CANDIDATE / OFFICEHOLDER FORM C/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. N/A 3 CANDIDATE/ MS / MRS / MR FIRST Μŧ OFFICE USE ONLY **OFFICEHOLDER** Mr. Jon A. NAME Date Received NICKNAME SUFFIX HC FWSD 61 Morgan APT / SUITE #; 4 CANDIDATE / ADDRESS / PO BOX; ZIP CODE OFFICEHOLDER 12827 Pantano Dr, Houston, TX 77065 MAILING **ADDRESS** Change of Address AREA CODE 5 CANDIDATE/ PHONE NUMBER EXTENSION Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (832)792-0321 PHONE Receipt # Amount \$ MS / MRS / MR FIRST 6 CAMPAIGN MI **TREASURER** self Date Processed NAME NICKNAME LAST SUFFIX Date Imaged STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CAMPAIGN CITY STATE; ZIP CODE TREASURER same as above ADDRESS (Residence or Business) AREA CODE PHONE NUMBER 8 CAMPAIGN EXTENSION **TREASURER PHONE** same as above 9 REPORT TYPE January 15 Runoff 15th day after campaign 30th day before election treasurer appointment (Officeholder Only) July 15 Exceeded Modified Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD Month Day Year COVERED 1 30 24 / 24 THROUGH 11 ELECTION **ELECTION DATE** ELECTION TYPE Primary Runoff Other Description Month Day Year OFFICE HELD (if any) 12 OFFICE 13 OFFICE SOUGHT (if known) Director/Commissioner 14 NOTICE FROM THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES. **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**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

| Jon A. Morgan | | 16 Filer ID (Ethics Commission Filers) N/A | | |
|---|--|--|--|--|
| 17 CONTRIBUTION TOTALS | TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | | | |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEE | S OF LOANS) | | |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURE. | \$ | | |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED A OF REPORTING PERIOD | S OF THE LAST DAY \$ | | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LAST DAY OF THE REPORTING PERIOD | LOANS AS OF THE \$ | | |
| 18 SIGNATURE I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. | | | | |
| 34 | \mathcal{L} | 47/ | | |
| Signature of Candidate or Officeholder | | | | |
| | | | | |
| Please complete either option below: | | | | |
| | | | | |
| (1) Affidavit | | | | |
| NOTARY STAMP/SEAL | L | | | |
| Sworn to and subscribed before me by this the day of, | | | | |
| 20, to certify which, witness my hand and seal of office. | | | | |
| Signature of officer administer | ring oath Printed name of officer administering oath | Title of officer administering oath | | |
| | OR | | | |
| (2) Unsworn Declaration | on | | | |
| My name is | , and my da | ate of birth is | | |
| My address is | | | | |
| Executed in | (street) (city) | , | | |
| Endouted III | County, State of, on the da | ay of, 20 (month) (year) | | |
| | Signat | ure of Candidate/Officeholder (Declarant) | | |

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

| The Instruction Guide explains how to complete this form. | | | |
|---|---|---|--|
| | ● Complete only if "Report Type" on page 1 is marked " | "Final Report" •• | |
| 1 C/OF | 1 NAME | 2 Filer ID (Ethics Commission Filers) | |
| Jon A. I | Morgan | N/A | |
| 3 SIGN | NATURE | | |
| desig | not expect any further political contributions or political expenditures in connection wignating a report as a final report terminates my campaign treasurer appointment. I a paign contributions or make any campaign expenditures without a campaign treasure | also understand that I may not accept any | |
| | ER WHO IS NOT AN OFFICEHOLDER omplete A & B below <i>only</i> If you are not an officeholder. •• | | |
| A. | CAMPAIGN FUNDS | | |
| Che | eck only one: | | |
| | I do not have unexpended contributions or unexpended interest or income earne | ed from political contributions. | |
| and vigor | I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204. | | |
| В. | ASSETS | | |
| Che | eck only one: | | |
| | I do not retain assets purchased with political contributions or interest or other in | ncome from political contributions. | |
| Comments and the | I do retain assets purchased with political contributions or interest or other income that I may not convert assets purchased with political contributions or interest or personal use. I also understand that I must dispose of assets purchased with porrequirements of Election Code, § 254.204. | other income from political contributions to | |
| | | Signature of Candidate | |
| | CEHOLDER omplete this section <i>only</i> if you are an officeholder •• | | |
| | I am aware that I remain subject to filing requirements applicable to an officeholder we file. I am also aware that I will be required to file reports of unexpended contribution an officeholder, I retain political contributions, interest or other income from political political contributions or interest or other income from political contributions. | ns if, after filing the last required report as | |
| | | Signature of Officeholder | |