CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

CAMIN AIGHT INVANCE REPORT						
The C/OH Instruction	n Guide explains how to com	plete this form	1 Filer ID(Ethics 0	Commission filers)	2 Total pages filed	
3 CANDIDATE /	MS/MRS/MR	FIRST	MI	OF	FICE USE ONLY	
OFFICEHOLDER	Hon.	Rogelio		Date Receive	d	
NAME	NICKNAME	LAST	SUFFIX	12/5/2015		
	Roy	Morales	Jr.			
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CITY;	STATE; ZIP CODE			
OFFICEHOLDER	2450 Lousiana St					
MAILING	Suite 400-224			Date Hand-delive	ered 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	МІ	Receipt #	Amount	
TREASURER	Dr.	Dorothy	E.F.	Date Process	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					
	January 15 30th day be	fore election Final r	repport (Attach C/OH - FR)	Exceeded \$500 limit		
9 REPORT TYPE		_		_		
	July 15 X 8th day before	ore election X Runof	f	15th day after campaio	gn treasurer appointment(officeholder only)	
10 PERIOD	Month Day	Year		Month	Day Year	
COVERED	10/25/201	5	THROUGH	12	/2/2015	
11 ELECTION	ELECTION DATE	ELECTION T	YPE			
	Month Day Year					
	12/12/2015	Primary	X Runoff	General	Special	
12 OFFICE	OFFICE HELD (if any)		13 OFFICE	SOUGHT (if known)		
	N/A		City C	Council - At Large I	Position 4	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 FILER NAME Rogel	io Morales		15 Filer ID (Ethics Com	mission Filers)		
	expenditures may have	f political contributions accepted or political expenditures m e been made without the candidate's or officeholder's know receive notice of such expenditures.				
16 NOTICE	COMMITTEE TYPE	COMMITTEE NAME				
FROM		Campaign For Houston				
POLITICAL	X GENERAL	COMMITTEE ADDRESS				
COMMITTEE(S)		P.O. Box 75190	P.O. Box 75190			
	SPECIFIC					
	_	Houston TX 77234				
		COMMITTEE CAMPAIGN TREASURER NAME				
		Bart				
X additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS				
		P.O. Box 75190				
		Houston 77234				
17 CONTRIBUTION TOTALS		CAL CONTRIBUTIONS OF \$50 OR LESS (ONS, OR GUARANTEES OF LOANS), UNLE		\$0.00		
	o TOTAL POLITIC	CAL CONTRIBUTIONS				
	2 TOTAL POLITIC	AL CONTRIBUTIONS		\$23,900.00		
	(OTHER THAN I	PLEDGES, LOANS, OR GUARANTEES OF	LOANS)			
EXPENDITURE	3 TOTAL POLITIC	CAL EXPENDITURES OF \$100 OR LESS, U	NLESS ITEMIZED			
TOTALS				\$		
	4 TOTAL POLITIC	CAL EXPENDITURES				
	•			\$25,934.53		
CONTRIBUTION	5 TOTAL POLITIC	CAL CONTRIBUTIONS MAINTAINED AS OF	THE LAST DAY			
BALANCE	OF REPORTING	PERIOD		\$465.47		
OUTCTANDING LOAN	C TOTAL PRINCIS	PAL AMOUNT OF ALL OUTSTANDING LOA	NS AS OF THE			
OUTSTANDING LOAN TOTALS		THE REPORTING PERIOD		\$5,838.41		
18 AFFIDAVIT						
		report is true a	rm, under penalty of perjury, the and correct and includes all info a under Title 15, Election Code.	rmation required to be		
		reported by the	, under Title 13, Election Code.	•		
			Roy Morales			
			Signature of Candidate or 0	Officeholder		
AFFIX NOT STAMP / SE	AL ABOVE					
Sworn to and subscribed	l before me, by the sai	d	, this the	day		
of	. 20	, to certify which, witness my ha	and and seal of office.			
-	, -	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Signature of officer admir	nistering oath	Print name of officer administering of	ath Title of officer	administering oath		
2.3						

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. 23900 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2. SCHEDULE B: PLEDGED CONTRIBUTIONS 3. SCHEDULE E: LOANS 2500 4. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5. 25934.53 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: FORM C/OH **NOTICE FROM POLITICAL COMMITTEE(S) 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. COMMITTEE TYPE COMMITTEE NAME 17 NOTICE **FROM** Conservative Republicans of Harris County χ GENERAL COMMITTEE ADDRESS **POLITICAL** COMMITTEE(S) P.O. Box 75190 SPECIFIC Houston TX 77234 COMMITTEE CAMPAIGN TREASURER NAME Bart COMMITTEE CAMPAIGN TREASURER ADDRESS P.O. Box 75190 Houston 77234

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	5	SCHEDULE A1	
Th	e Instruction G	Guide explains how to comple	ete 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 R S Towing	out of state F	PAC(ID#)	7 Amount of contributions (\$)	
	10/30/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77038	\$500.00	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)	
4	Date	5 Full name of contributor Efren Gonzalez	out of state I	PAC(ID#)	7 Amount of contributions (\$)	
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77015	\$5,000.00	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct Self Employed	I tions)	
4	Date	5 Full name of contributor Leopoldo Becerra	out of state I	PAC(ID#)	7 Amount of contributions (\$)	
	11/13/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	\$500.00	
8	Principal occupation / Job title (See Instructions) Owner			9 Employer (See Instructions) Post Oak Grill		
4	Date	5 Full name of contributor Bill Wong	out of state I	PAC(ID#)	7 Amount of contributions (\$)	
	11/12/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77401	\$100.00	
8	Principal occi	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)	
4	Date	5 Full name of contributor	out of state I	PAC(ID#)		

M	ONETAR	Y POLITICAL CONTRIE	BUTIONS	5	SCHEDULE A1
Th	e Instruction (Guide explains how to complete th	1 Total Pages Schedule A1:		
2 F	FILER NAME	Rogelio Morales			3 Filer ID (Ethics Commission filers)
		Associated Builders & Contractors of Greater Houston/PAC			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/13/2015		Houston	TX 77098	500.00
8	Principal occ	supation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	
		John Adams	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/18/2015		Houston	TX 77010	150.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	
		Stanton Packard	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	10/27/2015		Missouri City	TX 77159	1,000.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
	Physician			Self Employed	
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	
		Fred Griffin	_		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/4/2015		Houston	TX 77027	2,000.00
8	Principal occ	cupation / Job title (See Instructions)		9 Employer (See Instruc	I tions)
	Owner			Griffin Properties	
4	Date	5 Full name of contributor	out of state F	PAC(ID#)	

M	ONETARY	POLITICAL CONTR	RIBUTIONS	S	SCHEDULE A1
The	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	ILER NAME F	Rogelio Morales			3 Filer ID (Ethics Commission filers)
		Richmond/Weslayan, Ltd	-		7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/5/2015		Houston	TX	2,500.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	Itions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Steve Radack			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/7/2015		Houston	TX 77284	1,000.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Harris County	I tions)
4	Date	5 Full name of contributor Jack Morman	out of state	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/7/2015		Deer Park	TX 77536	1,000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Harris County	I tions)
4	Date	5 Full name of contributor Gil Ramirez	out of state	PAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/6/2015		Houston	ТХ	500.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruction Self Employed	I tions)
4	Date	5 Full name of contributor Renato Cruz	out of state	PAC(ID#)	7 Amount of contributions (\$)

MONETAR	RY POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
The Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 FILER NAME	Rogelio Morales	,		3 Filer ID (Ethics Commission filers)
11/23/2015	6 Contributor address;	City; Houston	State; Zip Code	100.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
4 Date	5 Full name of contributor Frank Gullo	out of state	PAC(ID#)	7 Amount of contributions (\$)
11/27/2015	6 Contributor address;	City; Jersey Villaç	State; Zip Code ge TX 77040	200.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
4 Date	5 Full name of contributor Raleigh Johnson	out of state	PAC(ID#)	7 Amount of contributions (\$)
11/16/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77256	100.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4 Date	5 Full name of contributor George B. Vachris	out of state	PAC(ID#)	7 Amount of contributions (\$)
11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77023	100.00
8 Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)

M	ONETAR	Y POLITICAL CONT	RIBUTIONS	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)
4	Date	5 Full name of contributor G.R. Ybarra	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City;	State; Zip Code TX 77005	1 000 00
	11/17/2015		Houston	17 77005	1,000.00
8	Principal occ President	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Wea Lee	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/22/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77072	300.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor Edward Stephens	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/17/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77054	200.00
8	Principal occ	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)
4	Date	5 Full name of contributor Margarita Hernandez	out of state	PAC(ID#)	7 Amount of contributions (\$)
	11/8/2015	6 Contributor address;	City; Houston	State; Zip Code	300.00
8	Principal occ	rupation / Job title (See Instructions)		9 Employer (See Instruct	I tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	

M	ONETARY	POLITICAL CONT	RIBUTION	S	SCHEDULE	A1
Th	e Instruction G	Guide explains how to comple	1 Total Pages Schedule A1:			
2 F	FILER NAME F	Rogelio Morales			3 Filer ID (Ethics Commission filers)	
		Rogelio Morales			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	10/29/2015		Houston	TX 77047	1,000.00	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	President			Durango Technologies		
4	Date	5 Full name of contributor	out of state	PAC(ID#)		
		Rogelio Morales	_		7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/27/2015		Houston	TX 77047	500.00	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	President			Durango Technologies		
4	Date	5 Full name of contributor	out of state	PAC(ID#)		
		Rogelio Morales			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/23/2015		Houston	TX 77047	500.00	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)	
	President			Durango Technologies		
4	Date	5 Full name of contributor	out of state	PAC(ID#)		
		Orlando Teran			7 Amount of contributions (\$)	
		6 Contributor address;	City;	State; Zip Code		
	11/30/2015		Houston	TX 77002	250.00	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	I tions)	
	Date	5 Full name of contributor	out of otet-	PAC(ID#)	Г	
4	Dale	A-1 Auto Body	U out of state	I AU(ID#)	7 Amount of contributions (\$)	

M	ONETAR	RY POLITICAL CONTR	RIBUTION	S	SCHEDULE A1
Th	e Instruction	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME	Rogelio Morales			3 Filer ID (Ethics Commission filers)
		6 Contributor address;	City;	State; Zip Code	
	11/30/2015		Houston	TX 77031	300.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Kenedia Chalmers			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	11/30/2015		Houston	TX 77079	1,000.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	Letions)
	Owner			Self Employed	
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Frank Dailey			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
	12/1/2015		Houston	TX 77008	200.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Stephen Laboride			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	•
	12/1/2015		Houston	TX 77365	500.00
8	Principal oc	ccupation / Job title (See Instructions)		9 Employer (See Instruc	I ctions)

M	ONETARY	Y POLITICAL CONTR	RIBUTIONS	5	SCHEDULE A1	
Th	e Instruction G	Guide explains how to complet	e this form.		1 Total Pages Schedule A1:	
2 F	FILER NAME F	Rogelio Morales			3 Filer ID (Ethics Commission filers)	
4	Date	5 Full name of contributor Norman Frede	out of state I	PAC(ID#)	7 Amount of contributions (\$)	
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77058	1,000.00	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct	tions)	
4	Date	5 Full name of contributor Rogelio Morales	out of state I	PAC(ID#)	7 Amount of contributions (\$)	
	12/2/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77047	500.00	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruction Durango Technologies	I tions)	
4	Date	5 Full name of contributor David Mossy	out of state I	PAC(ID#)	7 Amount of contributions (\$)	
	12/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77019	500.00	
8	Principal occu	Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Mossy Nissan		
4	Date	5 Full name of contributor Wiley Mossy	out of state I	PAC(ID#)	7 Amount of contributions (\$)	
	12/25/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77056	500.00	
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruct Mossy Nissan	I tions)	
4	Date	5 Full name of contributor	out of state I	PAC(ID#)		

MO	NETARY	POLITICAL CONTI	RIBUTIONS	5	SCHEDULE A1
The	Instruction G	uide explains how to complet	1 Total Pages Schedule A1:		
2 FIL	ER NAME R	ogelio Morales			3 Filer ID (Ethics Commission filers)
		Demetrius Navarro			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
1	12/26/2015		Bunker Hill	TX 77024	250.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		I-45 Signs			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
1	10/27/2015		Houston	TX 77037	100.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	
		Joel Perkins			7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
1	10/27/2015		Magnolia	TX 77354	250.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	DAC(ID#)	T
4	Date	Steven Finkelman	Out of state	FAC(ID#)	7 Amount of contributions (\$)
		6 Contributor address;	City;	State; Zip Code	
1	10/28/2015		Houston	TX 77096	250.00
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor	out of state	PAC(ID#)	Τ
7		Massey Villarreal		, , , , ,	7 Amount of contributions (\$)

M	ONETAR	Y POLITICAL CONTRI	BUTIONS	3	SCHEDULE A1
Th	e Instruction G	Guide explains how to complete	1 Total Pages Schedule A1:		
2 F	FILER NAME F	Rogelio Morales			3 Filer ID (Ethics Commission filers)
	11/8/2015	6 Contributor address;	City; Sugar Land	State; Zip Code TX 77479	1,000.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	Itions)
4	Date	5 Full name of contributor Perry Seeberger	out of state F		7 Amount of contributions (\$)
	11/23/2015	6 Contributor address;	City; Houston	State; Zip Code TX 77092	250.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4	Date	5 Full name of contributor Memorial West Republican Women	out of state F	PAC(ID#)	7 Amount of contributions (\$)
	11/24/2015	6 Contributor address;	City; Houston	State; Zip Code TX	500.00
8	Principal occu	upation / Job title (See Instructions)		9 Employer (See Instruc	tions)
		ATTACH ADDITION			
		If contributor is out-of-state PAC.	please see insti	ruction guide for additio	nal reporting requirements

NON-MONETARY (IN-KIND) POLITICAL							SCHEDULE A2		
CC	NTRIB	BUTIONS							
The Instruction Guide explains how to complete this form.					1	1 Total Pages Schedule A2:			
2 F	LER NAM	E Rogelio Morales				3 F	iler ID (Ethics Commis	ssion filers)	
4 T	OTAL OF	UNITEMIZED IN-KIND POLIT	ICAL CONTRI	BUTIONS		\$			
5	Date	6 Full name of contributor	out of st	ate PAC(ID#)					
5	Date	7 Contributor address:	City:	State:	Zip Code	8	Amount of contributions (\$)	9 In-Kind contribution description	
		7 Commission address,	Oity,	otate,	Zip Gode		Check if travel outsi	de of Texas, complete	
							Schedule T		
10	Principal o	occupation / Job title (See Instructions	5)	11 Empl	oyer (See Instru	iction	ns)		
		ATTACH ADDI	FIONAL COPI	ES OF THIS	SCHEDUL	E A	S NEEDED		
		If contributor is out-of-state	PAC, please see	instruction gu	ide for additio	nal r	eporting requiremen	nts	

PL	PLEDGED CONTRIBUTIONS						SCHEDULI		
The	Instruction	n Guide explains how to comp	lete this form.			1	Total Pages Sche	edule B:	
2 FILER NAME Rogelio Morales						3	Filer ID (Ethics Co	ommission filers)	
4	TOTAL	OF 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 (\$)	In-Kind contribution description	
					1		Schedule T	de of Texas, complete	
10	Principal c	occupation / Job title (See Instructions		11 Emplo	oyer (See Instru	uction	us)		
		ATTACH ADDI	TIONAL COPIES	S OF THIS S	CHEDULE	AS	NEEDED		
		If contributor is out-of-state	PAC, please see in	struction guid	e for additiona	al rep	orting requiremen	nts	

LOANS						SCHEDULE E		
The	Instruction Guide explains hov	v to complete this	form.		1 To	otal Pages Schedule E:		
LER NAME Ro	gelio Morales				3 Fil	er ID (Ethics Commission filers)		
TOTAL (OF UNITEMIZED LOANS:	=> => =>	=> => =	>				
Date of loan	7 Name of lender	out of state PAC(I	D#)					
	Rogelio Morales				9	Loan Amount (\$)		
10/29/2015						1,000.00		
Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate		
Financial		Houston	TX	77047				
Institution?					11	Maturity date		
No								
Principal occu	upation / Job title (See Instruc	tions)	13 Empl	oyer (See Instr	uctions)			
			Self Emp	loyed				
Description of	f collateral		15		rsonal funds were deposited into political account			
¬				(GCC mondon)	5110)			
	,							
	17 Name of guarantor				19	Amount Guaranteed (\$)		
INFORMATION								
	18 Guarantor address;	City;	State;	Zip Code				
not applicable								
20 Principal Occupation 21 Employer				1				
	The LER NAME Roo TOTAL O Date of loan 10/29/2015 Is Lender a Financial Institution? No Principal occur Description o none GUARANTOR INFORMATION not applicable	The Instruction Guide explains how LER NAME Rogelio Morales TOTAL OF UNITEMIZED LOANS: Date of loan 7 Name of lender Rogelio Morales 10/29/2015 Is Lender a 8 Lender Address; Financial Institution? No Principal occupation / Job title (See Instruction) Description of collateral none GUARANTOR 17 Name of guarantor INFORMATION 18 Guarantor address; not applicable	The Instruction Guide explains how to complete this LER NAME Rogelio Morales TOTAL OF UNITEMIZED LOANS: => => => => => => => => => => => => =>	The Instruction Guide explains how to complete this form. LER NAME Rogelio Morales TOTAL OF UNITEMIZED LOANS: => => => => => => => => => => => => =>	The Instruction Guide explains how to complete this form. LER NAME Rogelio Morales TOTAL OF UNITEMIZED LOANS: => => => => => => => => => => => => =>	The Instruction Guide explains how to complete this form. Instruc		

LO	ANS						SCHEDULE E
	The	Instruction Guide explains how	to complete this	form.		1	Total Pages Schedule E:
2 FI	LER NAME Roo	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(II	D#)			
		Rogelio Morales				9	Loan Amount (\$)
	11/23/2015						500.00
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Houston	TX	77047		
	Institution?					11	Maturity date
	No						
12	Principal occu	upation / Job title (See Instructi	ons)	13 Empl	oyer (See Instr	uctio	ns)
14	Description of	f collateral		15			runds were deposited into political account
	٦				(See instruction	ons)	
16	none GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)
16	INFORMATION	17 Name or guarantor				19	Amount Guaranteeu (φ)
	INFORWATION	18 Guarantor address;	City	State;	Zip Code		
	Test applicable	To Guaranior address,	City;	State,	Zip Code		
[not applicable						
20	Principal Occup	pation		21 Emp	lover		
	Timolpai Cood			Z . Zp	.0,01		
5	Date of loan	7 Name of lender	out of state PAC(II			Π	
		Rogelio Morales				9	Loan Amount (\$)
	11/27/2015						500.00
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Houston	TX	77047		
	Institution?					11	Maturity date
	No						
12	Principal occu	I	ons)	13 Empl	oyer (See Instr	uctio	ns)
	·		,				
14	Description of	f collateral		15			funds were deposited into political account
١,	· ·				(See instruction	ons)	
	none						
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)
	INFORMATION						
,	-	18 Guarantor address;	City;	State;	Zip Code		
[not applicable						
20	Principal Occup	oation		21 Emp	loyer		

LOANS							SCHEDULE E
	The	Instruction Guide explains ho	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(ID)#)			
		Rogelio Morales	_			9	Loan Amount (\$)
	12/2/2015						500.00
6	Is Lender a	8 Lender Address;	City;	State;	Zip Code	10	Interest rate
	Financial		Houston	TX	77047		
	Institution?					11	Maturity date
	No						
12	Principal occu	upation / Job title (See Instruc	ctions)	13 Emp	loyer (See Instr	uctions)	
14	Description of	f collateral		15	Check if perso (See instruction	onal funds ons)	s were deposited into political account
	none]	·	
16	GUARANTOR	17 Name of guarantor				19	Amount Guaranteed (\$)
	INFORMATION						
		18 Guarantor address;	City;	State;	Zip Code		
	not applicable						
20	Principal Occup	pation		21 Emp	loyer		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						
		If lender is out-of-state PAC, pl	ease see instruction	guide for	additional rep	orting re	quirements

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					
10/27/2015	Business Extenstion Bureau					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
1,400.00	4802 Travis St					
	Houston TX 77002					
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	(b) Description Check if travel outside of Technology Check if Austin, TX, officehords				
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	Diffice sought c	office held			
4 Date	5 Payee name					
10/30/2015	Business Extenstion Bureau					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
1,000.00	4802 Travis St					
	Houston TX 77002					
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	(b) Description Check if travel outside of Te Check if Austin, TX, officehords				
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought c	office held			
4 Date	5 Payee name					
10/30/2015	Houston Sign Company					
6 Amount (\$)	7 Payee address; City;	State; Zip Code				
585.70	5801 Chimney Rock Houston TX 77081					
8 PURPOSE OF EXPENDITURE		(b) Description				
S . SIN SOL OF ENTERDITORE	I (a) Jalogory	(10) Doddipilon				

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME Rogelio Morales Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense **Printing Expense** Signs 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 11/3/2015 The Tribune 7 Payee address; 6 Amount (\$) Zip Code City; State; 1036 First St 300.00 Humble TX 77338 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Newspaper Ad Advertising Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide ex	plains 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		
11/24/2015	What's Up Program		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
10,000.00	12337 Jones Road		
	Suite 450		
	Houston TX 77070		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description Check if travel outside of Text Check if Austin, TX, officeho	
	Advertising Expense	Magazine Ad	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held
4 Date	5 Payee name		
11/11/2015	Joshua Bullard		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
500.00			
	Houston TX		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
	Fees	Check if travel outside of Tex Check if Austin, TX, officeho Camapaign Coordir	lder living expense
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought of	fice held
experimence to benefit 6/6/1	Roy Morales Campaign	City Council - At Large Position 4	N/A
4 Date	5 Payee name		
11/12/2015	Mary Sergesketter		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3,000.00	815 Elk Run Circle		
	Houston TX 77079		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME Rogelio Morales Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Mail Consulting Consulting Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 11/12/2015 Texas Asian Republican Club 7 Payee address; 6 Amount (\$) City; State; Zip Code 20.00 Houston TX 77070 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Political Dinner Food/Beverage Expense 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form.	
1 Total pages Schedule F1:	² FILER NAME Rogelio Morale	S	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/24/2015	What's Up Program		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,000.00	12337 Jones Road		
	Suite 450		
	Houston TX 77070		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description Check if travel outside of Text Check if Austin, TX, officeho Magazine Ad	
9 Complete ONLY if direct	Candidate / Officehoder name	ffice 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		
11/24/2015	What's Up Program		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
4,000.00	12337 Jones Road		
	Suite 450		
	Houston TX		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
	Advertising Expense	Check if travel outside of Text Check if Austin, TX, officeho Magazine Ad	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought of	fice held
4 Date	5 Payee name		
11/30/2015	NX Media		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
1,066.00	6118 Altha Ln		
	Houston TX 77081		
8 PURPOSE OF EXPENDITURE		(b) Description	

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME Rogelio Morales Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Cards **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 12/1/2015 NX Media 7 Payee address; 6 Amount (\$) Zip Code City; State; 216.50 6118 Altha Ln Houston TX 77081 (b) Description 8 PURPOSE OF EXPENDITURE (a) Category Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Cards **Printing Expense** 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

City Council - At Large Position 4 N/A

Roy Morales Campaign

	The Instruction Guide exp	plains how to complete this form	
1 Total pages Schedule F1:	² FILER NAME Rogelio Morale	S	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
12/2/2015	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 Te	xas, complete Schedule T
		Check if Austin, TX, officeho	
	Drinting Evange	Signs	
	Printing Expense	Oigno	
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
12/2/2015	Business Extenstion Bureau		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
2,000.00	4802 Travis St		
2,000.00	4002 Havis Ot		
	Houston TV		
8 PURPOSE OF EXPENDITURE	Houston TX	(h) Description	
6 FURFUSE OF EXPENDITURE	(a) Category	(b) Description	one and the Oak abile T
		Check if travel outside of Te.	
		Check if Austin, TX, officeho	lder living expense
	Printing Expense	Cards	
	0 11 1 10 11 1		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name o	ffice sought of	fice held
4 Date	5 Payee name		
12/25/2015	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	

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME Rogelio Morales Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fees 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 11/25/2015 Paypal 7 Payee address; 6 Amount (\$) City; Zip Code State; 2211 North First St 14.80 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 Fees Fees 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

	The Instruction Guide ex	plains how to complete this form	
1 Total pages Schedule F1:	² FILER NAME Rogelio Morale	S	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
11/25/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7.55	2211 North First St		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te	xas, complete Schedule T
		Check if Austin, TX, officeho	lder living expense
	Fees	Fees	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought of	fice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
11/26/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
3.20	2211 North First St		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Te.	xas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Fees	•
	1 003		
9 Complete ONLY if direct	Candidate / Officehoder name	l 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		
10/27/2015	 Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7.55	2211 North First St		
1.55			
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
	\-, -, -, -, -, -, -, -, -, -, -, -, -, -, -, -, -	(· , =	

POLITICAL EXPENDITURES SCHEDULE F1 FROM POLITICAL CONTRIBUTIONS The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission filers) ² FILER NAME Rogelio Morales Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Fees Fees 9 Complete ONLY if direct Candidate / Officehoder name office sought office held expendituree to benefit C/OH 4 Date 5 Payee name 10/27/2015 Paypal 7 Payee address; 6 Amount (\$) City; Zip Code 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 Fees Fees 9 Complete ONLY if direct Candidate / Officehoder name office held office sought expendituree to benefit C/OH

I Itolii i OLIIIOAL	CONTINIDOTIONS		
	The Instruction Guide exp	plains how to complete this form	
1 Total pages Schedule F1:	² FILER NAME Rogelio Morale	S	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/28/2015	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 Te	exas, complete Schedule T
		Check if Austin, TX, officeho	older living expense
	Fees	Fees	
	1 000		
9 Complete ONLY if direct	Candidate / Officehoder name o	ffice sought of	ffice held
expendituree to benefit C/OH			
	Roy Morales Campaign	City Council - At Large Position 4	N/A
4 Date	5 Payee name		
11/8/2015	Paypal		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
7.55	2211 North First St		
	San Jose CA 95131		
8 PURPOSE OF EXPENDITURE		(b) Description	
		Check if travel outside of Te	exas, complete Schedule T
		Check if Austin, TX, officeho	
	Fees	Fees	.
	1 000		
9 Complete ONLY if direct	Candidate / Officehoder name o	l ffice sought of	ffice held
expendituree to benefit C/OH			
4 Date	5 Payee name		
10/27/2015	United Republicans		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
85.00			
	Houston TX		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		•	

POLITICAL EXPEN			SCHEDULE F1
		plains how to complete this form	
1 Total pages Schedule F1:	² FILER NAME Rogelio Morale	S	3 Filer ID (Ethics Commission filers)
		Check if travel outside of Te Check if Austin, TX, officeho Political Dinner	
Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	I Iffice sought o	ffice held
4 Date	5 Payee name		
10/26/2015	Harris County GOP		
6 Amount (\$) 83.33	7 Payee address; City;	State; Zip Code	
	Houston TX		
8 PURPOSE OF EXPENDITURE	OTHER (enter a category not	(b) Description Check if travel outside of Te Check if Austin, TX, officeho	•
9 Complete ONLY if direct expendituree to benefit C/OH			ffice held
	Roy Morales Campaign	City Council - At Large Position 4	N/A

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

E	XPENDITURES MADE BY CREDIT CARD SCHEDULE F4							
			The Instruction Guide explains	s how	to complete this form.			
1	Total pages Schedule F4:	2	FILER NAME Rogelio Moral	es	3 Filer ID (Ethics Commission filers)			
4	TOTAL OF UNITEMIZED EXPE	NDI	TURES CHARGED TO A CREDIT CAR	D	\$			
5	Date	6	Payee name					
7	Amount (\$)	8	Payee address; City;	Sta	ate; Zip Code			
9	TYPE OF EXPENDITURE		Political		Non-Political			
10	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this edule)	(d)	Description Check if travel outside of Texas, complete School Check if Austin, TX, officeholder living expense			
11	Complete ONLY if direct expendituree to benefit C/OH	Ca	ndidate / Officehoder name	1	office sought of	fice held		

POLITICAL EX	SCHEDULE G							
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	SCHEDULE H					
	TO A BUSINESS	OF C/OH					
The Instruction Guide explains how to complete this form.							
1	Total Pages Schedule H:	² FILER NAME Rogelio Morales	3 Filer ID (Ethics Commission 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 of Texas, complete Schedule T Check if Austin, TX, office holder living expense				
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officehoder name	Office sought	Office held			
F		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	OF THIS SCHED	ULE AS NE	EDED	
•	DITS, GAINS, REFUNDS, A	ND			SCHEDULE K
CONTRIBUTIONS	S RETURNED TO FILERS				
The Instruction	on Guide explains how to complete this f	orm.	1 Total Pag	jes Schedi	ıle K:
2 FILER NAME Rogelio I	Morales		Filer ID (Eth	nics Comm	nission filers)
	lame of person whom amount is received Address of person from whom amount is received	l; City; State; Zip Cod	de	8	Amount (\$)
7 F	Purpose for which amount is received				if political contribution

	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" ••						
1	C/OH NAME	2 ACCOUNT # (Ethics Commission filers)					
3	SIGNATURE	·					
	I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.						
		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	or income earned from political contributions.					
	I have unexpended contributions or unexpended interest or inco	ome earned from political contributions. I					
	understand that I may not convert unexpended political contribution on political contributions to personal use. I also understand that contributions and that I may not retain unexpended contributions political contributions longer than six years after filing this final reformation of unexpended political contributions and unexpended interest of accordance with the requirements of Election Code, § 254.204.	I must file an annual report of unexpended s or unexpended interest or income earned on eport. Further, I understand that I must dispose					
	B. ASSETS						
	Check only one:						
	I do not retain assets purchased with political contributions or int	terest or other income from political contributions.					
	I do retain assets purchased with political contributions or interest	est or other income from political contributions.					
	I understand that I may not convert assets purchased with politic political contributions to personal use. I also understand that I m contributions in accordance with the requirements of Election Co	nust 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 applicable	e to an officeholder who does not have a campaign					
	treasurer on file. I am also aware that I will be required to file re last required report as an officeholder, I retain political contribution contributions, or assets purchased with political contributions or	ons, 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	OFFICE USED ONLY			
	OFFICEHOLDER	FICEHOLDER			Date Received		
	NAME	NICKNAME	LAST	SUFFIX			
3	CANDIDATE /	ADDRESS / PO BOX;	APT/ SUITE #; CITY;	STATE; ZIP CODE	Date Hand-delivere	ed or Date Postmarked	
	OFFICEHOLDER						
	ADDRESS						
	Change of Address						
4 F	REPORT TYPE						
		Annual		Final Disposition	Receipt #	Amount	
5 F	PERIOD COVERED	Month Day	Year	Month Day Year	Date Processed	i d	
THROUGH					Date Imaged		
O 2 U			T OF UNEXPENDED PO E PREVIOUS YEAR.	LITICAL CONTRIBUTIONS AS	\$		
		2. TOTAL AMOUNT OF INTEREST AND OTHER INCOME EARNED ON UNEXPENDED POLITICAL CONTRIBUTIONS DURING THE PREVIOUS YEAR.			\$		
7 /	AFFIDAVIT	•			•		
				I swear, or affirm, under accompanying report is information required to Election Code.	s true and correc	t and includes all	
			Roy Morales				
				Signature C	Candidate or Office	ceholder	
AF	FIX NOTARY STAMP / SEAI	L ABOVE					
Sv	orn to and subscribed	before me, by the	e said		, this the	day	
of		_, 20	, to certify which, wit	ness my hand and seal of	office.		
S	gnature of officer admi	nistering 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