

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form		1 Filer ID(Ethics Commission filers)	2 Total pages filed
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI
	Mr.	Rogelio	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX;	APT/SUITE #;	CITY; STATE; ZIP CODE
	2450 Louisiana St Suite 400-224 Houston TX 77006		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(713)	320-8167	
6 CAMPAIGN TREASURER NAME	MS/MRS/MR	FIRST	MI
	Dr.	Dorothy	E.F.
7 CAMPAIGN TREASURER ADDRESS (Residence)	STREET ADDRESS (No PO Box Please);	APT/SUITE #;	CITY; STATE; ZIP CODE
	2603 Glen Haven Houston TX 77025		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(713)	665-5398	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final report (Attach C/OH - FR) <input type="checkbox"/> Exceeded \$500 limit		
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment(officeholder only)		
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	9/25/2015		10/23/2015
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
	11/3/2015		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	
	N/A	City Council - At Large Position 4	

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

14 FILER NAME Rogelio Morales 15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

additional pages

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
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

GENERAL
 SPECIFIC

17 CONTRIBUTION TOTALS	1	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$200.00
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$12,450.00
EXPENDITURE TOTALS	3	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4	TOTAL POLITICAL EXPENDITURES	\$15,260.00
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$1,176.84
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$3,338.41

18 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.

Roy Morales

Signature of Candidate or Officeholder

AFFIX NOT 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

Print name of officer administering 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
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	11450
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	1000
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	
4.	SCHEDULE E: LOANS	1200
5.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	15260
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	
8.	SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	

**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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Rogelio Morales			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Jesus Mayor	7	Amount of contributions (\$)
	10/16/2015	6 Contributor address; City; State; Zip Code Houston TX		\$1,000.00
8	Principal occupation / Job title (See Instructions) Physician		9	Employer (See Instructions) Self employed
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Beirne, Maynard & Parsons, L.L.P.	7	Amount of contributions (\$)
	10/16/2015	6 Contributor address; City; State; Zip Code Houston TX 77056		\$500.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Glen Gondo	7	Amount of contributions (\$)
	10/14/2015	6 Contributor address; City; State; Zip Code Houston TX 77082		\$500.00
8	Principal occupation / Job title (See Instructions) Owner		9	Employer (See Instructions) Self employed
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Greenberg & Company L.L.P	7	Amount of contributions (\$)
	10/7/2015	6 Contributor address; City; State; Zip Code Houston TX 77057		\$2,500.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Rogelio Morales		3	Filer ID (Ethics Commission filers)
9/29/2015	Michael Cianciola ----- 6 Contributor address; City; State; Zip Code Houston TX 77007	7	Amount of contributions (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/28/2015	James McSpadden ----- 6 Contributor address; City; State; Zip Code Houston TX 77077	7	Amount of contributions (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/28/2015	John Butler ----- 6 Contributor address; City; State; Zip Code Houston TX 77027	7	Amount of contributions (\$) 300.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/25/2015	George Strake ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
9/25/2015	Homero Anchondo ----- 6 Contributor address; City; State; Zip Code Houston TX 77056	7	Amount of contributions (\$) 200.00

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Rogelio Morales		3	Filer ID (Ethics Commission filers)
9/25/2015	6 Contributor address; City; State; Zip Code Houston TX 77007		100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) James McIngvale	7	Amount of contributions (\$)
10/12/2015	6 Contributor address; City; State; Zip Code Houston TX 77042		500.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Gallery Furniture	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Margaret Payan	7	Amount of contributions (\$)
10/6/2015	6 Contributor address; City; State; Zip Code Houston TX 77024		100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Dan Moody	7	Amount of contributions (\$)
10/5/2015	6 Contributor address; City; State; Zip Code Houston TX 77098		500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1	Total Pages Schedule A1:
2 FILER NAME Rogelio Morales			3	Filer ID (Ethics Commission filers)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Johnathan Yazdani-Beicky	7	Amount of contributions (\$)
	10/9/2015	6 Contributor address; City; State; Zip Code Houston TX 77019		1,000.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Joel Joselevitz	7	Amount of contributions (\$)
	10/9/2015	6 Contributor address; City; State; Zip Code Houston TX 77025		250.00
8	Principal occupation / Job title (See Instructions)		9	Employer (See Instructions)
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Patrick Hicks	7	Amount of contributions (\$)
	10/15/2015	6 Contributor address; City; State; Zip Code Houston TX 77063		500.00
8	Principal occupation / Job title (See Instructions) Owner		9	Employer (See Instructions) Hicks Venture
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#) Martin Basaldua	7	Amount of contributions (\$)
	10/19/2015	6 Contributor address; City; State; Zip Code Kingwood TX 77339		500.00
8	Principal occupation / Job title (See Instructions) Physician		9	Employer (See Instructions) Self employed
4	Date	5 Full name of contributor <input type="checkbox"/> out of state PAC(ID#)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule A1:
2 FILER NAME Rogelio Morales		3	Filer ID (Ethics Commission filers)
10/19/2015	Melvin Spinks ----- 6 Contributor address; City; State; Zip Code Cypress TX 77429	7	Amount of contributions (\$) 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/21/2015	Massey Villareal ----- 6 Contributor address; City; State; Zip Code Sugar Land TX 77479	7	Amount of contributions (\$) 1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10/22/2015	Barry Gomel ----- 6 Contributor address; City; State; Zip Code Bellaire TX 77401	7	Amount of contributions (\$) 1,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions)	
10/6/2015	Arturo Boada ----- 6 Contributor address; City; State; Zip Code Houston TX 77057	7	Amount of contributions (\$) 300.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.	1 Total Pages Schedule A2:
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2 FILER NAME Rogelio Morales	3 Filer ID (Ethics Commission filers)
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4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	\$
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5	Date	6 Full name of contributor	<input type="checkbox"/>	out of state PAC(ID#)	8	Amount of contributions (\$)	9 In-Kind contribution description
	10/24/2015	Lee Cook				1000.00	Phone Call
		7 Contributor address; City; State; Zip Code					
				Houston TX 77036	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T	

10 Principal occupation / Job title (See Instructions) CEO	11 Employer (See Instructions) Phonoscope
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1	Total Pages Schedule B:	
2 FILER NAME Rogelio Morales		3	Filer ID (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED PLEDGES: => => => => => =>				
5 Date	6 Full name of pledgor <input type="checkbox"/> out of state PAC(ID# ____)	8	Amount of pledge (\$)	9. In-Kind contribution description
7 Pledgor address; City; State; Zip Code		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T		
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements

LOANS		SCHEDULE E	
The Instruction Guide explains how to complete this form.		1 Total Pages Schedule E:	
2 FILER NAME Rogelio Morales		3 Filer ID (Ethics Commission filers)	
4 TOTAL OF UNITEMIZED LOANS: => => => => => =>			
5 Date of loan 10/2/2015	7 Name of lender Rogelio Morales out of state PAC(ID#)	9 Loan Amount (\$) 438.41	
6 Is Lender a Financial Institution?	8 Lender Address; Houston TX 77006 City; State; Zip Code	10 Interest rate	
		11 Maturity date	
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
14 Description of collateral <input type="checkbox"/> none		15	Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal Occupation		21 Employer	

LOANS		SCHEDULE E
The Instruction Guide explains how to complete this form.		1 Total Pages Schedule E:
2 FILER NAME Rogelio Morales		3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED LOANS: => => => => => =>		
5 Date of loan 10/17/2015	7 Name of lender Rogelio Morales out of state PAC(ID#)	9 Loan Amount (\$) 700.00
6 Is Lender a Financial Institution?	8 Lender Address; Houston TX 77006 City; State; Zip Code	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of collateral <input type="checkbox"/> none		15 Check if personal funds were deposited into political account (See instructions)
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation		21 Employer
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements		

**POLITICAL EXPENDITURES
FROM POLITICAL CONTRIBUTIONS**

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Rogelio Morales		3 Filer ID (Ethics Commission filers)
4 Date 10/14/2015	5 Payee name Houston sign Company		
6 Amount (\$) 585.70	7 Payee address; City; State; Zip Code 5801 Chimney rock Houston TX 77081		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs	
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held Roy Morales Campaign City Council - At Large Position 4 N/A		

4 Date 10/2/2015	5 Payee name Catherine Morales		
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 8815 Braun valley San Antonio TX 78254		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic Arts	
	9 Complete ONLY if direct expendituree to benefit C/OH Candidate / Officeholder name office sought office held Roy Morales Campaign City Council - At Large Position 4 N/A		

4 Date 10/4/2015	5 Payee name Joshua Bullard		
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code P.O. Box 667481 Houston TX 77266		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Rogelio Morales		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign Support
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4	office held N/A

4 Date 10/8/2015	5 Payee name Clear Wireless		
6 Amount (\$) 52.00	7 Payee address; City; State; Zip Code		

8 PURPOSE OF EXPENDITURE	(a) Category OTHER (enter a category not listed above)	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Service
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4	office held N/A
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Rogelio Morales		3 Filer ID (Ethics Commission filers)
4 Date 10/16/2015	5 Payee name Whats Up Radio Program		
6 Amount (\$) 8,000.00	7 Payee address; City; State; Zip Code 12337 Jones Rd Suite 450 Houston TX 77070		
8 PURPOSE OF EXPENDITURE	(a) Category Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertisement	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4	office held N/A

4 Date 10/19/2015	5 Payee name NX Media		
6 Amount (\$) 1,796.95	7 Payee address; City; State; Zip Code 6118 Aletha Houston TX 77081		
8 PURPOSE OF EXPENDITURE	(a) Category Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Material	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4	office held N/A

4 Date 10/20/2015	5 Payee name Business Extension Bureau		
6 Amount (\$) 1,000.00	7 Payee address; City; State; Zip Code P.O. Box 66273 Houston TX 77266		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Rogelio Morales		3 Filer ID (Ethics Commission filers)
	OTHER (enter a category not listed above)	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	Mail House Expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4	office held N/A

4 Date 10/21/2015	5 Payee name Business Extension Bureau		
6 Amount (\$) 1,000.00	7 Payee address; City; State; Zip Code P.O. Box 66273 Houston TX 77266		

8 PURPOSE OF EXPENDITURE	(a) Category OTHER (enter a category not listed above)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail House Expense
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4	office held N/A
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Rogelio Morales	3 Filer ID (Ethics Commission filers)
4 Date 10/21/2015	5 Payee name Joshua Bullard	
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code P.O. Box 667481 Houston TX 77266	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign Support
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought office held City Council - At Large Position 4 N/A

4 Date 10/22/2015	5 Payee name Business Extension Bureau	
6 Amount (\$) 1,000.00	7 Payee address; City; State; Zip Code P.O. Box 66273 Houston TX 77266	
8 PURPOSE OF EXPENDITURE	(a) Category OTHER (enter a category not listed above)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mail House Expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought office held City Council - At Large Position 4 N/A

4 Date 10/23/2015	5 Payee name Business Extension Bureau	
6 Amount (\$) 1,000.00	7 Payee address; City; State; Zip Code P.O. Box 66273 Houston TX 77266	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Rogelio Morales		3 Filer ID (Ethics Commission filers)
	OTHER (enter a category not listed above)	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	Mail House Expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4	office held N/A

4 Date 10/21/2015	5 Payee name Paypal		
6 Amount (\$) 29.30	7 Payee address; City; State; Zip Code 2211 North First St San Jose CA 95131		

8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4	office held N/A
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Rogelio Morales	3 Filer ID (Ethics Commission filers)
4 Date 10/19/2015	5 Payee name Paypal	
6 Amount (\$) 14.80	7 Payee address; City; State; Zip Code 2211 North First St San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4 N/A

4 Date 10/19/2015	5 Payee name Paypal	
6 Amount (\$) 14.80	7 Payee address; City; State; Zip Code 2211 North First St San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4 N/A

4 Date 10/15/2015	5 Payee name Paypal	
6 Amount (\$) 14.80	7 Payee address; City; State; Zip Code 2211 North First St San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Rogelio Morales		3 Filer ID (Ethics Commission filers)
	Fees	<input type="checkbox"/>	Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4	office held N/A

4 Date 10/9/2015	5 Payee name Paypal		
6 Amount (\$) 7.55	7 Payee address; City; State; Zip Code 2211 North First St San Jose CA 95131		

8 PURPOSE OF EXPENDITURE	(a) Category Fees	<input type="checkbox"/>	(b) Description Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee
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9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4	office held N/A
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**POLITICAL EXPENDITURES
FROM POLITICAL CONTRIBUTIONS**

SCHEDULE F1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Rogelio Morales	3 Filer ID (Ethics Commission filers)
4 Date 10/9/2015	5 Payee name Paypal	
6 Amount (\$) 29.30	7 Payee address; City; State; Zip Code 2211 North First St San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4 N/A

4 Date 10/5/2015	5 Payee name Paypal	
6 Amount (\$) 14.80	7 Payee address; City; State; Zip Code 2211 North First St San Jose CA 95131	
8 PURPOSE OF EXPENDITURE	(a) Category Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name Roy Morales Campaign	office sought City Council - At Large Position 4 N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID 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 UNPAID INCURRED OBLIGATIONS	\$	
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4:	2 FILER NAME Rogelio Morales	3 Filer ID (Ethics Commission filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political	<input type="checkbox"/> Non-Political
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
11 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officeholder name	office sought office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

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	
<input type="checkbox"/> Reimbursement from political contributions intended		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		<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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**PAYMENT FROM POLITICAL CONTRIBUTIONS
TO A BUSINESS OF C/OH**

SCHEDULE H

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
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
		<input type="checkbox"/> Check if Austin, TX, office holder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule I:	2 FILER NAME Rogelio Morales	3 ACCOUNT # (Ethics Commission filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description (See instructions regarding type of information required)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILERS

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total Pages Schedule K:	
2 FILER NAME Rogelio Morales	1 Filer ID (Ethics Commission filers)
4 Date	5 Name of person whom amount is received
	6 Address of person from whom amount is received; City; State; Zip Code
	7 Purpose for which amount is received
8 Amount (\$)	Check if political contribution returned to filer

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**CANDIDATE / OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT**

FORM C/OH - FR

The 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 income earned from political contributions. I

understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

I do retain assets purchased with political contributions or interest or other income from political contributions.

I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

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 to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest or other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions.

Signature of Officeholder

**CANDIDATE / OFFICEHOLDER
REPORT OF UNEXPENDED CONTRIBUTIONS**

**FORM C/OH-UC
COVER SHEET PG 1**

The C/OH-UC Instruction Guide explains how to complete this form		1 ACCOUNT # (Ethics Commission filers)	
2 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST	MI
	----- NICKNAME LAST SUFFIX		
OFFICE USED ONLY			
Date Received			
3 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT/ SUITE #; CITY;		STATE; ZIP CODE
	Date Hand-delivered or Date Postmarked		
4 REPORT TYPE	<input type="checkbox"/> Annual	<input type="checkbox"/> Final Disposition	Receipt # Amount
5 PERIOD COVERED	Month Day Year		Date Processed
	THROUGH		Date Imaged
6 TOTALS	1 . TOTAL AMOUNT OF UNEXPENDED POLITICAL CONTRIBUTIONS AS OF DEC. 31 OF THE PREVIOUS YEAR.		\$
	2. TOTAL AMOUNT OF INTEREST AND OTHER INCOME EARNED ON UNEXPENDED POLITICAL CONTRIBUTIONS DURING THE PREVIOUS YEAR.		\$

7 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.

Roy Morales

Signature Candidate or Officeholder

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 Print name of officer administering oath Title of officer administering oath

**C/OH REPORT OF UNEXPENDED CONTRIBUTIONS
EXPENDITURES**

**FORM C/OH-UC
PG 2**

8 C/OH NAME ,		9 ACCOUNT # (Ethics Commission filers)	
10 Date	11 Payee name , ----- 12 Payee address; City; State; Zip Code;	13 Amount (\$)	
14 Purpose of expenditure (If travel outside of Texas, complete schedule T) (See Instruction Guide)		15 Is expenditure a contribution to a candidate, officeholder, or political committee? <input type="checkbox"/> Yes <input type="checkbox"/> No	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED