

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: <p style="text-align:center;">8</p>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Tyra	MI
	NICKNAME	LAST Jones McCallum	SUFFIX
OFFICE USE ONLY			
Date Received <p style="text-align:right; font-size: 1.2em;">JUL 20 2022 RCVD</p>			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	PO BOX 541		
	RICHMOND, TX 77478		
	Date Hand-delivered or Date Postmarked		
Receipt #		Amount	
Date Processed			
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST KAI	MI
	NICKNAME	LAST JONES	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	18310 Argyle Park Trace Richmond, Texas 77407		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	713	899-3411	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month	Day	Year
	02	20	2022
THROUGH		Month	Day
		06	30
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	11	08	2022
		<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
		<input type="checkbox"/> Other	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
			Statutory County Judge District 268th County Court at Law #2

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
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15 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. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.		
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 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)	\$	1,594.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	902.38
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	6,742.34
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Tyra McCollum, this the 20 day of July, 20 22, to certify which, witness my hand and seal of office.

[Handwritten Signature] Chandra White Notary

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - JC/OH

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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	1,594.50
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	400.00
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	502.38
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/3 Rpt: 4/8
2 FILER NAME Jones, Tyra		3 Filer ID
4 Date 02/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caselberry, Shawn 6 Contributor address; City; State; Zip Code 25627 Canyon Crossing Drive Richmond, TX 77406	7 Amount of Contribution (\$) \$479.70
8 Contributor's Principal Occupation Entrepreneur		9 Contributor's Job Title Entrepreneur
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Sharon Contributor address; City; State; Zip Code 9306 Hudson Bend Circle Houston, TX 77095	Amount of Contribution (\$) \$23.70
Contributor's Principal Occupation Entrepreneur		Contributor's Job Title Owner
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morton, Suzy Contributor address; City; State; Zip Code 920 Waverly Street Houston, TX 77078	Amount of Contribution (\$) \$95.70
Contributor's Principal Occupation Attorney		Contributor's Job Title Asst DA
Contributor's employer/law firm FBCDA		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/3 Rpt: 5/8
2 FILER NAME Jones, Tyra		3 Filer ID
4 Date 02/22/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Venise	7 Amount of Contribution (\$) \$60.00
6 Contributor address; City; State; Zip Code 4622 Diamond Sprigd Missouri City, TX 77459		
8 Contributor's Principal Occupation Sales		9 Contributor's Job Title Sales
10 Contributor's employer/law firm Azure Vascular		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/29/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strange, Jeff	Amount of Contribution (\$) \$239.70
Contributor address; City; State; Zip Code 126 Conchola Lane Richmond, TX 77469		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Vera	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1815 Quiet Hollow Fresno, TX 77545		
Contributor's Principal Occupation None		Contributor's Job Title None
Contributor's employer/law firm None		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/3 Rpt: 6/8
2 FILER NAME Jones, Tyra		3 Filer ID
4 Date 06/15/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Chakilla <hr/> 6 Contributor address; City; State; Zip Code 28214 Green Forest Bluff Katy, TX 77494	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Mgmt		9 Contributor's Job Title Group VP
10 Contributor's employer/law firm Davita		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Chandra <hr/> Contributor address; City; State; Zip Code 6219 Apple Bluff Court Sugar Land, TX 77479	Amount of Contribution (\$) \$95.70
Contributor's Principal Occupation Realtor		Contributor's Job Title Agent
Contributor's employer/law firm Gary Greene Realtor		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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 above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 7/8	2 FILER NAME Jones, Tyra	3 Filer ID
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4 Date 02/24/2022	5 Payee name DIBRELL & ASSOCIATES
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code PO BOX 619 KATY , TX 77493
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fliers
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/03/2022	Payee name DIBRELL & ASSOCIATES
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Amount (\$) \$150.00	Payee address; City; State; Zip Code PO BOX 619 KATY , TX 77493
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fliers
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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 above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 8/8	2 FILER NAME Jones, Tyra	3 Filer ID
4 Date 03/07/2022	5 Payee name Walgreens	
6 Amount (\$) \$502.38 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 25620 Kingsland Blvd Katy, TX 77494	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you cards
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held