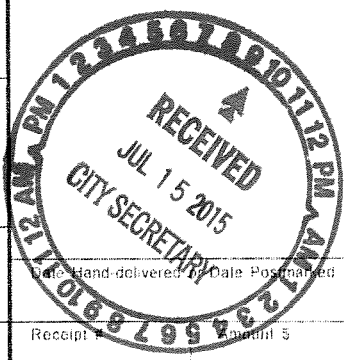


# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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: <b>9</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR                      FIRST                      MI Hon Rogelio                      LAST                      SUFFIX Rog Morales                      Jr	OFFICE USE ONLY	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX    APT / SUITE #    CITY    STATE    ZIP CODE 2450 Louisiana St STE 400-224 Houston TX 77006	 Date Received Date Hand-delivered    Date Postmarked Receipt #    month 5 Date Processed Date Imaged	
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. Casam                      LAST                      SUFFIX		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	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"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 9th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month    Day    Year                      THROUGH                      Month    Day    Year 01    01    2015                      6    30    2015		
11 ELECTION	ELECTION DATE Month    Day    Year 11 / 02 / 2015	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) Houston City Council At Large Position 4	

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME Rogelio Morales 15 Filer ID (Ethics Commission Filers)

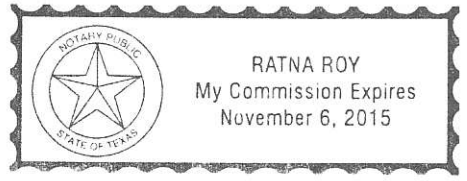
16 NOTICE FROM POLITICAL COMMITTEE(S)  
THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 16,800.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 451,30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 16,348.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

Rogelio Morales J  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rogelio Morales Jr, this the 15<sup>th</sup> day of July, 2015, to certify which, witness my hand and seal of office.

Ratna Roy Signature of officer administering oath  
RATNA ROY Printed name of officer administering oath  
Balller 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  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 16,300.00
2.	<input checked="" type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 500.00
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 451.30
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	<input type="checkbox"/>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3

2 FILER NAME

Rogelio Morales Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

5/22/15

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Efren Gonzalez Jr.

7 Amount of contribution (\$)

\$2,500.00

6 Contributor address; City; State; Zip Code

Houston TX 77015

8 Principal occupation / Job title (See Instructions)

Restaurant Owner

9 Employer (See Instructions)

Tepatitlan Restaurants

Date

6/2/15

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Efren Gonzalez Jr.

Amount of contribution (\$)

\$2,500.00

Contributor address; City; State; Zip Code

Houston TX 77015

Principal occupation / Job title (See Instructions)

Restaurant Owner

Employer (See Instructions)

Tepatitlan Restaurants

Date

6/22/15

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Mickey Ellis

Amount of contribution (\$)

\$5,000.00

Contributor address; City; State; Zip Code

Houston TX 77094

Principal occupation / Job title (See Instructions)

Homemaker

Employer (See Instructions)

Date

6/17/15

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Ramsay Elder

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

Houston TX 7705

Principal occupation / Job title (See Instructions)

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3

2 FILER NAME

Rogelio Morales, Jr

3 Filer ID (Ethics Commission Filers)

4 Date

6/25/15

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

A. E. Frank

7 Amount of contribution (\$)

\$300.00

6 Contributor address; City; State; Zip Code

Houston TX 77050

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

6/25/15

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Shane T. Frank

Amount of contribution (\$)

\$300.00

Contributor address; City; State; Zip Code

Bellaire TX 77401

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/29/15

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Stanton C. Packard

Amount of contribution (\$)

\$1000.00

Contributor address; City; State; Zip Code

Missouri City TX 77459

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Physician

Self Employed

Date

6/25/15

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Manuel Rodriguez

Amount of contribution (\$)

\$100.00

Contributor address; City; State; Zip Code

Houston TX 77057

Principal occupation / Job title (See Instructions)

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.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3

2 FILER NAME

Rogelio Morales Jr

3 Filer ID (Ethics Commission Filers)

4 Date

6/19/15

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Steven Finkelman

7 Amount of contribution (\$)

\$500.00

6 Contributor address; City; State; Zip Code  
Houston TX 77096

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

6/30/15

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Richmond/Weslayan, Ltd

Amount of contribution (\$)

\$2,500.00

Contributor address; City; State; Zip Code

Houston TX 77057

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6/30/15

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

G.R. Ybarra

Amount of contribution (\$)

\$1,000.00

Contributor address; City; State; Zip Code

Houston TX 77005

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Restaurant Owner

Ybarra Franchising Group

Date

6/30/15

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)

Wea Lee

Amount of contribution (\$)

\$500.00

Contributor address; City; State; Zip Code

Houston TX 77072

Principal occupation / Job title (See Instructions)

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: <p style="text-align: center;">1</p>	
2 FILER NAME <p style="text-align: center;">Rogelio Morales</p>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 500.00	
5 Date	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="text-align: center;">Polo Becerra</p>	8 Amount of Contribution \$	9 In-kind contribution description
	7 Contributor address; City; State; Zip Code <p style="text-align: center;">Houston TX 77056</p>	<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <p style="text-align: center;">Restaurant owner</p>		11 Employer (FOR NON-JUDICIAL) (See Instructions) <p style="text-align: center;">Post Oak Grill</p>	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="text-align: center;">Contributor address; City; State; Zip Code</p>	Amount of Contribution \$	In-kind contribution description
		<input type="checkbox"/> Check if travel outside of Texas, complete Schedule T	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <i>2</i>	<b>2</b> FILER NAME <i>Rogelio Morales</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>5/29/15</i>	<b>5</b> Payee name <i>El Tiempo Cantina</i>	
<b>6</b> Amount (\$) <i>\$299.40</i>	<b>7</b> Payee address; City; State; Zip Code <i>2814 Navigation Blvd Houston TX 77003</i>	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule)  <i>Event Expense</i>	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: <i>Roy Morales</i> Office sought: <i>Houston City Council At Large 4</i> Office held:	
Date <i>6/18/15</i>	Payee name <i>Houston Sign Company</i>	
Amount (\$) <i>\$75.78</i>	Payee address; City; State; Zip Code <i>5801 Chimney Rock Rd Houston TX 77081</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  <i>Printing Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: <i>Roy Morales</i> Office sought: <i>Houston City Council At Large 4</i> Office held:	
Date <i>6/19/15</i>	Payee name <i>Harry's Restaurant</i>	
Amount (\$) <i>\$48.03</i>	Payee address; City; State; Zip Code <i>318 Tuam St Houston TX 77006</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)  <i>Political Meeting Expense</i>	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name: <i>Roy Morales</i> Office sought: <i>Houston City Council At Large 4</i> Office held:	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 2	<b>2</b> FILER NAME Rogelio Morales	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 6/29/15	<b>5</b> Payee name Cafe Express
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<b>6</b> Amount (\$) \$28.09	<b>7</b> Payee address; City; State; Zip Code 1101 Uptown Park Blvd Houston TX 77056
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) Political Meeting Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---	--	---

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Roy Morales	Office sought Houston City Council At Large 4	Office held
---	--	--	-------------

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED