JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The JC/OH Instruction Guide explains how to complete this form. 55 MS / MRS / MR CANDIDATE / OFFICE USE ONLY **OFFICEHOLDER** Мг. Christopher G. NAME Date Received NICKNAME LAST SUFFIX Chris Morales CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; STATE; ZIP CODE . JAN 13 20**1**2 RCVD OFFICEHOLDER 310 Morton St., Ste. 575 MAILING Richmond, Texas 77469 **ADDRESS** Change of Address AREA CODE PHONE NUMBER CANDIDATE/ EXTENSION Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (281)795-6107 PHONE Amount \$. . Receipt # MS / MRS / MR FIRST **CAMPAIGN** TREASURER Mrs. Janice Date Processed NAME NICKNAME LAST SUFFIX Date Imaged Knight STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; STATE; **CAMPAIGN** TREASURER 1502 Old Elm Trail ADDRESS Sugar Land, Texas 77471 (Residence or Business) CAMPAIGN AREA CODE PHONE NUMBER EXTENSION TREASURER PHONE)582-7007 (713 9 REPORT TYPE January 15 15th day after campaign 30th day before election Runoff treasurer appointment (Officeholder Only) Exceeded Modified July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD Month COVERED 31 07 2021 12 **/ 2021** 01 THROUGH ELECTION DATE **ELECTION TYPE** 11 ELECTION **Primary** Runoff Other Month Day Year General Special 03 01 2022 13 OFFICE SOUGHT (If known) 12 OFFICE OFFICE HELD (If any) Judge, Fort Bend County Court at Law No. 1 Judge, Fort Bend County Court at Law No. 1 THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICENOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICENOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICENOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. 14 NOTICE FROM POLITICAL COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

JUDICIAL CANDIDATE / OFFICEHOLDER

FORM JC/OH COVER SHEET PG 2

CAMPAIGN	FINANCE REPOR	ζΙ 			VEK SHE	E1 PG 2
15 JC/OH NAME Christopher G.	Morales	:		16 Filer ID	(Ethics Commis	sion Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED PO PLEDGES, LOANS, OR CONTRIBUTIONS MADE	GUARANTEES OF LO			0.00	· .: ·
	2. TOTAL POLITICAL CO (OTHER THAN PLEDGES		ANTEES OF LOANS)	\$	46,074.50)
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	LITICAL EXPENDITUI	RE.		713.76	
	4. TOTAL POLITICAL EX	PENDITURES			23,527.99	· · ·
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONT OF REPORTING PERIOD		NED AS OF THE LAS	STDAY	27,328.55	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT LAST DAY OF THE REPO		NDING LOANS AS O	FTHE	0.00	
18 SIGNATURE I s	wear, or affirm, under penalty of per	ury, that the accomp	anying report is true	and correct	t and includes	all information
3	quired to be reported by me under Title			//		
			1			A-9.
*	•			·		
• • •	er en	·:	Signature of Ca	indidate/Offi	ceholder	
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· .	Please c	omplete eithe	r option belov	v:		
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· general	ATTEN OF STEEN	÷ .				:
	EGINA G GREEN			•		. :
(1) And On The	1923618 ARY PUBLIC, STATE OF TEXAS					
NOT	AY COMMISSION EXPIRES					
COF DE	JULY 26, 2025					
Sworn to and subscribed	d before me by DTC SAD	816-M	naleSthis the	1040	day of Jar	Mary
				·\	<u> </u>	1
20 do to contif	which, witness my hand and seal of of		22	1.1-	_ , D ,	hlic
HI NOWA	a roll Kegin	au.Une	とし	Votai	UJ JU	UIL
Signature of difficer administ	ering oath Printed nam	e of officer administerir	ng oath	Ti	itle of officer adm	ninistering oath
		OR				
(2) Unsworn Declarat	ion					
(*/ Unsworn Deciarat	u011	1				
	N			:		
My name is	1.1	, an	d my date of birth is	· ——		······································
My address is						·
	(street)	<u>;</u> :	(city) (state) (zi	p code) (c	ountry).
Executed in	County, State of	on the	day of	·	20 .	٠,
			(mont	h)	(year)	
,						
			Signature of Candi	date/Officeh	older (Declaran	t) .

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

19 FILERNAME	mmission Filers)	
Christopher G. Morales	÷.	
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 45,025.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		^{\$} 1049.50
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL COL	NTRIBUTIONS	^{\$} 22,814.23
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL (CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	NDS	\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS RETURNED	\$

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

· T	he Instruction Guide explains h	ow to complete this f	orm.	1 Total pages Schedule A(J)1: 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Christopher (G. Morales			a d
4 Date 8/25/2021	5 Full name of contributor Regina L. Morales	out-of-state PAC	D#:)	7 Amount of contribution (\$) \$2500.00
	6 Contributor address: 5030 Bryan Rd., Rich	city:	State; Zip Code	
8 Contributor's	principal occupation		9 Contributor's job title	
	ness Owner		Owner / CEO	
	employer/law firm De Associates LLC		11 Law firm of contributor	r's spouse (if any)
12 If contributor i	s a child, law firm of parent(s) (f any)	· .	
N/A	•			
Date 9/16/2021	Full name of contributor James Nestor	out-of-state PAC	ID#:	Amount of contribution (\$) \$250.00
	Contributor address; 1818 Birnam Glen Dr	city; :, Sugar Land,	State; Zip Code TX 77479	
Contributor's Attorney	principal occupation		Contributor's job title Attorney	
Contributor's Comerica B	employer/law firm Bank		Law firm of contributo	r's spouse (if any)
If contributor I	is a child, law firm of parent(s) (l	f any)		•
Date 9/19/2021	Full name of contributor David Vrshek	out-of-state PAC	ID#:)	Amount of contribution (\$) \$25.00
	Contributor address; 1006 Cleistes Ln., Ric	chmond, TX 77	State: Zip Code 469	
Contributor's Retired	principal occupation		Contributor's job title Retired	
Contributor's	employer/law firm		Law firm of contribute	or's spouse (if any)
N/A			N/A	· ·
	is a child, law firm of parent(s) (if any)		
N/A	<u> </u>	*.		
	4.1		v* :	
	ATTACH ADD	ITIONAL COPIES	OF THIS SCHEDULE AS	NEEDED

Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

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

Revised 11/4/2020

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

TI	he Instruction Guide expla	ins how to complete this t	form.	1 Total pages Schedule A(J)1: 32
2 FILER NAME		···.		3 Filer ID (Ethics Commission Filers)
Christopher (G. Morales	•	41.	.**
4 Date 10/1/2021	5 Full name of contribute Bradley Stavinoha	Or	ID#:)	7 Amount of contribution (\$) \$50.00
	6 Contributor address; 10522 Will Lehmani	City;	State; Zip Code	
Insurance A	rincipal occupation Agent		9 Contributor's job title Owner of Small Busin	ness
10 Contributor's e Needville Ins			11 Law firm of contributor	's spouse (if any)
12 if contributor is	a child, law firm of parent	(s) (if any)		
N/A				
Date 10/1/2021	Full name of contribut Sudarshana Pariki		ID#:)	Amount of contribution (\$) \$100.00
*	Contributor address; 414 Alkire Lake Ln.	city; , Sugar Land, TX 77		
	rincipal occupation	•	Contributor's job title Attorney at Law	
Attorney			Attorney at Law	<u>:</u>
Contributors e Self Employe	mployer/law firm d	V	N/A	's spouse (if any)
	a child, law firm of parent	(s) (if any)	÷.	
N/A				
Date 10/1/2021	Full name of contribut Ed deZevallos	or	ID#:)	Amount of contribution (\$) \$500.00
	Contributor address;	Clty;	State: Zip Code	·.
	9225 Katy Freeway	Suite 208, Houston	n, TX 77024	
	rincipal occupation		Contributor's job title	
Retired			Retired	
Contributor's e	mployer/law firm	41.	Law firm of contributor N/A	r's spouse (if any)
	a child, law firm of parent	(s) (if any)		
		* ***		1 41 4 141
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SCHEDULE A(J)1

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. т	he Instruction Guide explains ho	ow to complete this i	form.	1 Total pages Schedule A(J)1: 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Christopher	G. Morales			
4 Date 10/1/2021	5 Full name of contributor Pam Koepke		ID#:)	7 Amount of contribution (\$)* \$100.00
	6 Contributor address: 22918 Jamie Brook Ln.,	City; Katy, TX 77494	State: Zip Code	
8 Contributor's	principal occupation		9 Contributor's job title	
Part Owner		- ,	Co-Owner	
•	employer/law firm		11 Law firm of contributo	r's spouse (if any)
Gurecky Mfg			N/A	
	s a child, law firm of parent(s) (if	anyl		
N/A	S & Gind, Ida IIIII oi parent(s) (II			
Date			24	Amount of contribution (\$)
10/2/2021	Full name of contributor Ellen Hughes	out-of-state PAC	ID#:	\$200.00
,	Contributor address;	City;	State: Zip Code	
	1715 Misty Fawn Ln., Fr	esno, TX 77545	•	×1
Contributor's	principal occupation		Contributor's job title	
Office Manag	jer , "		Office Manager	\mathbf{v}_{i_1}
Contributor's Odyssey Eng	employer/law firm . Group	· · · · · · · · · · · · · · · · · · ·	Law firm of contributo	r's spouse (if any)
If contributor i	is a child, law firm of parent(s) (if	any)		
N/A				
Date 10/2/2021	Full name of contributor Lynne Humphries	out-of-state PAC	ID#:)	Amount of contribution (\$) \$250.00
,	Contributor address; 1515 Savannah Dr., Ric	City; chmond, TX 774		
Contributor's Attorney	principal occupation		Contributor's job title Owner	
Contributor's	employer/law firm		Law firm of contribute	or's spouse (if any)
Allen Boone I	Humphries Robinson (AB	HR)	N/A	25
	is a child, law firm of parent(s) (if		<u> </u>	
N/A	i_{ij} .			200
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	ATTACH ADDI	TIONAL CODIES	OF THIS SCHEDIII E AS	NEEDED

SCHEDULE A(J)1

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	The Instruction Guide explains h	ow to complete this	form.	1 Total pages Schedule A(J)1: 32
FILER NAME				3 Filer ID (Ethics Commission Filers
Christopher	G. Morales	•		,
Date 10/7/2021	5. Full name of contributor Vijaya Rapolu	out-of-state PAC	ID#:	7 Amount of contribution (\$) \$1500.00
	6 Contributor address;	City;	State; Zip Code	
	27822 Acacia Glen Ln.,	Katy, TX 77494		
3 Contributor's	principal occupation	r gry	9 Contributor's job title	
Civil Engine	eer		Engineer	
	employer/law firm		11 Law firm of contributor	's spouse (if anv)
Kavi Consu			N/A	
2 If contributor	is a child, law firm of parent(s) (if	fany)	.:	
N/A	7.			
	<u> </u>	· ·.		4.
Date	Full name of contributor	[] bin et 8:0	1046 - 1755 - X	Amount of contribution (\$)
10/7/2021	Bridget Yeung	out-of-state PAC	IU#:	\$250.00
. 0, . , _ 0		•••••		4200.00
	Contributor address;	City;	State; Zip Code	
	538 Lombardy Dr., Suga	ar Land, TX 774	78	
Contributor's Financial Ad	principal occupation VISOr.		Contributor's Job title Financial Advisor	· ·
Contributor's Fort Bend Fi	employer/law firm inancial		Law firm of contributor	's spouse (if any)
If contributor	is a child, law firm of parent(s) (if	f any)	1	
N/A	, , , , , , , , , , , , , , , , , , , ,			
	•			
Date 10/7/2021	Full name of contributor David Vrshek	out-of-state PAC	ID#:)	Amount of contribution (\$) \$50.00
				<u>".</u>
,	Contributor address;	City;	State: Zip Code	
	1006 Cleistes Ln., Richi	mond, TX 77469)	
Contributor's	principal occupation	• •	Contributor's job title	· , ,
Retired			Retired	· .
Contributor's	employer/law firm		Law firm of contributo	r's spouse (if any)
\/A ·			N/A	: **
	is a child, law firm of parent(s) (f any)	<u> </u>	
	And the second of the second o			
N/A				
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SCHEDULE A(J)1

. 7	The Instruction Guide explains how t	o complete this f	orm.	1 Total pages Schedule A(J)1:
2 FILER NAME		• • • • • • • • • • • • • • • • • • • •		3 Filer ID (Ethics Commission Filers
Christopher	G. Morales			
Date 10/7/2021	5 Full name of contributor [Freddy O'Pry	out-of-state PAC	D#:	7 Amount of contribution (\$) \$100.00
	6 Contributor address;	City;	State; Zip Code	
<u>.</u>	1622 Deerfield Ct., Richmo	ond, TX 7740	6 :	
8 Contributor's	principal occupation		9 Contributor's job title	
Franchise O	wner & Sales		Owner	
•	employer/law firm Development		11 Law firm of contributor	's spouse (if any)
12 If contributor	is a child, law firm of parent(s) (if any	()	,	rational de la constant de la const
N/A				Hard Market Control of the Control o
•				<u>, e</u>
Date		out-of-state PAC	D#:	Amount of contribution (\$)
10/8/2021	Betsy de Vega	$\mathcal{A}_{\mathcal{A}}$		\$100.00
`. 	Contributor address;	City;	State; Zip Code	
	8139 Running Brook Ln., F	Richmond, TX	77469	
Contributor's Small Busines	principal occupation ss Owner	Ţ.	Contributor's job title Owner and Founder	
Contributor's KnILE Center	employer/law firm		Law firm of contributor	r's spouse (if any)
If contributor	is a child, law firm of parent(s) (if any	y)		· · · · · · · · · · · · · · · · · · ·
N/A				
Date 10/10/2021	Full name of contributor Geoffrey Sansom	Out-of-state PAC	ID#:)	Amount of contribution (\$) \$1000.00
	Contributor address; 6014 Sanford Rd., Houstor	City: 1, TX 77096	State: Zip Code	
	principal occupation		Contributor's job title	
Attorney			Attorney at Law	
	employer/law firm	21	Law firm of contributo	r's spouse (if any)
Self Employe	ed is a child, law firm of parent(s) (if any		N/A	· · · · · · · · · · · · · · · · · · ·
, ii wiitibutor	is a crino, law him or parent(s) (if any	Y)		vi.
N/A		1 .		40

SCHEDULE A(J)1

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7	The Instruction Guide explains h	ow to complete this	form.	1 Total pages Schedule A(J)1:
FILER NAME		:		3 Filer ID (Ethics Commission Filers)
Christopher	G. Morales			
Date 0/13/2021	5 Full name of contributor Kenneth Sumner Jr.	Out-of-state PAC	1D#:	7 Amount of contribution (\$) \$1000.00
	6 Contributor address;	City;	State; Zip Code	
	4610 Sweetwater Blvd.	, Suite 200, Sug	· · · · · · · · · · · · · · · · · · ·	
Contributor's Attomey	principal occupation		9 Contributor's job title Co-Owner / Partne	
	employer/law firm Sumner, PLLC		11 Law firm of contributo	r's spouse (if any)
2 If contributor i	s a child, law firm of parent(s) (if	f any)		
Date 0/14/2021	Full name of contributor Richard Tate	Out-of-state PAC	ID#:)	Amount of contribution (\$):
	Contributor address; 206 South 2nd St., Rich	City; mond, TX 77469	State; Zip Code	
Contributor's (principal occupation	;	Contributor's Job title	
Contributor's delf Employed	employer/law firm		Law firm of contributo	r's spouse (if any)
If contributor i	s a child, law firm of parent(s) (if	f any)		
Date 10/14/2021	Full name of contributor Ted Volf	out-of-state PAC	ID#:	Amount of contribution (\$) \$100.00
	Contributor address; 35 Dartmoor St., Sugar	City; Land, TX 77479	State: Zip Code	
Contributor's	principal occupation	· .	Contributor's job title	1
Retired		•	Retired	
Contributor's	employer/law firm		Law firm of contributo	or's spouse (If any)
N/A			N/A	S. S. State of the
	s a child, law firm of parent(s) (f	f any)	<u> </u>	<u> </u>
N/A			· ·:	
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SCHEDULE A(J)1

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T	he Instruction Guide explains h	ow to complete this t	form.	1 Total pages Schedule A(J)1: 32	: •
2 FILER NAME	* 4.	:		3 Filer ID (Ethics Commission Filers	s)
Christopher (G. Morales				· ·
4 Date 10/15/2021	5 Full name of contributor Abram Sustaita	out-of-state PAC	ID#:	7 Amount of contribution (\$) \$500.00	*
	6 Contributor address;	City;	State; Zip Code		
	13926 Emerald Forest (Ct., Sugar Land,	TX 77478		13.
8 Contributor's p	principal occupation		9 Contributor's job title Owner		
10 Contributor's e Sustaita Arch			11 Law firm of contributor N/A	r's spouse (if any)	
	s a child, law firm of parent(s) (if	any)			•: .
N/A		:			
Date 10/15/2021	Full name of contributor Rafael Ortega	out-of-state PAC	ID#:)	Amount of contribution (\$) \$250.00	
	Contributor address; 2121 Sage Rd., Suite 15	City;	State; Zip Code		
Contributors (principal occupation		Contributor's job title President	<u> </u>	- 1 1. - 2 2 - 2
	employer/law firm ical Services, LLC		Law firm of contributo	r's spouse (if any)	
If contributor i	s a child, law firm of parent(s) (i	f any)			
N/A					-
Date 10/15/2021	Full name of contributor Larry Janak	out-of-state PAC	ID#:)	Amount of contribution (\$) \$250.00	
	Contributor address:	City;	State: Zip Code		
	15915 Katy Fwy. #300,				•
Contributors Civil Enginee	principal occupation		Contributor's job title Engineer	*	
Contributors IDCUS Inc.	employer/law firm		N/A	or's spouse (If any)	
If contributor I	s a child, law firm of parent(s) (i	f any)	. 1		.:
N/A			* 		
				V.,	

SCHEDULE A(J)1

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1	he Instruction Guide explains how to complete	e this form.	1 Total pages Schedule A(J)1: 32	
2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
Christopher	G. Morales			
4 Date 10/15/2021	5 Full name of contributor	e PAC ID#:	7 Amount of contribution (\$) \$1000.00	
	6 Contributor address; City; 3323 Ave. H, Rosenberg, TX 7747	State; Zip Code		
S. Contributorio	principal occupation	· · · · · · · · · · · · · · · · · · ·	1	7.67
Owner	orincipal occupation	9 Contributor's job title Owner		
	employer/law firm Engine Repair	11 Law firm of contribute N/A	or's spouse (if any)	
12 If contributor I	s a child, law firm of parent(s) (if any)			
N/A				
Date 10/16/2021	Full name of contributor ut-of-state	e PAC ID#:	Amount of contribution (\$) \$500.00	
	Contributor address; City; 1303 Foster Creek Dr., Richmond,	State; Zip Code		
Contributor's Consultant	principal occupation	Contributor's job title Owner		
	employer/law firm t & Associates	Law firm of contribute	or's spouse (if any)	
If contributor I	s a child, law firm of parent(s) (if any)	: :	:	* .
Date 10/18/2021	Full name of contributor	e PAC ID#:	Amount of contribution (\$) \$250.00	
	Contributor address; City; 212 Jackson St., Richmond, TX 774	State: Zip Code		
Contributor's Attorney	principal occupation	Contributor's job title Attorney at Law		· · ·
Contributor's	employer/law firm	Law firm of contribut	or's spouse (if any)	
Junker Law P		N/A	· · · · · · · · · · · · · · · · · · ·	• • •
If contributor	s a child, law firm of parent(s) (if any)			
N/A	. 10			

SCHEDULE A(J)1

If the reque	sted information is not ap	plicable, DO NO	T include this page i	n the report.
т	he Instruction Guide explains ho	ow to complete this f	orm.	1 Total pages Schedule A(J)1: 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Christopher (G. Morales			
4 Date 10/18/2021	5 Full name of contributor Terri Wang	Out-of-state PAC	D#:)	7 Amount of contribution (\$) \$50.00
1. 1.	6 Contributor address;	City;	State; Zip Code	12
	5139 Avondale Dr., Sug	ar Land. TX 774	179	
8 Contributor's p	principal occupation		9 Contributor's job title	
Community L			Community Leader	
10 Contributor's e	employer/law firm		11 Law firm of contributor	
12 If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>	
N/A				
Date	Full name of contributor	uut-of-state PAC	ID#:)	Amount of contribution (\$)
10/18/2021	David Vrshek	-		\$50.00
	Contributor address; 1006 Cleistes Ln., Richn	City; nond, TX 77469	State: Zip Code	
Contributor's p	principal occupation		Contributor's job title	:
Contributor's e	employer/law firm		Law firm of contributo	r's spouse (If any)
If contributor is	s a child, law firm of parent(s) (If	any)		-
N/A				
Date 10/18/2021	Full name of contributor Michael Griffin	Out-of-state PAC	ID#:	Amount of contribution (\$) \$100.00
	Contributor address; 3003 South Loop West,	City; #206, Houston,	State: Zip Code	•
Contributor's Attorney	orincipal occupation	-	Contributor's job title Owner/Partner	
Contributor's	employer/law firm		Law firm of contributo	or's spouse (if any)
Griffin & Griffi			Griffin & Griffin	
if contributor i	s a child, law firm of parent(s) (if	any)		
N/A	· .		"	
			1 9'	· · · · · · · · · · · · · · · · · · ·
			* 1	
. 18	ATTACH ADDI contributor is out-of-state PA	TIONAL COPIES (C, please see Instru	OF THIS SCHEDULE AS uction guide for additiona	NEEDED I reporting requirements.

SCHEDULE A(J)1

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	The Instruction Guide explains he	ow to complete this	s form.	1 Total pages Schedule A(J)1: 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Christopher	G. Morales			
4 Date 10/18/2021	5 Full name of contributor Shernil BeMent	out-o1-state PAC	: ID#:	7 Amount of contribution (\$) \$100.00
	6 Contributor address; 29002 Walker Ln., Richi	City;	State; Zip Code	
8 Contributor's Retired	principal occupation		9 Contributor's job title Retired	
10 Contributor's N/A	employer/law firm		11 Law firm of contributo N/A	r's spouse (if anÿ)
12 If contributor	is a child, law firm of parent(s) (if	any)		
N/A	1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Date 10/18/2021	Full name of contributor Connie Williarns	out-of-state PAC	D#:	Amount of contribution (\$) \$200.00
	Contributor address; 2900 Smith St., Ste. 230	City; , Houston, TX	State; Zip Code 77006	
Contributor's Attorney	principal occupation .		Contributor's Job title Attorney at Law	
Contributor's Self Employe	employer/law firm		Law firm of contributo	r's spouse (if any)
If contributor	is a child, law firm of parent(s) (if	any)	:	
N/A	· ·			
Date 10/19/2021	Full name of contributor Synda Frost	Out-of-state PAC) ID#:)	Amount of contribution (\$) \$500.00
	Contributor address; 7021 FM 1489, Simonton	City; n, TX 77476	State: Zip Code	
Contributor's Retired	principal occupation		Contributor's job title Retired	
Contributor's	employer/law firm		Law firm of contributo	or's spouse (if any)
N/A	· · · · · · · · · · · · · · · · · · ·		N/A	
If contributor	is a child, law firm of parent(s) (if	any)		
N/A			40 1	
/. . · ·	ATTACH ADDI	TIONAL COPIES	OF THIS SCHEDULE AS	NEEDED Il reporting requirements.

SCHEDULE A(J)1

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	The Instruction Guide explains h	ow to complete this	form.	1 Total pages Schedule A(J)1: 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Christopher	G. Morales			į.
4 Date 10/19/2021	5 Full name of contributor Karen Gollaher	out-of-state PAC	ID#:	7 Amount of contribution (\$) \$500.00
	6 Contributor address: 9119 Highway 6, Suite	City; 230. Missouri C	State; Zlp Code	
8 Contributor's	principal occupation		9 Contributor's job title	1
Psychiatrist			Doctor	
	employer/law firm	· · · · · · · · · · · · · · · · · · ·	11 Law firm of contributor	r's spouse (if any)
12 If contributor	is a child, law firm of parent(s) (if	any)		
N/A	· · · · · · · · · · · · · · · · · · ·	. 14 <u></u>	, 194 , 194	
Date	Full name of contributor	out-of-state PAC	ID#:	Amount of contribution (\$)
10/20/2021	Anne King	_		\$50.00
	Contributor address; 1307 Summer Terrace I	*,	State; Zip Code , TX 77479	
Contributor's Pastor	principal occupation		Contributor's Job title Children's Pastor	
Contributor's River Pointe	employer/law firm Church		Law firm of contributo	r's spouse (if any)
If contributor	is a child, law firm of parent(s) (i	f any)		
N/A	·			
Date 10/20/2021	Full name of contributor Elaine Bowman	out-of-state PAC	1D#:	Amount of contribution (\$) \$500.00
	Contributor address: 6308 Pleak Rd., Richmo	city; and, TX 77469	State: Zip Code	
Contributor's	principal occupation	······································	Contributor's job title	<u> </u>
Consultant			Consultant	: *
Contributor's	employer/law firm		Law firm of contribute	or's spouse (if any)
Self Employe	ed		N/A	
If contributor	is a child, law firm of parent(s) (l	· ·		
N/A	Apr	1 V	#1 %;	
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SCHEDULE A(J)1

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	The Instruction Guide explains ho	w to complete this	form.	1 Total pages Sched	fule A(J)1:
2 FILER NAME		·	:	3 Filer ID (Ethics C	ommission Filers)
Christopher	G. Morales	:	+		; ;
4 Date 10/20/2021	5 Full name of contributor Michael Njoku	Out-of-state PAC	ID#:)	7 Amount of contri \$1500.00	bution (\$)
	6 Contributor address; P.O. Box 522, Sugar Lar	City; nd, TX 77487	State; Zip Code		
8 Contributor's	principal occupation		9 Contributor's job title		
Attorney			Attorney at Law		v V
10 Contributors Self Employ	employer/law firm		11 Law firm of contributo	r's spouse (if any)	
12 If contributor	is a child, law firm of parent(s) (if	anv)	1	······································	
N/A					5 5. * 6
Date	Full name of contributor	out-of-state PAC	ID#:	Amount of contri	bution (\$)
10/20/2021	Anne Sampson Gbenjo	••••		\$250.00	
	Contributor address; 9009 Bissonnet St., Hou	City;	State; Zip Code		() [편]
Contributors	principal occupation	31011, 17 77074	Contributor's job title		· ·
Attorney	principal occupation		Attorney at Law	n .	
Contributor's The Gbenjo L	employer/law firm .aw Group	į.	Law firm of contributo	r's spouse (if any)	
If contributor	Is a child, law firm of parent(s) (if	any)			
N/A			· · · · · · · · · · · · · · · · · · ·		
Date	Full name of contributor	. Out-of-state PAC	ID#:)	Amount of contri	bution (\$)
10/20/2021	Jan Culver	-		\$1000.00	·
	Contributor address;	City;	State: Zip Code		· :
	1005 Country Club Dr., F	Kichmond, TX 7	7469		<u>:</u>
Contributor's Small Busine	principal occupation SS Owner		Contributor's job title Owner of Small Busi	ness	
Contributor's	employer/law firm		Law firm of contribute	or's spouse (if any)	
Garmany & C	Carden		N/A		
If contributor	is a child, law firm of parent(s) (if	any)			· · · · · · · · · · · · · · · · · · ·
N/A		:			
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SCHEDULE A(J)1

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2 FILER NAME				3 Filer ID (Ethics Commission Fi	ilers)
Christopher (G. Morales		19		
4 Date 10/20/2021	5 Full name of contributor Priti Singh	Out-of-state PAC	ID#:	7 Amount of contribution (\$) \$1000.00	
	6 Contributor address:	City:	State; Zip Code		
	28 Whitworth Way, Sug	ar Land, TX 774	79		
8 Contributor's p	principal occupation	1.5	9 Contributor's job title		
Small Busines	s Owner		Owner / CEO	***	
	esting Laboratories		11 Law firm of contributo	r's spouse (if any)	
2 If contributor is	s a child, law firm of parent(s) (l	fany)			
N/A				<u>,</u>	
Date	Full name of contributor	Out-of-state PAC	ID#:)	Amount of contribution (\$)	
10/21/2021	John Dean		3 A.	\$500.00	
	Contributor address:	City;	State; Zip Code		
	3027 E. Legends Bend				
	principal occupation	·.	Contributor's lob title	€.	,
Engineer		<u> </u>	Engineer		
Contributor's e	employer/law firm		Law firm of contribute	r's spouse (if any)	
If contributor Is	s a child, law firm of parent(s) (i	f any)		,	
N/A					
Date 10/21/2021	Full name of contributor Dominic Cashiola	out-of-state PAC	ID#:	Amount of contribution (\$) \$100.00	
	Contributor address;	City;	State: Zip Code		
	8406 Havens Glade Ct.	, Richmond, TX			
Contributor's Sales	principal occupation	:	Contributor's job title Sales Person)	
Contributor's	employer/law firm		Law firm of contribute	or's spouse (if any)	
Convergint Te			N/A		
If contributor i	s a child, law firm of parent(s) (f any)			
N/A					
				- 4	
II.	ATTACH ADD f contributor is out-of-state P		OF THIS SCHEDULE AS ruction guide for additions		

SCHEDULE A(J)1

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2 FILER NAME			3.	3 Filer ID (Ethics Commis	sion Filers
Christopher	G. Morales	· · · · · · · · · · · · · · · · · · ·			
4 Date 10/21/2021	5 Full name of contributor Michael Nassif	out-of-state PAC I	D#:)	7 Amount of contribution \$100.00	(\$)
	6 Contributor address;	City;	State; Zip Code	"	11. 11. 14.
	1446 N. Medio River Ci	rcle, Sugar Land	, TX 77478		
8 Contributor's Attorney	principal occupation		9 Contributor's job title Attorney at Law		
o Contributor's Self Employ	employer/law firm /ed	:	11 Law firm of contributor N/A	's spouse (if any)	.:
2 If contributor	is a child, law firm of parent(s) (if	fany)			
N/A					
Date 0/21/2021	Full name of contributor Sean Timmons	Out-of-state PAC	D#:	Amount of contribution \$50.00	(\$)
	Contributor address;	City;	State; Zip Code		
	26 Vale View Circle, Mis	ssouri City, TX 77	7458		:
Contributor's	principal occupation		Contributor's job title Attorney at Law	<u> </u>	:
Contributor's Tully Rinckey	employer/law firm / PLLC	1.7	Law firm of contributor	's spouse (if any)	
If contributor	is a child, law firm of parent(s) (if	any)		······································	
N/A					
Date 10/21/2021	Full name of contributor John Minchew	out-of-state PAC	D#:	Amount of contribution \$100.00	(\$)
	Contributor address;	City;	State: Zip Code		7
	1831 Pitts Rd., Richmor	nd, TX 77406	t an		
Contributor's	principal occupation	::	Contributor's job title Owner		
Contributor's	employer/law firm		Law firm of contributor	rs spouse (if any)	
Rio Grande \	Valley Security	* **	N/A		· · ·
	is a child, law firm of parent(s) (fi	fany)			:
N/A			·		<u> </u>

SCHEDULE A(J)1

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2 FILER NAME			3 Filer ID (Ethics Comm	ission Filers)
Christopher	G. Morales			· .·
4 Date 10/21/2021		state PAC ID#:	7 Amount of contribution \$100.00	on (\$)
	6 Contributor address; City		Code	
<u> </u>	72 Crestwood Cir., Sugar Land,			
8 Contributor's Retired	principal occupation	9 Contributors Retired	Job title	
10 Contributor's	employer/law firm	. 11 Law firm of c	ontributor's spouse (if any)	
N/A		N/A	g and the second	
12. If contributor	is a child, law firm of parent(s) (if any)			:
N/A		· · · · · · · · · · · · · · · · · · ·		: : :
Date	Full name of contributor	state PAC ID#:	, Amount of contribution	n (\$)
11/1/2021	Kyle Atchison	state PAC 10#:	\$500.00	
	Contributor address; City	State; Zip C	code	
	16503 Terrace Hollow Ln., Sugal			*.
Contributors	principal occupation	Contributor's	lob title	
Commercial		Banker		
Contributor's	employer/law firm	Law firm of o	contributor's spouse (if any)	
Frost Bank	``.	1	st Bank as Lawyer, No Law	Firm
If contributor	is a child, law firm of parent(s) (if any)			
N/A				
IN/A	•	::		
Date 11/4/2021	Full name of contributor	state PAC ID#:	Amount of contribution \$1000.00	on (\$)
<u>.</u> :				∀.
٠.	Contributor address; City		Code	
•.	2800 Post Oak Blvd., Floor 57, F	louston, TX 77056		
Contributor's Attorney	principal occupation	Contributor's Shareholder	job title	
Contributor's	employer/law firm	Law firm of o	contributor's spouse (if any)	·
Roberts Mar	kel Weinberg Butler Hailey PC	N/A	• .	
	is a child, law firm of parent(s) (if any)	1		<u>.</u>
NUA		4.		
N/A				<u> </u>
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	The Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1:	
2 FILER NAME	E		3 Filer ID (Ethics Commission File	rs)
Christopher	G. Morales			
4 Date 11/17/2021	5 Full name of contributor ut-of-state PAC Verna Quiroga	ID#:)	7 Amount of contribution (\$) \$100.00	
	6 Contributor address; City;	State; Zip Code		
	14 Linney Blvd., Sugar Land, TX 77479			
8 Contributor's Retired	principal occupation	9 Contributor's job title Retired		
10 Contributors N/A	employer/law firm	11 Law firm of contributor	r's spouse (if any)	
12 If contributor	is a child, law firm of parent(s) (if any)	· ·		
N/A		·		
Date			Amount of contribution (\$)	7
11/25/2021	Full name of contributor out-of-state PAC Jeffrey Carter	ID#:	\$2500.00	
	Contributor address; City; 1806 Arcadia Dr., Sugar Land, TX 77498	State; Zip Code		
Contributor's	principal occupation	Contributor's job title	L	
Attorney	pimopar occopanor	Attorney at Law		
Contributor's Self Employe	employer/law firm	Law firm of contributor	r's spouse (If any)	
If contributor	is a child, law firm of parent(s) (if any)			Se
Date 9/29/2021	Full name of contributor	ip#:)	Amount of contribution (\$) \$1000.00	
	Contributor address; City; 5430 LBJ Freeway, Suite 1500, Dallas,	State: Zlp Code	(4) :	
	principal occupation on Committee	Contributor's job title		
Contributor's	employer/law firm	Law firm of contributo	r's spouse (if any)	
N/A		N/A		
If contributor	is a child, law firm of parent(s) (if any)		· · ·	
N/A		·w		
		· .		· · · · · · · · · · · · · · · · · · ·

SCHEDULE A(J)1

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2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Christopher (G. Morales	,	* .	
4 Date 9/30/2021	5 Full name of contributor Norma Petrosewicz	out-of-state PAC 10	D#:	7 Amount of contribution (\$) \$500.00
	6 Contributor address:	City;	State; Zip Code	
0.00-4-10-4-4-	1110 Plantation Meadov	ws Dr., Addinion		
Attorney	orincipal occupation		9 Contributor's job title Attorney at Law	
10 Contributor's C Self Employe	employer/law firm		11 Law firm of contributor N/A	's spouse (if any)
12 if contributor i	s a child, law firm of parent(s) (if	any)	: . :	. 4'
N/A	N	·		
Date 10/2/2021	Full name of contributor Jeffrey L. Novy	Out-of-state PAC II	D#:	Amount of contribution (\$) \$500.00
	Contributor address; 402 Brooks St., Sugar Li	City; and, TX 77478	State; Zip Code	14 14 14
Contributor's Attorney	principal occupation		Contributor's Job title Attorney at Law	
Contributor's of Self Employed	employer/law firm		Law firm of contributor N/A	's spouse (if any)
If contributor I	s a child, law firm of parent(s) (if	any)		·
Date 10/11/2021	Full name of contributor Shashi Jajoo Contributor address; 62 Bradford Circle, Suga	□ out-of-state PAC II City; ar Land, TX 7747	State: Zip Code	Amount of contribution (\$) \$2500.00
Contributor's	principal occupation		Contributor's job title	
Lab Manager			Medical Lab Special	ist
Contributor's	employer/law firm		Law firm of contributor	r's spouse (If any)
Memorial Her	mann Health Systems		N/A	
If contributor i	s a child, law firm of parent(s) (if	any)	, .	
N/A	<u> </u>			
	ATTACH ADDI	TIONAL COPIES O	F THIS SCHEDULE AS I	NEEDED

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

SCHEDULE A(J)1

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2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Christopher	G. Morales		•	
4 Date 10/11/2021	5 Full name of contribute Lytle & Moore, LLP	or Out-of-state PAC	D#:)	7 Amount of contribution (\$) \$300.00
	6 Contributor address; 2116 Thompson Rd	City; , Suite 116, Richmo	State; Zip Code and, TX 77469	
8 Contributor's Law Firm	principal occupation		9 Contributor's job title N/A	
10 Contributors Lytle & Moor	employer/law firm e, LLP		11 Law firm of contributor	r's spouse (If any)
12 If contributor I	is a child, law firm of parent(s) (if any)	:	
N/A				
Date 10/12/2021	Full name of contribute Gray Reed & McGra		ID#:	Amount of contribution (\$) \$1000.00
	Contributor address; 1300 Post Oak Blvd.	City; , Suite 2000, Houst	State; Zip Code on, TX 77056	
Contributors Law Firm	principal occupation	:	Contributor's job title	÷
, ,	employer/law firm McGraw, LLP	· · ·	Law firm of contributor	r's spouse (if any)
If contributor	is a child, law firm of parent(s) (If any)	· · · · · · · · · · · · · · · · · · ·	
N/A				
Date 10/18/2021	Full name of contribute Grant E. Lane	or out-of-state PAC)	Amount of contribution (\$) \$200.00
	Contributor address;	City;	State: Zip Code	· :
	P.O. Box 432, Roser	iberg, IX //4/ I	1	
Small Busine		· · · · ·	President & CEO	
	employer/law firm	•	Law firm of contributo	r's spouse (if ariy)
Lane Aviation	· · · · · · · · · · · · · · · · · · ·		N/A	
If contributor	is a child, law firm of parent	s) (if any)		·
N/A		·		
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SCHEDULE A(J)1

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2 FILER NAME			· ·	3 Filer ID (Ethics Commission Filers)
Christopher	G. Morales			• • •
4 Date 10/18/2021	5 Full name of contributor Carl Moerer Jr.	out-of-state PAC	ID#:	7 Amount of contribution (\$) \$500.00
	6 Contributor address; 701 S. 11th St., Richmi		State; Zip Code	
8 Contributor's Attorney	principal occupation		9 Contributors job title Partner	9 y y
10 Contributor's Moerer & K	employer/law firm ing LLP		11 Law firm of contribut	tor's spouse (if any)
12 If contributor	is a child, law firm of parent(s) (if any)		
N/A	A STATE OF THE STA			4 93, 4 48
Date	Full name of contributor	out-of-state PAC	ID#:	Amount of contribution (\$)
10/18/2021	Moerer & King, LLP	\$, 200		\$1000.00
	Contributor address; 701 S. 11th St., Richmo	City; and, TX 77469	State; Zip Code	
Contributor's Law Firm	principal occupation		Contributor's job titi	9
Contributor's Moerer & Ki	employer/law firm ing, LLP	:	Law firm of contribu	tor's spouse (if any)
If contributor	is a child, law firm of parent(s)	(if any)		
N/A	·	:		
Date 10/20/2021	Full name of contributor William Todd Thurber	out-of-state PAC	ID#:	Amount of contribution (\$) \$1000.00
	Contributor address;	City;	State: Zip Code	
	5003 Palmetto, Bellaire	e, TX 77401	V.	
Contributor's Engineer	principal occupation		Contributor's job tittl Vice President	le .
Contributor's	employer/law firm			itor's spouse (if any)
LJA Engineer			N/A	
If contributor	Is a child, law firm of parent(s)	(if any)		*
N/A				
			::	

SCHEDULE A(J)1

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2 FILER NAME				3 Filer ID (Ethics Commission Filer
Christopher	G. Morales	Ψ. A		
4 Date 10/20/2021	5 Full name of contributor Robert Franks	out-of-state PAC	ID#:)	7 Amount of contribution (\$) \$1000.00
•				•
	6 Contributor address:	City;	State: Zip Code	
•	23210 Redberry Ln., Kat	ly, TX 77494		
8 Contributor's	principal occupation		9 Contributor's job title	
Attomey		14-4 1-4-4	Attorney at Law	
10 Contributor's	employer/law firm		11 Law firm of contribute	or's spouse (if any)
Self Employ		- 14 - 15	N/A	
	is a child, law firm of parent(s) (if	anv)		
11 COMMISSION	is a simo, law initi of parent(s) (iii	20197		
N/A		* *,		
Date	1.0	<u> </u>	• • .	Amount of contribution (\$)
10/20/2021	Full name of contributor	out-of-state PAC	ID#:	Amount of contribution (\$)
10/20/2021	Dean Carpenter	. :		\$200.00
	Contributor address;		State; Zip Code	
	4806 Lantana Ct., Sugar	*		
0	<u> </u>	Land, IX 774	1,1	1
Contributors Small Busine	principal occupation		Contributor's job title Owner/President	·×'
		· ·	Owner/ resident	·
	employer/law firm		Law firm of contribute	or's spouse (if any)
	dscapes Unlimited	·	N/A	
If contributor	is a child, law firm of parent(s) (if	any)		·
N/A				
Date	Full name of contributor	Out-of-state PAC	1D#: · ·)	Amount of contribution (\$)
10/20/2021	Mariette Wright			\$200.00
				.]
	Contributor address;	City;	State: Zip Code	
	301 Hillcrest Dr., Richmo	nd. TX 77469		·:
Contributor's	principal occupation		Contributor's job title	<u> </u>
Housewife	·	· .	N/A	
· · · · · · · · · · · · · · · · · · ·	employer/law firm		Law firm of contribute	or's spouse (if any)
	ampioyaman min		N/A	or a spouse (ii airy)
N/A			IAIV.	<u>:</u>
it contributor	is a child, law firm of parent(s) (if	any)		• •
N/A				
			• • • • • • • • • • • • • • • • • • •	

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

SCHEDULE A(J)1

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Т	he instruction Guide explains h	ow to complete this fo	orm.	1 Total pages Schedule A(J)1: 32
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Christopher (G. Morales			
4 Date 10/20/2021	5 Full name of contributor Allen Boone Humphries	out-of-state PAC 1	D#:	7 Amount of contribution (\$) \$500.00
	6 Contributor address; 3200 Southwest Freewa	сііу: ay, Suite 2600, Н	State; Zip Code	
8 Contributor's p	principal occupation		9 Contributor's job title	
Law Firm		· -	N/A	
10 Contributor's e	mployer/law firm Humphries Robinson I	LLP	11 Law firm of contributor N/A	's spouse (if any)
12 If contributor is	a child, law firm of parent(s) (if	any)		
N/A	· · · · · · · · · · · · · · · · · · ·	3	· · · · · · · · · · · · · · · · · · ·	
Date 10/21/2021	Full name of contributor Quartus Graves III	Out-of-state PAC 1	O#:	Amount of contribution (\$)
	Quartus Graves III		· · · · · · · · · · · · · · · · · · ·	\$200.00
	Contributor address; P.O. Box 291, Guy, TX	City; 77444	State; Zip Code	
Contributor's	principal occupation		Contributor's job title	<u> </u>
Small Busine	ss Owner	٠.	Owner/President	•
	employer/law firm reatwood and Rosenberg	g :	Law firm of contributor	r's spouse (if any)
If contributor is	s a child, law firm of parent(s) (if	f any)	· · · · · · · · · · · · · · · · · · ·	
N/A		ŧ		
Date 10/21/2021	Full name of contributor David A. Parker	Out-of-state PAC	D#:	Amount of contribution (\$) \$100.00
	Contributor address;	City;	State: Zip Code	. : .
	4614 Thompson Chapel		d, TX 77479	<u> </u>
Contributor's p	principal occupation		Contributor's job title Assistant	
Contributor's	employer/law firm		Law firm of contributo	
Hidden Territo			Self Employed - Lav	v Office of CeeCee Parker
If contributor is	s a child, law firm of parent(s) (i	f any)		· ·
N/A				
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SCHEDULE A(J)1

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Т	he Instruction Guide explains h	ow to complete this	iom.	32	Schedule A(J)1:
2 FILER NAME				3 Filer ID (E	thics Commission Filers)
Christopher (G. Morales			<u> </u> .	
Date 10/21/2021	5 Full name of contributor The Graham Law Group	out-of-state PAC	ID#:	7 Amount of \$500.00	contribution (\$)
	6 Contributor address;	City;	State; Zip Code		
	21559 Provincial Blvd.,	Ste A, Katy, TX	77450		
8 Contributor's p	principal occupation		9 Contributor's job title	в	7
Law Firm			N/A		
, -	employer/law firm a Law Group, PLLC		11 Law firm of contribut	tor's spouse (if any)
2 If contributor is	s a child, law firm of parent(s) (if	any)			
N/A					
Date 10/21/2021	Full name of contributor Jo Ann Eagleton	out-of-state PAC	ID#:	Amount of \$200.00	contribution (\$)
	Contributor address.	Clar.	Otatas - Zin Cada	1.4	
Contributor's (Contributor address; 2603 Fairway Dr., Sugar	r Land, TX 7747	Contributor's job title	e .	1.5 4. 7.
Retired Contributor's e	2603 Fairway Dr., Suga		8	· · · · · · · · · · · · · · · · · · ·)
Retired Contributor's 6	2603 Fairway Dr., Sugar	r Land, TX 7747	Contributor's job title Retired Law firm of contribut	· · · · · · · · · · · · · · · · · · ·)
Contributor's eN/A	2603 Fairway Dr., Sugar	r Land, TX 7747	Contributor's job title Retired Law firm of contribut	· · · · · · · · · · · · · · · · · · ·) ,
Retired Contributor's a N/A If contributor is N/A Date	2603 Fairway Dr., Sugar	r Land, TX 7747	Contributor's job title Retired Law firm of contribut N/A	tor's spouse (if any	contribution (\$)
Retired Contributor's a N/A If contributor is N/A Date	2603 Fairway Dr., Sugar principal occupation employer/law firm s a child, law firm of parent(s) (if	r Land, TX 7747	Contributor's job title Retired Law firm of contribut N/A	tor's spouse (if any	
Contributor's eN/A If contributor is N/A Date 10/21/2021	2603 Fairway Dr., Sugar principal occupation employer/law firm s a child, law firm of parent(s) (if Full name of contributor Jesse Mata Contributor address;	any)	Contributor's job title Retired Law firm of contribut N/A	Amount of \$100.00	
Contributor's eN/A If contributor is N/A Date 10/21/2021	2603 Fairway Dr., Sugar principal occupation employer/law firm s a child, law firm of parent(s) (if Full name of contributor Jesse Mata Contributor address;	any)	Contributor's job title Retired Law firm of contribut N/A	Amount of \$100.00	
Contributor's of N/A If contributor is N/A Date 10/21/2021 Contributor's is Small Busines	2603 Fairway Dr., Sugar principal occupation employer/law firm s a child, law firm of parent(s) (if Full name of contributor Jesse Mata Contributor address;	any)	Contributor's job title Retired Law firm of contribut N/A ID#: State: Zip Code Contributor's job title	Amount of \$100.00	contribution (\$)
Contributor's a N/A If contributor is N/A Date 10/21/2021 Contributor's is Contributor's a	2603 Fairway Dr., Sugar principal occupation employer/law firm s a child, law firm of parent(s) (if Full name of contributor Jesse Mata Contributor address; principal occupation ss Owner employer/law firm	any)	Contributor's job title Retired Law firm of contribut N/A D#:	Amount of \$100.00	contribution (\$)
Contributor's of N/A If contributor is the N/A Date 10/21/2021 Contributor's of Small Business Contributor's of Small Posterior Bend Posterior P	2603 Fairway Dr., Sugar principal occupation employer/law firm s a child, law firm of parent(s) (if Full name of contributor Jesse Mata Contributor address; principal occupation ss Owner employer/law firm	any)	Contributor's job title Retired Law firm of contribut N/A ID#: State: Zip Code Contributor's job title Owner Law firm of contribu	Amount of \$100.00	contribution (\$)
Contributor's of N/A If contributor is of the N/A Date 10/21/2021 Contributor's of the N/A	2603 Fairway Dr., Sugar principal occupation employer/law firm s a child, law firm of parent(s) (if Full name of contributor Jesse Mata Contributor address; principal occupation ss Owner employer/law firm stal	any)	Contributor's job title Retired Law firm of contribut N/A ID#: State: Zip Code Contributor's job title Owner Law firm of contribu	Amount of \$100.00	contribution (\$)
Contributor's of N/A If contributor is to N/A Date 10/21/2021 Contributor's of Small Busines Contributor's of Contributor'	2603 Fairway Dr., Sugar principal occupation employer/law firm s a child, law firm of parent(s) (if Full name of contributor Jesse Mata Contributor address; principal occupation ss Owner employer/law firm stal	any)	Contributor's job title Retired Law firm of contribut N/A ID#: State: Zip Code Contributor's job title Owner Law firm of contribu	Amount of \$100.00	contribution (\$)

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

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

* 1					
T	The Instruction Guide explains ho	ow to complete this fo	ит.	1 Total pages Schedule A(J)1:
2 FILER NAME				3 Filer ID (Ethics Commiss	ion Filers)
Christopher					
4 Date 10/23/2021	5 Full name of contributor Janice Knight	out-of-state PAC II	D#:	7. Amount of contribution \$250.00	(\$)
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6 Contributor address;	City;	State; Zip Code		
7	1502Old Elm Trail, Suga	ar Land, Texas 7	7479		5. 1
8 Contributor's Retired	principal occupation		9 Contributor's job title Retired		
10 Contributor's	employer/law firm		11 Law firm of contributor	's spouse (if any)	
N/A			N/A		
	is a child, law firm of parent(s) (if	any)			
N/A			, v		
Date	Full name of contributor	out-of-state PAC II	D#:)	Amount of contribution	(\$)
10/21/2021	Fred Felchman			\$50.00	
	Contributor address;	City;	State; Zip Code		
**.	2525 Cedar Lane, Rosei	nberg, TX 77471	ļ	, n	
Contributor's Retired	principal occupation		Contributor's Job title Retired	· ·	
Contributor's	employer/law firm		Law firm of contributor	r's spouse (if any)	
N/A			N/A		
If contributor	is a child, law firm of parent(s) (if	any)		4.	:
N/A	· · · · · ·				
Date 10/21/2021	Full name of contributor Sarah N. Ciancarelli	out-of-state PAC i	ID#:)	Amount of contribution \$100.00	(\$)
	Contributor address; 8810 Silent Willow, Suga	City; ar Land, TX 774	State: Zip Code		
	principal occupation		Contributor's job title		
Retired	;		Retired	•	
	employer/law firm		Law firm of contributo	or's spouse (if any)	
N/A		Ÿ	N/A		
. If contributor	is a child, law firm of parent(s) (if	fany)	•		:
N/A	** <u></u> ***	·		41. 411.	
					· · · · · · · · · · · · · · · · · · ·

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

1			<u>. </u>	••	
	The Instruction Guide explains ho	w to complete this form.		1 Total pages Schedule A(J) 32	1:
2 FILER NAME				3 Filer ID (Ethics Commission	on Filers)
Christopher	G. Morales				
4 Date 10/22/2021	5 Full name of contributor Jeanine Fultz	Out-of-state PAC ID#:		7 Amount of contribution \$100.00	(\$)
	6 Contributor address;	City; S	itate; Zip Code		
	6111 Wickshire, Rosenb	erg, TX 77471			
8 Contributor's	principal occupation	9	Contributor's job title		1, 1
Retired		Ret	ired	in the second se	•
10 Contributor's N/A	employer/law firm	n/A	aw firm of contributor	s spouse (if any)	•
	is a child, law firm of parent(s) (if			<u> </u>	
N/A					,
Date 10/21/2021	Full name of contributor Pamela Kay Dostal	Out-of-state PAC ID#:		Amount of contribution ((\$)
t 1	rameia Nay Dosiai		, ,	\$100.00	
	Contributor address; 1311 Winston Dr., Richm		tate; Zip Code		
Contributor's	principal occupation		Contributor's job title	· · · · · · · · · · · · · · · · · · ·	
Retired		Reti	•		
Contributor's	employer/law firm		Law firm of contributor	's snouse (if any)	
N/A	· ·	N/A		· · · · · · · · · · · · · · · · · · ·	
If contributor	is a child, law firm of parent(s) (if	any)			
Date 10/21/2021	Full name of contributor	out-of-state PAC ID#:		Amount of contribution \$100.00	(\$)
÷ :	Contributor address;	City; S	tate: Zip Code		
	606 Salerno, Sugar Land	I, TX 77478		•	
Contributor's	principal occupation		Contributor's lob title	:	
Retired		Reti	red		
Contributor's	employer/law firm		Law firm of contributor	's spouse (if any)	
N/A		N/A	v.*	<u>;</u> ;,	
· · · · · · · · · · · · · · · · · · ·	is a child, law firm of parent(s) (if	any)			
N/A					
					:

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

	** <u>*</u>		
TI	he Instruction Guide explains how to complete this fo	xm.	1 Total pages Schedule A(J)1: 32
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Christopher (3. Morales		
4 Date 10/21/2021	5 Full name of contributor	D#:	7 Amount of contribution (\$) \$50.00
	6 Contributor address; City;	State; Zlp Code	
	911 Millpond Dr., Sugar Land, TX 77498		
	principal occupation	9 Contributor's job title	
	ndustry - Management	Global Category Man	· - · · · · · · · · · · · · · · · · · ·
10 Contributor's e McDermott I	employer/law firm nternational Inc.	11 Law firm of contributor N/A	's spouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
N/A			
Date 10/21/2021	Full name of contributor	D#:)	Amount of contribution (\$) \$100.00
	Contributor address; City;	State; Zip Code	4.30.00
Contributant	2038 Beasley West End Rd., Beasley, T	· · · · · · · · · · · · · · · · · · ·	L
Retired	principal occupation	Contributor's Job title Retired	V
Contributor's e	employer/law firm	Law firm of contributor	's spouse (If any)
If contributor Is	s a child, law firm of parent(s) (If any)		
N/A			
Date 10/21/2021	Full name of contributor)	Amount of contribution (\$) \$250.00
.`· ·	Contributor address; City; 9307 Mount Logan, Missouri City, TX 77	State: Zip Code	
Small	principal occupation	Contributor's Job title Real Estate Agent	
	employer/law firm	Law firm of contributo	r's spouse (if any)
	ilson & Associates	N/A	
If contributor is	s a child, law firm of parent(s) (if any)		
N/A	· ·		
Ž.	ATTACH ARRITIONAL CORUM	NE TIMO COLLEGE S A C	
А. 1.	ATTACH ADDITIONAL COPIES Of contributor is out-of-state PAC, please see instru		

SCHEDULE A(J)1

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2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Christopher G. Morales	
4 Data	state PAC ID#:
6 Contributor address; City; 1 Sugar Creek Center Blvd., #104	\mathcal{N}_{i}
8 Contributor's principal occupation	9 Contributor's job title
Attorney	Attorney at Law
10 Contributor's employer/law firm Self Employed	11 Law firm of contributor's spouse (If any) N/A
12 If contributor is a child, law firm of parent(s) (if any)	
N/A	
Date Full name of contributor out-of-s Lisa Raines Contributor address; City; 527 Wild Cotton Rd., Rosenberg,	\$100.00 State; Zip Code
Contributor's principal occupation	Contributor's job title
In home daycare	Owner
Contributor's employer/law firm Self Employed	Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any)	
Date Full name of contributor out-of-s 10/21/2021 Brandy K. Castillo	state PAC ID#:
Contributor address; City; 1807 Saxon Bend Trail, Richmon	
Contributor's principal occupation	Contributor's job title
Small Business Owner	Owner
Contributor's employer/law firm	Law firm of contributor's spouse (if any)
Inspired Behavioral Health	N/A
If contributor is a child, law firm of parent(s) (if any)	
3.4	

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

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

. 1	The Instruction Guide explains ho	w to complete this	form.	1 Total pages Schedule A(J)1: 32
2 FILERNAME		* 1	<u> </u>	3 Filer ID (Ethics Commission Filers
Christopher	G. Morales		.,	
4 Date 10/21/2021	5 Full name of contributor Yvonne Royston	out-of-state PAC	ID#:)	7 Amount of contribution (\$) \$300.00
:	6 Contributor address;	City;	State; Zip Code	
<u> </u>	1 Janthina St., Bay City,	TX 77414		
8 Contributor's	principal occupation	15	9 Contributor's job title	
Retired			Retired	12.00
10 Contributor's N/A	employer/law firm		11 Law firm of contributo	r's spouse (if any)
12 If contributor	is a child, law firm of parent(s) (If	any)		
N/A				
Date	Full name of contributor	out-of-state PAC	ID#:	Amount of contribution (\$)
10/21/2021	Satya Pilla	* . * * **		\$500.00
	Contributor address; 4103 Oak Blossom Ct.,	City:	State; Zip Code 7059)
Contributor's	principal occupation		Contributor's job title	<u> </u>
Engineer			Principal	· · · · · · · · · · · · · · · · · · ·
Contributor's iGet Services	employer/law firm		Law firm of contribute	or's spouse (if any)
	is a child, law firm of parent(s) (if	any)		
N/A			· ·	<i>;</i>
Date	Full name of contributor	out-of-state PAC	ID#:	Amount of contribution (\$)
10/21/2021	Doris Gurecky	ŧ,"	vit	\$250.00
	Contributor address;	City;	State: Zip Code	, in the second second
	1820 Allen St., Rosenbe	rg, 17/4/1		
Contributor's Small Busine	principal occupation ess Owner	* .	Contributor's job title Owner	
	employer/law firm		Law firm of contribut	or's spouse (if any)
Gurecky Mfg.	•		N/A	
If contributor	is a child, law firm of parent(s) (if	any)		
N/A	14			
,				

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form. 2 FILER NAME Christopher G. Morales 4 Date 10/22/2021		<u> </u>	· · · · · · · · · · · · · · · · · · ·	·			· · · · · · · · · · · · · · · · · · ·
Christopher G. Morales 4 Date 10/22/2021 5 Full name of contributor out-of-state PAC IDE	. 1	The Instruction Guide explains he	ow to complete this t	form.		32	
4 Date Thomas A. Staudt Date Thomas A. Staudt Thomas A. Thomas A. Staudt Thomas A. Th	2 FILER NAME					3 Filer ID	(Ethics Commission Filers)
10/22/2021 Thomas A. Staudt 6 Contributor address; City: State: Zip Code 7525 FM 723, Richmond, TX.77406 8 Contributor's principal occupation Engineer 10 Contributor's employer/law firm KCI Technologies, Inc. 12 if contributor is a child, law firm of parent(s) (if any) N/A Date 10/21/2021 Suzanne P. Komblit Contributor address; City: State: Zip Code 3410 Mercer, Houston, TX.77027 Contributor's employer/law firm Attorney Contributor's employer/law firm Self Employee If contributor is a child, law firm of parent(s) (if any) N/A Date 10/21/2021 Full name of contributor Suzanne P. Komblit Contributor's principal occupation Attorney Attorney Attorney Attorney End in ame of contributor Attorney Contributor's employer/law firm Self Employeed Full name of contributor Contributor's spouse (if any) N/A Date 10/21/2021 Full name of contributor Contributor is a child, law firm of parent(s) (if any) N/A Contributor's principal occupation Contributor's principal occupation Contributor's principal occupation Contributor's principal occupation Small Business Owner Contributor is a child, law firm of parent(s) (if any) If contributor is a child, law firm of parent(s) (if any) N/A If contributor's employer/law firm Trader Emporitum If contributor is a child, law firm of parent(s) (if any)	Christopher	G. Morales	· · · · · · · · · · · · · · · · · · ·	:	: -		
8 Contributor's principal occupation Engineer 10 Contributor's employer/law firm KCI Technologies, Inc. 11 Law firm of contributor's spouse (if any) N/A Date 10/21/2021 Contributor address; City: 3410 Mercer, Houston, TX 77027 Contributor's employer/law firm Contributor's principal occupation Attorney Contributor's employer/law firm Self Employed If contributor is a child, law firm of parent(s) (if any) N/A Date 10/21/2021 Full name of contributor Suzanne P. Komblit Contributor address; City: 3410 Mercer, Houston, TX 77027 Contributor's employer/law firm Self Employed If contributor's employer/law firm Self Employed If contributor is a child, law firm of parent(s) (if any) N/A Date 10/21/2021 Full name of contributor Ontributor address: City: State: Zip Code Shame of contributor address: City: State: Zip Code Shame of contributor address: City: State: Zip Code Contributor's employer/law firm Contributor address: City: State: Zip Code Contributor's principal occupation Contributor's spouse (if any) N/A If contributor's employer/law firm Trader Emporium If contributor is a child, law firm of parent(s) (if any)			out-of-state PAC	ID#:		7 Amount \$1000.00	of contribution (\$)
8 Contributor's principal occupation Engineer 10 Contributor's employer/law firm KCI Technologies, Inc. 11 Law firm of contributor's spouse (if any) N/A N/A				State;	Zip Code		
Engloyee Owner 10 Contributor's employer/law firm KCI Technologies, Inc. 11 Law firm of contributor's spouse (if any) N/A 12 if contributor is a child, law firm of parent(s) (if any) N/A Date	8 Contributor's		*	9 Contribu	itor's lob title	L	
KCI Technologies, Inc. N/A					3.1		
Date 10/21/2021 Full name of contributor out-of-state PAC ID# \$2000.00	,			1	of contributor	's spouse (if	any)
Date 10/21/2021 Suzanne P. Komblit Contributor address; City: State: Zip Code 3410 Mercer, Houston, TX 77027 Contributor's principal occupation Attorney Contributor's employer/law firm Self Employed If contributor is a child, law firm of parent(s) (if any) N/A Date 10/21/2021 Full name of contributor Contributor oddress; City: State: Zip Code 2640 Live Oak Dr., Rosenberg, TX 77471 Contributor's principal occupation Contributor's employer/law firm Contributor's employer/law firm Contributor's employer/law firm Contributor's employer/law firm Law firm of contributor's spouse (if any) N/A If contributor is a child, law firm of parent(s) (if any)	12 If contributor	is a child, law firm of parent(s) (if	any)				
10/21/2021 Suzanne P. Komblit Contributor address; City; State; Zip Code 3410 Mercer, Houston, TX 77027 Contributor's principal occupation Attorney Contributor's employer/law firm Self Employed If contributor is a child, law firm of parent(s) (if any) N/A Date 10/21/2021 Full name of contributor Contributor out-of-state PAC ID#: Amount of contribution (\$) \$300.00 Amount of contribution (\$) \$300.00 Contributor's principal occupation Contributor's principal occupation Contributor's principal occupation Small Business Owner Contributor's employer/law firm Contributor's employer/law firm Law firm of contributor's spouse (if any) N/A Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any) N/A If contributor's employer/law firm Law firm of contributor's spouse (if any) N/A If contributor is a child, law firm of parent(s) (if any)	N/A	Agricon de la companya della companya della companya de la companya de la companya della company		:	4,4		
Contributor's principal occupation Attorney Contributor's employer/law firm Self Employed If contributor is a child, law firm of parent(s) (if any) N/A Date 10/21/2021 Full name of contributor Contributor's principal occupation Contributor's spouse (if any) Mary Janssen Contributor out-of-state PAC ID# Amount of contribution (\$) Mary Janssen Contributor address; City: State: Zip Code 2640 Live Oak Dr., Rosenberg, TX 77471 Contributor's principal occupation Small Business Owner Contributor's employer/law firm Trader Emporium If contributor is a child, law firm of parent(s) (if any) N/A	-			ID#:			
Attorney at Law Contributor's employer/law firm Self Employed If contributor is a child, law firm of parent(s) (if any) N/A Date 10/21/2021 Full name of contributor Mary Janssen Contributor address; City; State: Zip Code 2640 Live Oak Dr., Rosenberg, TX 77471 Contributor's principal occupation Small Business Owner Contributor's employer/law firm Trader Emporium If contributor is a child, law firm of parent(s) (if any) Attorney at Law Law firm of contributor's spouse (if any) Amount of contribution (\$) \$300.00		l ".	City:	State;	Zip Code		
Self Employed If contributor is a child, law firm of parent(s) (if any) N/A Date 10/21/2021 Full name of contributor out-of-state PAC ID# Amount of contribution (\$) \$300.00 Contributor address; City; State: Zip Code 2640 Live Oak Dr., Rosenberg, TX 77471 Contributor's principal occupation Small Business Owner Contributor's employer/law firm Trader Emponium If contributor is a child, law firm of parent(s) (if any)	1	principal occupation	· :	1			
N/A Date 10/21/2021	•		:	1	of contributor	's spouse (if	any)
Date 10/21/2021 Full name of contributor	If contributor	is a child, law firm of parent(s) (if	fany)				· ·
Mary Janssen Contributor address; City; State: Zip Code 2640 Live Oak Dr., Rosenberg, TX 77471 Contributor's principal occupation Small Business Owner Contributor's employer/law firm Trader Emponium If contributor is a child, law firm of parent(s) (if any) State: Zip Code Contributor's job title Owner Law firm of contributor's spouse (if any) N/A	N/A		1. 1.		:		
2640 Live Oak Dr., Rosenberg, TX 77471 Contributor's principal occupation Small Business Owner Contributor's employer/law firm Contributor's employer/law firm Trader Emponium If contributor is a child, law firm of parent(s) (if any)			out-of-state PAC	ID#:			of contribution (\$)
Small Business Owner Contributor's employer/law firm Trader Emponium If contributor is a child, law firm of parent(s) (if any)			•		Zip Code		
Contributor's employer/law firm Trader Emponium If contributor is a child, law firm of parent(s) (if any)		· · .		1 _	utor's job title		
Trader Emponum If contributor is a child, law firm of parent(s) (if any)	Small Busine	ess Owner	:. ÷	Owner	1.		
If contributor is a child, law firm of parent(s) (if any)	Contributor's	employer/law firm			n of contributo	r's spouse (If	any)
	Trader Empo	onum		N/A			
N/A	If contributor	is a child, law firm of parent(s) (If	f any)				
	N/A						
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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

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2 FILER NAME			:	3 Filer ID (Ethics	Commission Filers)
Christopher	G. Morales	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Date 10/21/2021	5 Full name of contributor Walter P. Sass	Out-of-state PAC	ID#:	7 Amount of co. \$500.00	ntribution (\$)
	6 Contributor address;	City;	State; Zip Code		
O Contributorio	2707 Autumn Lake Dr.,	Naty, 17 / / 450	0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u> </u>	1 1 1 1 1 1
Engineer	principal occupation		9 Contributor's job title Principal	4年 福祉	
	employer/law firm		11 Law firm of contribute	or's spouse (if any)	
Weisser Eng	ineering and Surveying		N/A	44	in the state of
2 If contributor	is a child, law firm of parent(s) (i	f any)		· . ·	
N/A				<u> </u>	
Date	Full name of contributor	Out-of-state PAC	ID#·	Amount of cor	ntribution (\$)
10/21/2021	Richard R. Morrison	_ cor or state		\$500.00	
	Contributor address;	City;	State: Zip Code	` `	
·	1214 Oak Glen Ln., Sug	gar Land, TX 774	179		
	principal occupation		Contributor's job title		
Legal Couns	el <u> </u>		President/Legal Co	unsel	
	employer/law firm avioral Health, Inc.		Law firm of contribute	or's spouse (if any)	
If contributor	is a child, law firm of parent(s) (f any)			
N/A	;·			<i>:</i> ;	
Date 10/21/2021	Full name of contributor Carla Freeman	out-of-state PAC	ID#:	Amount of co	ntribution (\$)
	Contributor address; 611 Houston St., Richm	City;	State: Zip Code		
Contributor's Attorney	principal occupation		Contributor's job title Attorney at Law		
Contributor's	employer/law firm		Law firm of contribut	or's spouse (if any)	
Self Employe	ed 💮		N/A		
If contributor	is a child, law firm of parent(s) (if any)			
NI/A	40			. f.	
N/A					
	ATTACH ADD		OF THIS SCHEDULE AS		ments
	30	-, p			

SCHEDULE A(J)1

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2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Christopher	G Morales			
4 Date 10/22/2021	5 Full name of contributor	Out-of-state PAC	ID#:	7 Amount of contribution (\$) \$100.00
	Jerry W. Bussell			
	6 Contributor address;	City;	State; Zip Code	
	39 Rippling Creek Dr., S	Sugar Land, 1X	77479	
8 Contributor's Attorney	principal occupation		9 Contributor's job title Attorney at Law	
10 Contributor's	employer/law firm		11 Law firm of contributo	r's spouse (if any)
Self Employ	yed		N/A	
	is a child, law firm of parent(s) (if	f anv)		
	to a district factor (in	u.,,,	. •	
Ņ/A				Text to the Common of the Comm
Date				1
10/27/2021	Full name of contributor	out-of-state PAC	ID#:)	Amount of contribution (\$)
10/2/12021	Klosowsky Law Office, I	PLLC		\$200.00
	Contributor address;	City;	0-1 7 O-1-	, 4200.00
;	14015 S.W. Frwy., Suite	1.72	State; Zip Code	
Contributodo		- I, Cogai Lanc		<u> </u>
Law Firm	principal occupation		Contributor's job title	4
			Lawinn	
	employer/law firm	· .	Law firm of contributo	r's spouse (if any)
N/A	٠.		N/A	
If contributor	is a child, law firm of parent(s) (if	fany)		•
NI/A		٠.		
N/A		,*	***************************************	<u>:</u>
Date	Full name of contributor	out-of-state PAC	ID#:	Amount of contribution (\$)
10/30/2021	Rex L. Kessler			\$150.00
	Rex L. Ressier	√'*		
	Contributor address;	City;	State: Zip Code	
	P.O. Box 8861, Houston	ı, TX 77249		
Contributor's	principal occupation		Contributor's Job title	
Attomey		: .	Attorney at Law	
	employer/law firm	· · · · · · · · · · · · · · · · · · ·	Law firm of contribute	ir's spouse (If any)
Self Employe			N/A	
		f nov.)	13/7	.11, 1
	is a child, law firm of parent(s) (if	rany)		
N/A				
		· · ·		
				왕 :

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

			in page .		
т	he Instruction Guide explains how	v to complete this f	form.	1 Total pages Schedule A(J)1: 32	
2 FILER NAME				3 Filer ID (Ethics Commission I	Filers)
Christopher	G. Morales		•		
4 Date 11/5/2021	5 Full name of contributor David W. Showalter	out-of-state PAC	ID#:	7 Amount of contribution (\$) \$1000.00	
	6 Contributor address; 1117 FM 359, Suite 200,	City;	State; Zlp Code		
8 Contributor's	principal occupation		9 Contributor's job title	v 24	
Attorney		• • •	Attorney at Law		·
10 Contributor's 6 Self Employ	employer/law firm /ed	: .:	11 Law firm of contributor	r's spouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if a	ıny)			
N/A		:	· ·		
Date	Full name of contributor	Out-of-state PAC	ID#:	Amount of contribution (\$)	
11/5/2021	Robert Douds			\$200.00	
447 17	Contributor address; 1803 Auburn Trails, Suga	City; ar Land. TX 77	State; Zip Code	4.1 	
Contributor's (principal occupation		Contributor's job title President		:
Contributor's (KBR Builder	employer/law firm		Law firm of contributo	r's spouse (if any)	
If contributor i	s a child, law firm of parent(s) (if a	nny)	·	· .	: :
Date 11/10/2021	Full name of contributor Mark W. Millis	out-of-state PAC	ID#:)	Amount of contribution (\$) \$1500.00	
	Contributor address;	City;	State: Zip Code	* * * * * * * * * * * * * * * * * * *	
<i>i</i>	19855 Southwest Fwy., S	ste. 300, Sugar	Land, TX 77479		٠.
l	principal occupation		Contributor's job title		•
Developer			Owner/President		:
	employer/law firm		Law firm of contributo	r's spouse (if any)	
The Millis Gro			N/A		٠.
If contributor i	s a child, law firm of parent(s) (if a	iny)	•	12	
N/A				Marian La Carta de	
			1		

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

7	he Instruction Guide explains ho	w to complete this fo	orin.	1 Total pages Schedule A(J)1: 32	· ·
2 FILER NAME				3 Filer ID (Ethics Commission Filers)	
Christopher	G. Morales			·	٠.
4 Date 10/21/2021	5 Full name of contributor Bill Benton	out-of-state PAC	D#:	7 Amount of contribution (\$) \$250.00	
	6 Contributor address;	City;	State; Zip Code		
	1509 Georgina St., Rose	nberg, IX //4/		<u> </u>	**
Small Busine	orincipal occupation ss Owner	. ::	9 Contributor's job title Owner of Small Bu	siness	
10 Contributor's Rose Rich Re	employer/law firm		11 Law firm of contributo	r's spouse (if any)	• {
177	s a child, law firm of parent(s) (if a	any)	:		
N/A				***	
Date 10/21/2021	Full name of contributor Dean Hrbacek	out-of-state PAC 1	D#:	Amount of contribution (\$) \$100.00	
	Contributor address; 130 Industrial Blvd., Su	city; ite 110, Sugar	State; Zip Code Land, TX 77478	3% 3% 30	
Contributor's Attorney at L	principal occupation _AW		Contributor's Job title Attorney at Law	Y	
Contributor's of Hrbacek Lav	employer/law firm v Firm P.C.		Law firm of contributo	r's spouse (if any)	٠.
If contributor i	s a child, law firm of parent(s) (if a	any)	.:		٠.
Date	Full name of contributor	Out-of-state PAC	D#:)	Amount of contribution (\$)	
10/21/2021	Grace Nwanguma			\$100.00	· ·
11	Contributor address: 211-A Houston St., Ri	chmond, TX 7	State: Zip Code 7469	·	
Contributor's Attorney at I	principal occupation _aw		Contributor's job title Attorney at Law		•
Contributor's Co	employer/law firm		Law firm of contributo	r's spouse (if any)	,
If contributor I	s a child, law firm of parent(s) (if a	any)		: :-	i S
``					

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

		1 Total pages Sched	ule A2:
The Instruction Guide explains how to complete this for	rm.	1	
2 FILER NAME		3 Filer ID (Ethles Co	ommission Filers)
Christopher G. Morales	٠		
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTR	IBUTIONS	\$ 1049.50	
6 Full name of contributor	7 -0-4-	8 Amount of Contribution \$ \$1049.50	9 In-kind contribution description Donation of Event Venue for Kickoff
7 Contributor address; City; State; 5030 Bryan Rd., Richmond TX 77469	Zip Code	Check if travel outs	I I ide of Texas. Complete Schedule
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employ	L	AL)(See Instructions)
2 Contributor's principal occupation (FOR JUDICIAL) Owner of Small Business	13 Contrib Owner / C		JDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL) Greenscape Associates LLC	15 Law firm	n of contributor's spou	ise (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) N/A	· · · · · · · · · · · · · · · · · · ·	· .	
Date Full name of contributor		Amount of Contribution \$	In-kind contribution description
Contributor address; City; State;	Zip Code		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
·		1	Ide of Texas. Complete Schedule
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions	Employ	er (FOR NON-JUDIC	IAL)(See Instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contrib	utor's job title (FOR J	JDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law fire	m of contributor's spot	use (if any) (FOR JUDICIAL)
	1		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
		·	.:
		:	
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SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report. **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Relmbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Contributions/Donations Made By Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Travel In District Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Salarles/Wages/Contract Labor Other (enter a category not listed above) Legal Services Credit Card Payment The instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 19 Christopher G. Morales 4 Date 5 Payee name 6 Amount (\$) City; State; Zip Code **PURPOSE** OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date ShakeFX, LLC 7/12/2021 Amount (\$) Payee address: City; State; Zip Code \$276.04 541 Phillips Dr., Boca Raton, FL 33432 Description Category (See Categories listed at the top of this schedule) **Fees** Annual Website and Email Fee **PURPOSE EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date 7/19/2021 Adobe Amount (\$) Payee address; State; Zip Code City; 15.74 345 Park Ave., San Jose, CA 95110 Category (See Categories listed at the top of this achedule) Description Fee Monthly Subscription Service to **PURPOSE** Adobe Acrobat OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Relmbursement Office Overhead/Rental Expense

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/Donations Made By	/ Glft/Awards/Memorials Expense Pr	olling Expense Inting Expense	Travel In District Travel Out Of District
Candidate/Officeholden/Politica Credit Card Payment	Committee Legal Services Se	alarles/Wages/Contract Labor	Other (enter a category not listed above)
	The Instruction Guide explains he	ow to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
19	Christopher G. Morales		
4 Date	5 Payee name		
8/11/2021	GoDaddy.com, LLC		·
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
\$264.53	14455 N. Hayden Rd., Suite 219, S	cottsdale, AZ 85260	
			i (1)
8	(a) Category (See Categories listed at the top of this sche		main Nama umanada Fasa
PURPOSE	Fees	vvebsite and Do	main Name upgrade Fees
OF EXPENDITURE			1.1
LAT LINDITORL			
	(C) Check if travel outside of Texas. Complete Sched	ule T. Check If Austin	, TX, officeholder living expense
9 Complete ONLY If direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OF	<u>'</u>		·.
Date	Payee name		
8/12/2021	GoDaddy.com, LLC	• • •	· · · · · · · · · · · · · · · · · · ·
0/12/2021	Gobaddy.com, LEG		
A		Cibra	State; Zip Code
Amount (\$) \$76.27	Payee address; 14455 N. Hayden Rd., Suite 219, S	City;	State; Zip Code
ψ1 U.Z.I	14400 N. Haydeli Rd., Odite 219, O	cottsdate, AZ 00200	•••
	·		
	Category (See Categories listed at the top of this sched	dule) Description	· ·
PURPOSE	Fees	Email Upgrade	Fees
OF .	<i>,</i>	, , , ,	
EXPENDITURE			
	Check if travel outside of Texas. Complete Sched	tule T. Check If Austin	, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OI	1 .		
			<u> </u>
Date	Payee name .		
8/19/2021	Adobe		
	· · ·		: :
Amount (\$)	Payee address;	City;	State; Zip Code
\$15.74	345 Park Ave., San Jose, CA 95110	0	
٠.			•
• :.	Category (See Categories listed at the top of this sched	. ,	rindlan Candaa 4
PURPOSE	Fees	Monthly Subsc	ription Service to
OF EXPENDITURE	Ä.	Adobe Acrobat	
4.30			
<u> </u>	Check if travel outside of Texas. Complete Sched	Luie I. Check if Austin	, TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/OI			
	ATTAQUARETTA		
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEE	DED

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out Of District
Other (enter a category not listed shows)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Christopher G. Morales	3	Filer ID (Ethics Commission Filers)
4 Date 8/27/2021	5 Payee name Adobe		
6 Amount (\$) \$10.49	7 Payee address; 345 Park Ave., San Jose, CA 95110	City;	State; Zip Code
	Ä.	·	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Monthly Subscripti	on Service to Adobe Spark
	(c) Check if travel outside of Texas. Complete Schedule T.	Check If Austin, TX	C, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name	**	
8/24/2021	Neumann and Company	- 1 - 41 - 11	
Amount (\$) \$2502.34	Payee address; 5417 Pine St., Bellaire TX 77401	City;	State; Zip Code
:. :.		***	
PURPOSE	Category (See Categories listed at the top of this schedule) Advertising Expense	Push Cards	
OF EXPENDITURE	. `	<u> </u>	
	Check If travel outside of Texas. Complete Schedule T.	Check if Austin, T	(, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 8/26/2021	Payee name Fort Bend Postal		
Amount (\$) \$70.00	Payee address; 310 Morton St., Richmond, TX 77469	City;	State; Zip Code
:.			
PURPOSE OF	Category (See Categories listed at the top of this schedule) Fees	P.O. Box Yearly F	70.4 F ee 7.440 27.5
EXPENDITURE		1	.,
	Check If travel outside of Texas. Complete Schedule T.	Check if Austin, T	K, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDE	:D

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report. **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Relmbursement Office Overhead/Rental Expense Solicitation/Fundraising Exp Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Gift/Awards/Memorials Expense Travel In District Polling Expense Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Other (enter a category not listed above) Credit Card Payment The instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Christopher G. Morales 4 Date 5 Payee name 9/9/2021 Staples, Inc. 6 Amount (\$) 7 Payee address; Zip Code City: State: 500 Staples Dr., Framingham, MA 01702 \$70.33 (a) Category (See Categories listed at the top of this schedule) (b) Description Office Supplies for the Campaign Office Overhead **PURPOSE** OF **EXPENDITURE** Check If Austin, TX, officeholder living expense Check if travel outside of Texas, Complete Schedule T. 9 Complete ONLY if direct Candidate / Officeholder name Office sought expenditure to benefit C/OH Payee name Date 9/13/2021 Staples, Inc. Amount (\$) City: State: Zip Code Payee address; \$35.90 500 Staples Dr., Framingham, MA 01702 Description Category (See Categories listed at the top of this schedule) Office Overhead Office Supplies for the Campaign **PURPOSE** OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 9/1/2021 Tree Frog Printing Amount (\$) Zip Code \$739.67 9711 S. Mason Rd., Suite 125-303, Richmond, TX 77407 Category (See Categories listed at the top of this schedule) Advertising Expense Pop Up Banners and Backdrop Banner. **PURPOSE** EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Complete ONLY if direct Office held expenditure to benefit C/OH

SCHEDULE F1

If the requested inform	nation is no	ot applicable, DO NOT inc	lude this	page in the repor	<u>t.</u>	
	•:	EXPENDITURE CATE	GORIES F	OR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gltt/Awards/Memorials Expense Legal Services The Instruction Guide explai	Office Over Polling Exp Printing Ex Satarles/W	pense ages/Contract Labor	Solicitation/Fundralsin Transportation Equipm Travel in District Travel Out Of District Other (enter a categor	nent & Related Expense
1 Total pages Schedule F1:	2 FILER N	AME her G. Morales			3 Filer ID (Ethics	Commission Filers)
4 Date 9/20/2021	5 Payee na Adobe	ame		· ;		·
6 Amount (\$) \$15.74	7 Payee ad 345 Park	ddress; k Ave., San Jose, CA 95	5110	City:	State;	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Categor Fees	y (See Categories listed at the top of thi		(b) Description Monthly Subscri Adobe Acrobat	ption Service 1	· · · · · · · · · · · · · · · · · · ·
9 Complete ONLY if direct expenditure to benefit C/OF	Candle	date / Officeholder name		Office sought	· · · · · · · · · · · · · · · · · · ·	Office held
Date 9/28/2021	Payee na Adobe	ame				1. 1.2 2.
Amount (\$) \$10.49	Payee a 345 Park	^{ddress;} (Ave., San Jose, CA 9	5110	City;	State;	Zip Code
PURPOSE OF EXPENDITURE	Categor Fees	y (See Categories listed at the top of this	schedule)	Monthly Subsc Adobe Spark	ription Servic	e to
		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		date / Officeholder name		Office sought		Office held
Date 10/1/2021	Payee n Faceboo					
Amount (\$) \$4.19	Payee a 1 Hacker	^{ddress;} r Way, Menlo Park, CA	94025	City;	State;	ZIp Code
PURPOSE OF EXPENDITURE		y (See Categories listed at the top of this ing Expense	schedule)	Description Facebook Ad F	ee	· ·
•		Check if travel outside of Texas. Complete	Schedule T.	Check if Austin	, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/O		date / Officeholder name		Office sought		Office held

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report. **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Accounting/Banking Transportation Equipment & Related Expense Travel in District Consulting Expense Food/Beverage Expense Glft/Awards/Memorials Expense Polling Expense Contributions/Donations Made By Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Salarles/Wages/Contract Labor Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Christopher G. Morales 4 Date 5 Payee name 10/1/2021 Campaign Monitor Pty Ltd. 6 Amount (\$) 7. Payee address; City; State: Zip Code \$94.87 55 2nd Street, Suite 1925, San Francisco, CA 94105 (b) Description (a) Category (See Categories listed at the top of this schedule) 8 Advertising Expense **Email Marketing Company Fee** PURPOSE EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX; officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name 10/20/2021 Adobe: Amount (\$) Payee address; City; State; Zip Code \$15.74 345 Park Ave., San Jose, CA 95110 Description Category (See Categories listed at the top of this schedule) **Fees** Monthly Subscription Service to PURPOSE Adobe Acrobat OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date 10/21/2021 Payee name Office Depot, LLC Amount (\$) Zip Code \$36.78 6600 North Military Trail, Boca Raton, FL 33496 Category (See Categories listed at the top of this schedule) Description Office Overhead Office Supplies for the Campaign PURPOSE EXPENDITURE . Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

	EXPENDITURE CATEG	ORIES FOR BOX 8(a)	•
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense y Gift/Awards/Memorials Expense	Loan Rapayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarles/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Christopher G. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 10/22/2021	5 Payee name Office Depot, LLC		
6 Amount (\$) \$148.80	7 Payee address; 6600 Military Trail, Boca Raton, F	City: L 33496	State; Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this s Advertising Expense (c) Check if travel outside of Texas. Complete Sci	Supplies for Ca Sponsor Poste	ampaign Kickoff and Printing of rs
9 Complete ONLY if direct expenditure to benefit C/Or	Candidate / Officeholder name	Office sought	Office held
Date 10/25/2021	Payee name Amazon.com		
Amount (\$) \$17.19	Payee address; 410 Terry Ave. North, Seattle, WA	City; A 98109-5210	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Advertising Expense		Advertising Videos
	Check if travel outside of Texas. Complete Sci	hedule T. Check If Aus	tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date 10/25/2021	Payee name Amazon.com		
Amount (\$) \$21.46	Payee address; 410 Terry Ave. North, Seattle, WA	98109-5210 City;	State; Zip Code
	No.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this so Advertising Expense		or pictures from Campaign
	Check if travel outside of Texas. Complete Sci		tin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense Loan Repayment/Relmbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Accounting/Banking Consulting Expense Transportation Equipment & Related Expense Travel In District Fees Food/Beverage Expense Polling Expense Contributions/Donations Made By Travel Out Of District Printing Expense Candidate/Officeholder/Political Committee Other (enter a category not listed above) Legal Services Salarles/Wages/Contract Labor Credit Card Payment The instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME Christopher G. Morales 19 4 Date 5 Payee name 10/26/2021 Lumecube.com 6 Amount (\$) City: State; Zip Code 7 Payee address; \$216.49 2870 Whiptail Loop, Suite 104, Carlsbad, CA 92010 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 Advertising Expense Supplies for Advertising Videos PURPOSE OF **EXPENDITURE** (c) Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Payee name ... Date 10/28/2021 Office Depot, LLC Amount (\$) City: State; Zip Code Payee address; \$5.96 6600 Military Trail, Boca Raton, FL 33496 Description Category (See Categories listed at the top of this schedule) Office Supplies for Campaign Office Overhead **PURPOSE** EXPENDITURE Check If Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 10/28/2021 Amazon.com Amount (\$) Payee address; City; State; Zip Code \$18.39 410 Terry Ave. North, Seattle, WA 98109-5210 Category (See Categories listed at the top of this schedule) Description Supplies for Meet and Greets/ Office Overhead **PURPOSE** Fundraisers EXPENDITURE 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 held Office sought ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

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1:5		EXPENDITURE	CATEGORIES F	OR BOX 8(a)	1.	
A.A. mattalana .						
Advertising Expense		Event Expense		ment/Relmbursement	Solicitation/Fundralsing Expense	
Accounting/Banking		Fees		head/Rental Expense	Transportation Equipment & Related Expense	
Consulting Expense Contributions/Donations Made By		Food/Beverage Expense	Polling Exp		Travel in District	
Candidate/Officeholder/Politica		Gift/Awards/Memorials Exp Lègal Services		pense ages/Contract Labor	Travel Out Of District Other (enter a category not listed above)	
Credit Card Payment		Caffar Sources	Salanes/W	By CONCUMBINE LEDOT	Other (enter a category not listed above)	
Great Cala Cayment		The Instruction Guide	explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER N	AME			3 Filer ID (Ethics Commission Filers)	
19						
19	Christopi	ner G. Morales	·		r **	
4 Date :	5 Payee na	ime.				
11/1/2021	Campaig	n Monitor Pty Ltd.				
11/1/2021	Campaig	II MOIIIOI PLY LIG.	<u> </u>			_
6 Amount (\$)	7 Payee ac	idress;		City:	State; Zip Code	
\$94.87	55 2nd S	t., Suite 1925, Sar	Francisco C	A 94105		
Ψ34.07	JJ Zilu J	L, Guile 1920, Gai	T Tankson, C	7.07.100		
·		N-1				
			<u> </u>			
8	(a) Categor	y (See Categories listed at the	top of this schedule)	(b) Description		
		ng Expense			ng Company Fee	
PURPOSE	, 10 4 Ci noii	ing Expense	. "	Lilian Markeu	ig Company i Ce	
OF		111.				
EXPENDITURE		.**				
	(4)					П
11.	(c)	Check if travel outside of Texas. C	complete Schedule T.	Check If Au	stin, TX, officeholder living expense	
9 Complete ONLY if direct	Candid	ate / Officeholder name	:	Office sought	Office held	
expenditure to benefit C/OF		1				
201011 0/01	-					
	Da:				,	
Date	Payee na	•	****		*	
10/21/2021	Office De	epot, LLC				
		1.	÷*			
***		<u> </u>				_
Amount (\$)	Payee ad			City;	State; Zip Code	
\$30.82	6600 No	rth Military, Boca F	Raton, FL 3349	96		
		,, = - 3 - ·			*	
			*		.*	
	Cetana	/ (Pan Catagodan Hatadan)	an addhla ash - dida.	Description		-
•		(See Categories listed at the to	op of this schedule)	Description	h - Oomen sleen 1/1-1 ff	
PURPOSE	Aavertis	ing Expense		Supplies for t	the Campaign Kickoff	
OF		- ·			. -	
EXPENDITURE					:	
				l		_
. '		Check if travel outside of Texas. C	Complete Schedule T.	Check If Au	stin, TX, officeholder living expense	
Complete ONLY if direct	Candid	ate / Officeholder name	· · · · · · · · · · · · · · · · · · ·	Office sought	Office held	_
expenditure to benefit C/OF					;	
	-				••	
			<u></u>			=
Date	Payee na	ame			1	
11/1/2021	Iconic Im	. 3		,		
11/1/2021		P	• .*			
٠.		214				
A		44-4			o'	_
Amount (\$)	Payee at		**	City;	State; Zip Code	
\$279.18	14101 W	. Highway 290, Bl	dg. 1800. Aust	tin, TX 78737		
			J			
	Cetter	. 10 - 0 - 1		Donodetter		_
		(See Categories listed at the to	op of this schedule)	Description		
PURPOSE	Advertisi	ng Expense	" · .*	Marketing Pro	ducts for Campaign	
OF		: · .	1990	_	_	
EXPENDITURE		· , · .	•			
· ·						_
		Check if travel outside of Texas. (Complete Schedule T.	Check if Au	stin, TX, officeholder living expense	
Complete ONLY 15 -11	Candid	late / Officeholder name	•	Office sought	Office held	_
Complete ONLY if direct				JJo Jought		
expenditure to benefit C/OF					•	
<u>-</u>			···	<u> </u>		=
	ΔΤ	TACH ADDITIONAL C	OPIES OF THIS	SCHEDULE AS NE	EDED	
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SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking . .

Event Expense

Loan Repayment/Relmbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica	Glft/Awards/Memorials Expense P	Polling Expense Printing Expense Salarles/Wages/Contract Labor	Travel in District Travel Out Of District Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains i	how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME Christopher G. Morales		3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
11/1/2021	Facebook, Inc.	· .	
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
\$66.91	1 Hacker Way, Menlo Park, CA 94	025	
8 PURPOSE	(a) Category (See Categories listed at the top of this sch Advertising Expense	(b) Description Facebook Ad I	Fee
OF EXPENDITURE			
EXPENDITORE			
	(C) Check if travel outside of Texas. Complete Sche		tin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
experience to opinent C/OF			
Date	Payee name		
11/3/2021	Lumecube.com		
	••		<u> </u>
Amount (\$)	Payee address;	City;	State; Zip Code
\$116.91	2870 Whiptail Loop, Suite 104, Ca	risbad, CA 92010	•
			· .
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sch. Advertising Expense	Equipment fo	r Advertising Videos
	Check If travel outside of Texas. Complete Scho	edule T. Check if Au	stin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		·
11/4/2021	Lawn Letters of Texas - Fort Bend	·	×
• 5			· ·
Amount (\$) \$4622.29	Payee address; 6727 Rustling Oaks, Richmond, TX	City;	State; Zip Code
		,	
· · · · · · · · · · · · · · · · · · ·	Cotono (R. O.)	Daniel III	
	Category (See Categories listed at the top of this sch Advertising Expense		nd Large Street Signs
PURPOSE OF	The state of the s	rard Signs ar	nd Large Street Signs
EXPENDITURE			
	Check if travel outside of Texas. Complete Scho	edule T. Check if Au	stin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
	ATTACH ADDITIONAL COPIES O	OF THIS SCHEDULE AS N	EEDED
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SCHEDULE F1

ii tile requested illioni			RE CATEGOR						_
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	•	Event Expense Fees Food/Beverage Expens Gltt/Awards/Memorials Legal Services The Instruction G	se Pol Expense Pri Sal	ice Overh ling Expe nting Expe artes/Way	ense ges/Contract Labor	e Tran Trav Trav Othe	vel In District vel Out Of Distri	pment & Related Expens	æ
1 Total pages Schedule F1:	2 FILER N Christoph	AME ner G. Morales				3 F	lier ID (Ethic	cs Commission Filers)	
4 Date 11/5/2021	5 Payee na Amazon.			, .	:			:	
6 Amount (\$) \$8.65	7 Payee at 410 Terr	ddress; y Ave. North, S	eattle, WA 9	8109-	City; 5210		State;	Zip Code	
8	-	y (See Categories listed a	t the top of this sched	lule)	Equipment	for Adv	ertising V	ideos	
PURPOSE OF EXPENDITURE	Advertisi	ng Expense	xas. Complete Schedu	ke T.		.,	officeholder livir		
9 Complete ONLY if direct expenditure to benefit C/O	Candid	late / Officeholder na			Office sough			Office held	
Date 11/18/2021	Payee na Staples								
Amount (\$) 30.19	Payee at 500 Stap	dress; lles Dr., Framin	gham, MA 0	1702	City;	•	State;	Zlp Code	
PURPOSE OF EXPENDITURE		/ (See Categories listed at Iverhead			Description Office Supp				
	Condid	Check If travel outside of Te		le T.			officeholder livir	Office held	
Complete ONLY if direct expenditure to benefit C/OF		ate / Officendider na	ime		Office sough	ı ı		. Onles held	
Date 11/18/2021	Payee na Amazon.								
Amount (\$) \$21.10	Payee at 410 Terry	ddress; Ave. North, Se	eattle, WA 98	3109-	City; 5210		State;	Zip Code	
PURPOSE OF EXPENDITURE	Category Office Ov	/ (See Categories listed at /erhead	the top of this schedu	ile)	Description Office Supp		·		
		Check if travel outside of Te	xas. Complete Schedul	e T.	Check if	Austin, TX,	officeholder livir	ng expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		late / Officeholder n	ame		Office soug	ht		Office held	
	ΔΤ	TACH ADDITIONA	L COPIES OF	THISS	CHEDULEAS	NEEDEL)		

SCHEDULE F1

If the requested inform	nation is not applicable, DO NOT incl	ude this page in the repo	rt.
	EXPENDITURE CATEG	ORIES FOR BOX 8(a)	
Advertising Expense Accounting/Baniding Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Weges/Contract Lebor	Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
11/18/2021	Threadfellows		
6 Amount (\$) \$257.75	7 Payee address; 1925 Monroe St., Ste. 220, Madis	City: son, WI 53711	State; Zip Code
		schedule) (b) Description	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this and Advertising Expense	Shirts with Logo	o Embroidered
** #.	(c) Check If travel outside of Texas. Complete Sc	chedule T. Check If Austi	in, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held
Date 11/18/2021	Payee name GoDaddy.com		
Amount (\$) \$119.60	Payee address; 14455 N. Hayden Rd., Suite 219	, Scottsdale, AZ 85260	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this s Fees		y Upgrade Fee
	Check if travel outside of Texas. Complete S	chedule T. Check If Aust	lin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held
Date	Payee name	7.4°	
11/18/2021	Tree Frog Printing		<i>: :</i>
Amount (\$) \$819.06	Payee address;	City:	State; Zip Code
1-	9711 S. Mason Rd., Suite 125-30	03, Richmond, TX 77407	7
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this s Advertising Expense	Chedule) Description Koozies and B	usiness Cards
.:	Check If travel outside of Texas. Complete S	chedule T. Check If Aus	tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report. **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Event Expense Loan Repayment/Relmbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Accounting/Banking Transportation Equipment & Related Expense Consulting Expense Contributions/Donations Made By Food/Beverage Expense Travel In District Palling Expense Printing Expense Salaries/Wages/Contract Labor Glft/Awards/Memorials Expense Travel Out Of District Candidate/Officeholder/Political Committee Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME Christopher G. Morales 4 Date 5 Payee name 11/19/2021 Adobe Zip Code 6 Amount (\$) City; State: 7 Payee address; 345 Park Ave., San Jose, CA 95110 \$191.12 (b) Description (a) Category (See Categories listed at the top of this schedule) Purchase of Adobe Acrobat Pro Fees PURPOSE OF **EXPENDITURE** Check If travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY If direct expenditure to benefit C/OH Payee name Date Fort Bend Postal 11/15/2021 State: Amount (\$) Payee address; City; Zip Code \$128.00 310 Morton St., Richmond, TX 77469 Description Category (See Categories listed at the top of this schedule) Stamps Other **PURPOSE** EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Office held Candidate / Officeholder name Office sought Complete ONLY If direct expenditure to benefit C/OH Payee name Date SurePoint Storage Richmond 11/24/2021 Amount (\$) City; State: Zip Code \$105.00 5310 Pointe W. Circle, Richmond, TX 77469 Description Category (See Categories listed at the top of this schedule) Storage Rental Monthly Fee Rental Expense PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Advertising Expense Accounting/Banking Consulting Expense

Credit Card Payment

11/29/2021

19

4 Date

Contributions/Donations Made By

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Relmbursement Office Overhead/Rental Expense Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel in District Food/Beverage Expense Politing Expense Gift/Awards/Memorials Expense Printing Expense Setarles/Weges/Contract Lebor. Travel Out Of District Other (enter a category not listed above) Candidate/Officeholder/Political Committee Legal Services The instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Christopher G. Morales 5 Payee name Western Digital

6 Amount (\$)	7 Payee address;	_	City;	State;	Zip Code	
\$200.25	5601 Great Oaks Pa	rkway, San Jose, C	CA 95119	A STA	:	÷. •
						1. %
8	(a) Category (See Categories II	sted at the top of this schedule)	(b) Description			• ;:
BUBBBB	Office Overhead		Backup Drive f	or Campaign	Files	
PURPOSE						
EXPENDITURE					,	٠.
	(C) Check if travel outside	e of Texas. Complete Schedule T.	Check If Aust	tin, TX, officeholder III	dng expense	
9 Complete ONLY if direct expenditure to benefit C/Oi	Candidate / Officehold	er name	Office sought		Office held	
	•	·	<u></u>	<u>. </u>		<u> </u>
Date	Payee name			4.		
11/23/2021	Fort Bend Republica	an Party		; * *		
1112012021	Tort Bond Republic	arr arry	·			
				: '		
Amount (\$)	Payee address;	·	City;*	State:	Zip Code	
\$1500.00	P.O. Box 461, Sugar	Land TX 77487				
••		•				
	_ Category (See Categories its	ited at the top of this schedule)	Description			
PURPOSE	Fees		Filing Fee wit	h the Repub	lican Party	
			1	•		
, OF			1			
OF EXPENDITURE	· .	,				
	Check If travel outsid	e of Texas. Complete Schedule T.	Check if Aus	tin TX officeholder in	don evnense	
EXPENDITURE	_	e of Texas. Complete Schedule T.		tin, TX, officeholder liv		·
Complete ONLY if direct	Candidate / Officehold		Check if Aus	tin, TX, officeholder liv	oring expense	
EXPENDITURE	Candidate / Officehold			tin, TX, officeholder liv		
Complete ONLY if direct	Candidate / Officehold			tin, TX, officeholder liv		
Complete ONLY if direct	Candidate / Officehold	er name	Office sought	tin, TX, officeholder liv		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officehold	er name	Office sought	tin, TX, officeholder liv		
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officehold	er name	Office sought	tin, TX, officeholder liv		
Complete ONLY if direct expenditure to benefit C/OFD Date 11/30/2021	Payee name Paramount Printing,	er name	Office sought	<u></u>	Office held	
Complete ONLY if direct expenditure to benefit C/Oi Date 11/30/2021 Amount (\$)	Payee name Paramount Printing, Payee address:	er name LLC d/b/a Mighty N	Office sought Moose City:	tin, TX, officeholder liv		
Complete ONLY if direct expenditure to benefit C/OFD Date 11/30/2021	Payee name Paramount Printing,	er name LLC d/b/a Mighty N	Office sought Moose City:	<u></u>	Office held	
Complete ONLY if direct expenditure to benefit C/Oi Date 11/30/2021 Amount (\$)	Payee name Paramount Printing, Payee address:	er name LLC d/b/a Mighty N	Office sought Moose City:	<u></u>	Office held	
Complete ONLY if direct expenditure to benefit C/Oi Date 11/30/2021 Amount (\$)	Payee name Paramount Printing, Payee address; 4707 Hwy 36 S., Ste	LLC d/b/a Mighty N	Office sought Moose City;	<u></u>	Office held	
Complete ONLY if direct expenditure to benefit C/Oi Date 11/30/2021 Amount (\$)	Payee name Paramount Printing, Payee address; 4707 Hwy 36 S., Ste	LLC d/b/a Mighty M 25, Rosenberg, T.	Office sought Moose City: X 77471 Description	<u></u>	Office held	
Complete ONLY if direct expenditure to benefit C/Oh Date 11/30/2021 Amount (\$) \$400.53	Payee name Paramount Printing, Payee address; 4707 Hwy 36 S., Ste	LLC d/b/a Mighty M 25, Rosenberg, T.	Office sought Moose City;	<u></u>	Office held	
Complete ONLY if direct expenditure to benefit C/Oi Date 11/30/2021 Amount (\$) \$400.53	Payee name Paramount Printing, Payee address; 4707 Hwy 36 S., Ste	LLC d/b/a Mighty M 25, Rosenberg, T.	Office sought Moose City: X 77471 Description	<u></u>	Office held	
Complete ONLY if direct expenditure to benefit C/Oh Date 11/30/2021 Amount (\$) \$400.53	Payee name Paramount Printing, Payee address; 4707 Hwy 36 S., Ste	LLC d/b/a Mighty M 25, Rosenberg, T.	Office sought Moose City: X 77471 Description	<u></u>	Office held	
Complete ONLY if direct expenditure to benefit C/Oi Date 11/30/2021 Amount (\$) \$400.53	Payee name Paramount Printing, Payee address; 4707 Hwy 36 S., Ste Category (See Categories its Advertising Expense	LLC d/b/a Mighty M 25, Rosenberg, T.	Office sought Moose City; X 77471 Description T-Shirts	<u></u>	Office held Zip Code	
Complete ONLY if direct expenditure to benefit C/Orient 11/30/2021 Amount (\$) \$400.53 PURPOSE OF EXPENDITURE	Payee name Paramount Printing, Payee address; 4707 Hwy 36 S., Ste Category (See Categories its Advertising Expense	LLC d/b/a Mighty N . 25, Rosenberg, T. sted at the top of this schedule)	Office sought Moose City; X 77471 Description T-Shirts	State;	Office held Zip Code	
Complete ONLY if direct expenditure to benefit C/Oi Date 11/30/2021 Amount (\$) \$400.53	Payee name Paramount Printing, Payee address: 4707 Hwy 36 S., Ste Category (See Categories its Advertising Expense	LLC d/b/a Mighty N . 25, Rosenberg, T. sted at the top of this schedule)	Office sought Moose City: X 77471 Description T-Shirts Check If Aus	State;	Office held Zip Code	

SCHEDULE F1

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Credit Card Payment	Fees Office O Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing	Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME Christopher G. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 12/1/2021	5 Payee name Quality Logo Products		1.5
6 Amount (\$) \$432.50	7 Payee address; 724 N. Highland Ave., Aurora, IL 60506	City;	State; Zlp Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (c) Check if travel outside of Texas. Complete Schedule T.		ucts for the Campaign
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 10/21/2021	Payee name Clancy's Public House	• .	
Amount (\$) \$3500.00	Payee address; 503 FM 359 S., Unit 118, Richmond, TX	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Pescription Food and Bev	erage Cost for Kickoff
	Check if travel outside of Texas. Complete Schedule T.		n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held ∵
Date 12/1/2021	Payee name Campaign Monitor Pty Ltd.		·:
Amount (\$) \$94.87	Payee address: 55 2nd St., Sutie 1925, San Francisco,	City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Email Marketing	g Company Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name ATTACH ADDITIONAL COPIES OF THI	Office sought	Office held

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Relmbursement Solicitation/Fundralsing Expense Office Overhead/Rental Expense Transportation Equipm Travel in District nt & Related Expe Consulting Expense Food/Beverage Expense Polling Expense Contributions/Donations Made By Glft/Awards/Memorials Expense Printing Expense Salaries/Wages/Contract Labor Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Christopher G. Morales 19 4 Date 5 Payee name Michaels Stores 12/1/2021 6 Amount (\$) City; State: Zip Code 7 Payee address; 23701 Brazos Town Crossing, Rosenberg, TX 77469 \$486.69 (a) Category (See Categories listed at the top of this schedule) Framing for campaign auctions, donations 8 Other and office PURPOSE OF EXPENDITURE Check If travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Date 12/1/2021 Paramount Printing, LLC d/b/a Mighty Moose Amount (\$) Payee address; City: State: ZIp Code 4707 Hwy 36 S., Ste. 25, Rosenberg, TX 77471 \$373.46 Category (See Categories listed at the top of this schedule) Description Additional Campaign t-shirts Advertising Exepense PURPOSE OF EXPENDITURE Check If travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name 12/8/2021 Doist, Inc. Amount (\$) Payee address: Zlp Code City: State: \$36.00 2100 Geng Rd., Suite 210, Palo Alto, CA 94303 Category (See Categories listed at the top of this schedule) Description Other Software Program to Keep up with **PURPOSE** Campaign tasks OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F1

	EXPENDITURE CATE					
Advertising Expense Accounting/Baniding Consulting Expense Contributions/Donations Made B Candidate/Offloeholder/Politica Credit Card Payment	Event Expense Fees Food/Beverage Expense y Glft/Awards/Memorials Expense	Loan Repa Office Ove Polling Ex Printing Ex	ryment/Relmbursement rhead/Rental Expense pense	Solicitation/Fundrals Transportation Equit Travel in District Travel Out Of Distric Other (enter a categ	oment & Related Exp ct	
i and the same of	The Instruction Guide expla	ins how to c	omplete this form.	· · · · · · · · · · · · · · · · · · ·		· .
1 Total pages Schedule F1:	2 FILER NAME Christopher G. Morales			3 Filer ID (Ethic	s Commission File	ers)
4 Date 12/8/2021	5 Payee name Clancy's Public House	:		. 1		
6 Amount (\$) \$150.61	7 Payee address; 503 FM 359 S, Unit 118, Richm	ond, Tex	city; as 77406	State;	Zip Code	
					. :	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Expense	nia schedule)	(b) Description Strategic Plann and drink	ing Committee	e Meeting fo	od
	(c) Check if travel outside of Texas. Complete	Schedule T.	Check If Aust	in, TX, officeholder livin	g expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name		Office sought		Office held	
Date 11/18/2021	Payee name Quality Logo Products					
Amount (\$) \$343.52	Payee address; 724 N. Highland Ave., Aurora, I	L 60506	City;	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this Advertising Expense	s schedule)	Description Campaign ma	rketing produ	ucts	
٠.	Check if travel outside of Texas. Complete	Schedule T.	Check If Aust	in, TX, officeholder livin	g expense	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sought		Office held	:
Date 12/13/2021	Payee name Amazon.com	:.·				, .
Amount (\$) \$97.41	Payee eddress: 410 Terry Ave. North, Seattle, V	VA 98109	City; 9-5210	State;	Zip Code	
	Category (See Categories listed at the top of thi	s schedule)	Description	7		• •
PURPOSE OF	Advertising Expense		Equipment for	r Advertising V	/ideos	÷.
EXPENDITURE	Check if travel outside of Texas. Complete	e Schedule T.	Check If Aust	tin, TX, officeholder livin	ng expense	•
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name		Office sought		Office held	
	ATTACH ADDITIONAL COPIE	S OF THIS	SCHEDULE AS NE	EDED		

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Loan Repayment/Relmbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expe

Contributions/Donations Made By		Glfl/Awards/Memorials Expense	Printing Exper	ense	Travel Out Of District	
Candidate/Officeholder/Politica Credit Card Payment	al Committee	Legal Services		jes/Contract Labor	Other (enter a catego	ry not listed above)
		The Instruction Guide explain	s how to con	nplete this form.	· ·	
1 Total pages Schedule F1:	2 FILER N	AME ner G. Morales		·:	3 Filer ID (Ethics	Commission Filers)
4 Date	5 Payee na	ame		·		
12/14/2021	Gary Eva	ans		∷		
6 Amount (\$)	7 Payee ac			City;	State;	Zip Code
\$2500.00	5010 Min	nosa Lп., Richmond, ТХ	77406			
				4. .1	i i i i i i i i i i i i i i i i i i i	· · · ·
8	(a) Categor	y (See Categories listed at the top of this	schedule)	(b) Description		
PURPOSE	Advertisi	ng Expense		Digital Advertis	sing Consultant	Fee
OF	İ		. ŀ.			,
EXPENDITURE		, P.				
	(c)	Check if travel outside of Texas. Complete S	chedule T.	Check if Aus	stin, TX, officeholder living	expense
9 Complete ONLY if direct		late / Officeholder name	•	Office sought		Office held
expenditure to benefit C/O	n 	A TOTAL CONTRACTOR		<u> </u>		
Date	Payee na	ame		: -		
12/23/2021	SurePo	int Storage Richmond	d :			
		· ·				
Amount (\$)	Payee a			City;	State;	Zip Code
\$99.88	5310 Poi	inte West Circle, Richmo	ond, TX 7	7.469		
••				*	:.	
	Category	(See Categories listed at the top of this s	schedule)	· Description		
PURPOSE	Rental E	Expense		Storage Rent	tal Monthly Fe	•
OF EXPENDITURE		4				
EXPENDITORE						
		Check If travel outside of Texas. Complete S	ichedule T.	Check if Aus	stin, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/O		late / Officeholder name		Office sought	·.	Office held
expenditure to belief C/O/		•				•
Date	Payee n	ame				
12/24/2021	Microsof					
				:		
Amount (\$)	Payee a	ddress;		City;	State;	Zip Code
\$108.24	One Mici	rosoft Way, Redmond, V	VA 98052			,
				·	; .,	
4	Category	(See Categories listed at the top of this s	schedule)	Description		
PURPOSE	Other		}	Software for o	ampaign comp	uter
OF EXPENDITURE				114		
		Check if travel outside of Texas. Complete S	chedule T.		stin, TX, officeholder living	expense
Complete ONLY if direct	Candid	late / Officeholder name		Office sought		Office held
expenditure to benefit C/O						
						
	AT	TACH ADDITIONAL COPIES	OF THIS S	CHEDULE AS NE	EDED	

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report. **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Loan Repayment/Relmbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Consulting Expens ood/Beverage Expense Polling Expense Contributions/Donations Made By Gift/Awards/Memorials Expense Travel Out Of District Printing Expense Candidate/Officeholder/Political Committee Legal Services Salarles/Wages/Contract Labor-Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Christopher G. Morales 19 4 Date 5. Payee name 12/31/2021 Campaign Monitor Pty, Ltd. 6 Amount (\$) 7 Payee address; State; Zip Code \$94.87 55 2nd St., Suite 1925, San Francisco, CA 94105 (a) Category (See Categories listed at the top of this schedule) (b) Description Advertising Expense Email Marketing Company Fee **PURPOSE** EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY If direct expenditure to benefit C/OH '... Payee name 9/16-11/29/2021 Anedot, Inc. Amount (\$) State: Zip Code Payee address; 5555 Hilton Ave. Suite 106, Baton Rouge, LA 70808 \$820.80 Category (See Categories listed at the top of this schedule) Credit Card Processing Fees from Anedot Fees PURPOSE for Campaign Contributions b/w EXPENDITURE September and December Check If Austin, TX, officeholder living expense Check if travel outside of Texas, Complete Schedule T. Office held Complete ONLY if direct Candidate / Officeholder name Office sought expenditure to benefit C/OH Date Payee name City; Amount (\$) Pavee address: State; Zip Code Description Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE Check If travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Candidate / Officeholder name Office held Complete ONLY if direct expenditure to benefit C/OH