

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: **9**

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Albert	R
	NICKNAME	LAST	SUFFIX
	Judah	Tibbs	Jr.

OFFICE USE ONLY

Date Received

OCT 31 2022 RCP

Date Hand-delivered or Date Postmarked

Receipt #	Amount \$
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Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	P.O. Box 17151		Sugar Land TX		77496

Change of Address

5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(832)	443 - 8683	

6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Mayur	
	NICKNAME	LAST	SUFFIX
		Shah	

7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE
	13013 Parksbrook Way Lane		Sugar Land TX		77498

(Residence or Business)

8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(713)	385 - 0378	

9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)
	<input type="checkbox"/> July 15	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)

10 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	10	12	22		11	31	22

11 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month	Day	Year	Primary	Runoff	Other Description
	11	8	22	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	

12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)	County Treasurer
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14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

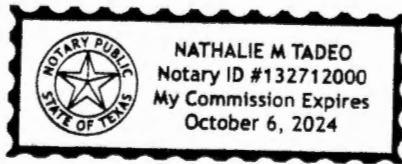
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Albert R. Tibbs, Jr.		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,125.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,876.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 249.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 53,000.00

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.



Albert R. Tibbs, Jr.
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by Albert Roy Tibbs this the 31st day of October,

20 22, to certify which, witness my hand and seal of office.

Nathalie Tadeo Signature of officer administering oath
Nathalie Tadeo Printed name of officer administering oath
A. B Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
 (street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 3,125.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
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 FUNDS		\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Albert R. Tibbs, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 10/28/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Jerone Garland 6 Contributor address; City; State; Zip Code 2610 Attala Road Koscuisko MS 39090	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions) Minister		9 Employer (See Instructions) Unknown
Date 10/28/2022	Full name of contributor out-of-state PAC (ID#: _____) Rasheda james - Ogunkelu Contributor address; City; State; Zip Code P.O. Box 451415 Missouri City TX 77459	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Account Manager		Employer (See Instructions) Unknown
Date 02/17/2022	Full name of contributor out-of-state PAC (ID#: _____) Gloria Ford Contributor address; City; State; Zip Code 4000 Technology Forest Blvd. The Woodlands TX 77381	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Fox Sports
Date 10/26/2022	Full name of contributor out-of-state PAC (ID#: _____) ROland Shaw Contributor address; City; State; Zip Code 8115 Highland Green Dr. Sugar Land TX 77479	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Albert R. Tibbs. Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 10/25/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Kenneth Jones 6 Contributor address; City; State; Zip Code 1421 Road 5100 Cleveland TX 77327	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) Photographer		9 Employer (See Instructions) Ken Jones Photography
Date 10/25/2022	Full name of contributor out-of-state PAC (ID#: _____) Winslow Seale Contributor address; City; State; Zip Code 416 Marshall Manor Dr. Silver Spring MD 20905	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Minister		Employer (See Instructions) Unknown
Date 10/21/2022	Full name of contributor out-of-state PAC (ID#: _____) MacCloumbus Whittaker Contributor address; City; State; Zip Code 22 Canta Clara Dr. Manvel TX 77578	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Atheletic Director		Employer (See Instructions) Pearland ISD
Date 10/21/2022	Full name of contributor out-of-state PAC (ID#: _____) Will Fortune Contributor address; City; State; Zip Code 4315 Whippoorwill Cir. Missouri City TX 77459	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Retired Pastor		Employer (See Instructions) N/A

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Albert R. Tibbs, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 10/19/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Kimberly Upchurch	25.00
	6 Contributor address; City; State; Zip Code 3607 Aldridge Missouri City TX 77459	
8 Principal occupation / Job title (See Instructions) School Administrator		9 Employer (See Instructions) HISD
Date 10/19/2022	Full name of contributor out-of-state PAC (ID#: _____) H Jorman	100.00
	Contributor address; City; State; Zip Code P.O. Box 330863 Houston TX 77233	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/10/2022	Full name of contributor out-of-state PAC (ID#: _____) David Taylor	100.00
	Contributor address; City; State; Zip Code 14211 Clear Landing Lane Rosharon TX 77583	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/17/2022	Full name of contributor out-of-state PAC (ID#: _____) Nigel Franklin	1,000.00
	Contributor address; City; State; Zip Code 402 Iris Rose Court Richmond TX 77469	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Albert R. Tibbs, Jr.

3 Filer ID (Ethics Commission Filers)

4 Date

10/31/2022

5 Full name of contributor

Sha Haleem

out-of-state PAC (ID#: _____)

6 Contributor address;

City;

State;

Zip Code

7514 San Clement Point Ct. Katy TX 77494

7 Amount of contribution (\$)

100.00

8 Principal occupation / Job title (See Instructions)

Unknown

9 Employer (See Instructions)

Unknown

Date

10/17/2022

Full name of contributor

Ronald MacWherter

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

2313 Briarglen Drive Houston TX 77027

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Commercial Broker

Employer (See Instructions)

CBRE

Date

10/16/2022

Full name of contributor

Cherlotte Thomas

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

1246 N Arbor Bough Circle Fresno TX 77545

Amount of contribution (\$)

50.00

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

N/A

Date

10/14/2022

Full name of contributor

Dylan Russell

out-of-state PAC (ID#: _____)

Contributor address;

City;

State;

Zip Code

4518 Pebblestone Dr. Missouri City TX 77459

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Unknown

Employer (See Instructions)

Unknown

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Albrt R. Tibbs, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 10/14/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Rachel Pitre	7 Amount of contribution (\$) 150.00
6 Contributor address; City; State; Zip Code 13232 Tracewood Hills Land Houston TX 77044		
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Pearland ISD
Date 10/14/0222	Full name of contributor out-of-state PAC (ID#: _____) Festus Amoye	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 3923 Hazel Park Dr. Houston TX 77082		
Principal occupation / Job title (See Instructions) Theorapist		Employer (See Instructions) Memorial Hermann
Date 10/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Lancia McCray	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 2115 Mountshire Dr. Missouri City TX 77489		
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 10/13/2022	Full name of contributor out-of-state PAC (ID#: _____) Justine Cherne	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 6028 Rawlings Road Missouri City 77489		
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Albert R. Tibbs, Jr.		3 Filer ID (Ethics Commission Filers)
4 Date 10/13/2022	5 Full name of contributor out-of-state PAC (ID#: _____) G Riley Hetherington 6 Contributor address; City; State; Zip Code 4310 Gibson Houston TX 77007	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Hetherington Law Firm
Date 10/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Jackie Bergeron Contributor address; City; State; Zip Code 12115 Bradenway Ln Houston YX 77089	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Trucker		Employer (See Instructions) Global Experts LLC
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		