# 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 (Eth	ics Commission Filers)	2 Total pages	filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR  MCS	TYPA LAST		SUFFIX	OFFIC Date Received	CEUSEONLY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; 2218 Un Fulshed	uber Oaks Ca		FE; ZIP CODE		JUL 15 2024
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER 635-9644		ENSION		red or Date Postmarked
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST		Ë	Receipt #  Date Processed	Amount \$
	NICKNAME	JONES		SUFFIX	Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (A 18310 1 Richn	rgyle Park	UITE#, CONTRACT	CITY;	STATE;	ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE (7(3.)	PHONE NUMBER 899-341	EXTE	ENSION		
9 REPORT TYPE	January 15  July 15	30th day before e		Runoff  Exceeded Modified Reporting Limit	treasure (Officeho	v after campaign r appointment older Only) port (Attach C/OH - FR)
10 PERIOD COVERED	Month /	Day Year / 0-1 / 202-4	THROUGH	Month 07	Day Y	<sup>6</sup> ear 2024
11 ELECTION	ELECTION DAT	Year Primary General	Runoff Special	Other Description		
12 OFFICE	Judge, For	Bend Consty Con At Law # 2	13 OFF	ICE SOUGHT (if know	n)	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFICE	OF POLITICAL CONTRIBUTIONS HOLDER. THESE EXPENDITURE: AND OFFICEHOLDERS ARE REQUI	S MAY HAVE BEEN MA	ADE WITHOUT THE CAN	DIDATE'S OR OFFICER	HOLDER'S KNOWLEDGE OR
Additional Pages	GENERAL SPECIFIC	COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TRE				
		COMMITTEE CAMPAIGN TR	EASUKEK ADDRES	3		

#### JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH CAMPAIGN FINANCE REPORT **COVER SHEET PG 2** 15 JC/OH NAME 16 Filer ID (Ethics Commission Filers) TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN 17 CONTRIBUTION \$ **TOTALS** PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) **EXPENDITURE** TOTAL UNITEMIZED POLITICAL EXPENDITURE. **TOTALS** TOTAL POLITICAL EXPENDITURES 526.57 CONTRIBUTION TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY BALANCE OF REPORTING PERIOD OUTSTANDING TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS LAST DAY OF THE REPORTING PERIOD I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information 18 SIGNATURE required to be reported by me under Title 15, Election Code. re of Candidate/Officeholder Please complete either option below: AMARANTHA RICHARDS Notary Public, State of Texas (1) Affidavit Comm. Expires 03-13-2028 Notary ID 132337238 NOTARY STAMP/SEAL Sworn to and subscribed before me by \_\_\_\_\_ to certify which, witness my hand and seal of office. Title of officer administering oath Signature of officer administering oath Printed name of officer administering oath OR (2) Unsworn Declaration \_\_\_\_, and my date of birth is \_\_\_ My name is \_\_

My address is \_\_\_\_\_

(street)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_

(country)

(state)

Signature of Candidate/Officeholder (Declarant)

(month)

(city)

\_\_ day of \_

(zip code)

### SUBTOTALS - JC/OH

#### FORM JC/OH COVER SHEET PG 3

19	19 FILER NAME 20 Filer ID (Ethics Con		
	TYPA JONG MCCOLLUM		
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	
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	\$ 526,57	
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	\$	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politics		orials Expense Office O  Office O  Polling B  Printing	payment/Reimbursement verhead/Rental Expense Expense 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)	
Credit Card Payment	The Instruction	on Guide explains how to	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME TYPEA	JONES MA	Collum	3 Filer ID (Ethics Commission Filers)	
4 Date 1-2-24	5 Payee name	i. com			
\$ 24,89	7 Payee address;	Terry A. Fran	noois Blud	State; Zip Code	
Y 01101	San Francisco, California 94158				
8	(a) Category (See Categories li	sted at the top of this schedule)	(b) Description	. ,	
PURPOSE OF EXPENDITURE	Advertisin	ng Expense	Website	e maintenance	
	(c) Check if travel outside	e of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officehold	er name	Office sought	Office held	
Date	Payee name	, , , , , , , , , , , , , , , , , , , ,			
1-22-24	Wix-cor	n			
Amount (\$)	Payee address;	IN FRANCI	City;	State; Zip Code	
\$31.39	500 Terry A. François Blvd. San Francisco, Oslutoma 94158				
	Category (See Categories lis		Description		
PURPOSE OF	Adventising			maintenance	
EXPENDITURE	7 10101110	9 079	Vaccount		
	Check if travel outside	of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholde	er name	Office sought	Office held	
Date	Payee name				
1-31-24	Wix.com	L			
Amount (\$)	Payee address:  500 Terry	A. Francois B	Ild. City;	State; Zip Code	
\$ 24.89	500 Terry A. Francois Blvd. San Franciso, California 94158				
	Category (See Categories lis		Description		
PURPOSE OF EXPENDITURE	Advertising	Expense	website	maintenance	
	Check if travel outside	e of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officehold	er name	Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Polling  y Gift/Awards/Memonals Expense Printin  Legal Services Salarie	Repayment/Reimbursement Overhead/Rental Expense g Expense g Expense es/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:	2 FILER NAME A JONES MCCO	шт	3 Filer ID (Ethics Commission Filers)		
4 Date 1-31-24	5 Payee name Amegy Bank				
6 Amount (\$) \$\Phi 2.00	7 Payee address; 3400 Avenue H Rosenberz, TX 774	Oity;	State; Zip Code		
8	(a) Category (See Categories listed at the top of this schedule	(b) Description			
PURPOSE OF EXPENDITURE	Accountry / Banking	Stmt-	fee		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
2-12-24	Wix com		,		
Amount (\$)	Payee address;	City;	State; Zip Code		
\$31.39	508 Terry A. Francisco, Calif	ois Blvd Brua 9415	58		
	Category (See Categories listed at the top of this schedule)	Description	*		
PURPOSE OF EXPENDITURE	Advertising Expense	website	e maintenance		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
2-29-24	Amegy Bank				
Amount (\$)	Payee address; 3400 Avenue H Rosenbeg, DX 77471	City;	State; Zip Code		
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	According Banking	Stmt	fee		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NEE	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
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries ∧  The Instruction Guide explains how to c	Ages/Contract Labor Other (enter a category not listed above)  omplete this form.
1 Total pages Schedule F1:	2 FILER NAME TYRA JONES McCOL	3 Filer ID (Ethics Commission Filers)
4 Date 3-4-24	5 Payee name WIY, Com	
6 Amount (\$) 474.89	500 Terry A. Franco San Francisco Calif	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Advertising Expense	L'ébsité maintenance
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
3-22-24	Wix.com	
Amount (\$)	Payee address; SDD Terry A. Francois San Francisco, Culti	Blvd. State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Adventising Expense	Description Webste maintenance
	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 sought Office held
3-29-24	Payee name Amegy Bank	
Amount (\$)	Payee address; 3400 Avenuett Rosenbers, TX 77471	City; State; Zip Code
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Accounting / Banking	Stmt fe
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politics Credit Card Payment	Il Committee 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)		
		plants now to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME TYRA JONE	3 Ucloury	3 Filer ID (Ethics Commission Filers)		
4 Date + -1- 24	5 Payee name Wiv. com				
6 Amount (\$) \$24.89		- Annoois Bl Vd co, Californa			
8	(a) Category (See Categories listed at the top of	,			
PURPOSE OF EXPENDITURE	Advertising Sx	pense velos	té montenance		
	(c) Check if travel outside of Texas. Comp	elete Schedule T. Check if Aus	stin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
4-22-24	Wix. com		`		
Amount (\$)	Payee address;	City;	State; Zip Code		
\$31.39	500 terry A.	Francois Blvd.	158		
	Category (See Categories listed at the top of				
PURPOSE OF EXPENDITURE	Advertising.	Expuse webs	ite maintenance		
	Check if travel outside of Texas. Comp	elete Schedule T. Check if Aus	stin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name	The state of the s	01 0 0		
4-30-24	Amezy Bank Payee address; 3400 Avenuel	4			
Amount (\$)	Payee address; 3400 Avenuel	City;	State; Zip Code		
	Rosenber TX	7747/			
	Category (See Categories listed at the top of	this schedule) Description			
PURPOSE OF EXPENDITURE	Accounting / Ba	nkeny Stmt	fee		
	Check if travel outside of Texas. Comp	lete Schedule T. Check if Aus	stin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B: Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing E	erhead/Rental Expense Transportation xpense Travel In Distri xxpense Travel Out Of I Wages/Contract Labor Other (enter a			
4			Putter Occasion to Files		
1 Total pages Schedule F1:	TYPA JONES MC		Ethics Commission Filers)		
4 Date 4-30-24	5 Payee pame Wix. com				
6 Amount (\$) \$24.89	500 Terry A. Francos San Francisco, Ca	s Blvd. Whoma 94158	zip Code		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Asvertising Supense	Website mau	terance		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder	r living expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
5-6-24	NAACP - MISSOUR	i aty	`		
Amount (\$)	Payee address;	City; State			
4144 P.O. Box 1053, Missoni Coty, TK 77459					
	Category (See Categories listed at the top of this schedule)	Description	_		
PURPOSE OF EXPENDITURE	Contribution Donation	Youth Commi	ttee		
	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
5-28-24	Wix. com				
Amount (\$)	Payee address;	City; State	e; Zip Code		
\$31.39 500 Terry A. François Blvd. Sanfranciso, California 94158					
Sanfranciso, Calltorna 94158					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Advertising Syprise	Website ma	ainterance		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder	r living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED			

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/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Office Overhead/Rental Expense Consulting Expense Food/Beverage Expense Polling Expense Travel In District Contributions/Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) 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 YRA JONES M.Cloum 5 Payee name 7 Payee address; 500 Terry A. Fancois Blvd 6 Amount (\$) State; Zip Code 8 24.89 San Franciso, California 94158 (See Categories listed at the top of this schedule) (b) Description 8 Website naintenance PURPOSE Arwerti sing 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 Amegy Bank Payee address; Avenue H 5-31-24 Amount (\$) City; Zip Code Description Stret Pee PURPOSE Accounting Banking 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 Payee name Wix com 10-24-24 Payee address: Terry A. Francois Blud. Amount (\$) Zip Code 431.39 San Francisco, California 94158 Category (See Categories listed at the top of this schedule) Advortising Expense PURPOSE Website maintenance **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/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Travel In District Polling Expense Contributions/Donations Made By Gift/Awards/Memorials Expense Travel Out Of District Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 2 FILER NAME 1 Total pages, Schedule F1: 3 Filer ID (Ethics Commission Filers) 5 MCCosium 4 Date 5 Payee name 6 Amount (\$) 7 Payee address City; State: Zip Code 8 (b) Description PURPOSE Stret fe **EXPENDITURE** (c) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH 6-28-24 Amount (\$) City; State; Zip Code Description PURPOSE Account maintener OF **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 Date Payee name Wix.com 7-1-24 Amount (\$) Payee address; City; State: Zip Code 500 Terry A. Francois Blud San Francisco, California 94158 Advartising Expense **PURPOSE** Wessite maintenance 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