						
Sworn to and subscribed	d before me, by the sai	d		, this the	day		
of	, 20 , to 0	ertify which, wit	ness my hand and seal of	office.			
Signature of officer adn	inistering oath Print	name of officer	administering oath	Title of officer ad	ministering oath		

FORM C/OH-UC C/OH REPORT OF UNEXPENDED CONTRIBUTIONS **EXPENDITURES** PG₂ C/OH NAME, 9 ACCOUNT # (Ethics Commission filers) 10 Date 11 Payee name 13 **Amount** City; 12 Payee address; State; Zip Code; (\$) 14 Purpose of expenditure 15 Is expenditure a contribution to a candidate, officeholder, or Yes (If travel outside of Texas, complete schedule T) (See Instruction Guide) political committee? No ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED