

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 (Ethics Commission Filers)

2 Total pages filed: **27**

3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR MRS FIRST TYRA MI J NICKNAME LAST McCOLLUM SUFFIX	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1251 PIN OAK RD, SUITE 131 P.O. BOX 126, KATY, TEXAS 77494	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (281) 635-9644 -	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR MR FIRST KAI MI E NICKNAME LAST JONES SUFFIX	
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 18310 ARGYLE PARK TRACE RICHMOND TX 77407 (Residence or Business)	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 899-3411 -	
9 REPORT TYPE	<input checked="" 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 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 07 / 01 / 25 12 / 31 / 25	
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description 03 / 03 / 26 <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known)
JUDGE, COUNTY COURT AT LAW #2 JUDGE, COUNTY COURT AT LAW #2		
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.	
<input type="checkbox"/> Additional Pages	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS

GO TO PAGE 2

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

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.		1 Total pages Schedule A(J)1: 10 of 15
2 FILER NAME TYRA JONES McCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 12-5-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jeff Krumpholz	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 1625 W.157th St Houston TX 77008		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self		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 9-15-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Alicia Hopkins	Amount of contribution (\$) \$300.00
Contributor address; City; State; Zip Code 4906 Avalon Plantation Dr. Mo. City TX 77459		
Contributor's principal occupation Physician / Healthcare		Contributor's job title Doctor
Contributor's employer/law firm Clinic		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 9-24-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Farha Ahmed	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 6 Ellicot Way Sugar Land TX 77479		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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
(JUDICIAL)**

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 2 of 15
2 FILER NAME TYRA JONES MCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-2-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Allan Cease	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code 56 Sugar Creek Ctr., Suite 300 Sugarland TX 77478		
8 Contributor's principal occupation Retired (Attorney)		9 Contributor's job title Retired
10 Contributor's employer/law firm N/A		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 10-8-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Adrienne Norman	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code 28227 Crossprairie Dr., Katy, TX 77494		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 10-8-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Sherman Hutton	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code 25834 Palmchle Estate Dr. Richmond TX 77406		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 3 of 15
2 FILER NAME TYRA JONES McCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-8-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Michael Hanson	7 Amount of contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 14826 Alderwick Dr. Sugar Land TX 77498		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self		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 10-8-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Daniel Lee	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 23430 Fairbanch Dr. Katy TX 77494		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 10-8-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Radhika Dave	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 8408 Morning Melody Dr. Houston TX 77063		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 4 of 15
2 FILER NAME TYRA JONES McCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-8-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Anthony Washington	7 Amount of contribution (\$) \$ 1,000.⁰⁰
6 Contributor address; City; State; Zip Code 2601 Cartwright Rd, Suite D#166 Mo City TX 77459		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self		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 10-8-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Manik Wadhawan	Amount of contribution (\$) \$ 500.⁰⁰
Contributor address; City; State; Zip Code 4310 Oak Forest Dr. Mo. City TX 77459		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 5 of 15
2 FILER NAME TYRA JONES McCLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-9-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ John F. Healey	7 Amount of contribution (\$) \$ 200.00
6 Contributor address; City; State; Zip Code 7810 Shamrock Lane Richmond TX 77406		
8 Contributor's principal occupation Retired		9 Contributor's job title N/A
10 Contributor's employer/law firm N/A		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 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Paul Tu	Amount of contribution (\$) \$ 1,000.00
Contributor address; City; State; Zip Code 5414 Mornington Sugarland TX 77498		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Arrington, Tu, Burnett LLP		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 9-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Frank Yeverno	Amount of contribution (\$) \$ 2,500.00
Contributor address; City; State; Zip Code 1119 Oak Creek Dr. Richmond TX 77469		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Fry Law Firm, P.C.		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 6 of 15
2 FILER NAME TYRA JONES McCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-9-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jeffrey T. Strange	7 Amount of contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 126 Conchida Lane Richmond TX 77469		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self		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 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Suzie Johnson	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1800 Rivercrest Dr.#916 Sugarland TX 77478		
Contributor's principal occupation Retired		Contributor's job title N/A
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Sheila Burnett	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 1702 Creekside Dr. Sugarland TX 77478		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Arrington Tu Burnett LLP		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 7 of 15
2 FILER NAME TYRA JONES MCCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-9-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Taylor Armstrong	7 Amount of contribution (\$) \$1,000.⁰⁰
6 Contributor address; City; State; Zip Code 3410 Norris Dr. Houston TX 77025		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self		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 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Nireasha Murray	Amount of contribution (\$) \$500.⁰⁰
Contributor address; City; State; Zip Code 8318 Bee Meadow Lane Mo. City TX 77489		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Cassandra Anderson	Amount of contribution (\$) \$100.⁰⁰
Contributor address; City; State; Zip Code 17407 Fairgrove Park Dr. Houston TX 77095		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Medical Board		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8 of 15
2 FILER NAME TYRA JONES McCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-9-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Wilvin Carter	7 Amount of contribution (\$) \$ 500.⁰⁰
6 Contributor address; City; State; Zip Code 15 Cinque Terre Drive Mo. City TX 77459		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm The Law Offices of Wilvin Carter P.C		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 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Byron O'Neal	Amount of contribution (\$) \$ 100.⁰⁰
Contributor address; City; State; Zip Code 4 Chelsea Blvd, Apt. 1119 Houston, TX 77006		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Fort Bend County		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Roderick Garner	Amount of contribution (\$) \$ 50.⁰⁰
Contributor address; City; State; Zip Code 303 Texas Parkway Mo. City TX 77489		
Contributor's principal occupation Justice of the Peace		Contributor's job title Justice of the Peace
Contributor's employer/law firm Fort Bend County		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 9 of 15
2 FILER NAME TYRA JONES McCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-9-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Nicole Ledet	7 Amount of contribution (\$) \$100.⁰⁰
6 Contributor address; City; State; Zip Code 301 Jackson St. Richmond TX 77469		
8 Contributor's principal occupation Human Resources		9 Contributor's job title Director
10 Contributor's employer/law firm Fort Bend County		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 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Kathy Cheng	Amount of contribution (\$) \$500.⁰⁰
Contributor address; City; State; Zip Code 4736 Oakshire Dr. Houston TX 77027		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Regina Gardner	Amount of contribution (\$) \$50.⁰⁰
Contributor address; City; State; Zip Code 6703 Briargate Dr. Mo. City TX 77489		
Contributor's principal occupation Business Owner		Contributor's job title Owner
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 10 of 15
2 FILER NAME TYRA JONES McCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-9-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ William Bobrick	7 Amount of contribution (\$) \$ 25.00
6 Contributor address; City; State; Zip Code P.O. Box 637 Sugarland TX 77498		
8 Contributor's principal occupation Administrative		9 Contributor's job title Supervisor
10 Contributor's employer/law firm Fort Bend County		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 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Qaiser Q Imam	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 19 Saint Christopher Ct. Sugarland TX 77479		
Contributor's principal occupation Business		Contributor's job title Project Manager
Contributor's employer/law firm IBM Global Business Services		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Nannette Ray	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code 11415 Lago Verde Dr. Richmond TX 77406		
Contributor's principal occupation Management Consultant		Contributor's job title President
Contributor's employer/law firm TNR Advisors & Management Consultants, LLC		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 11 of 15
2 FILER NAME TYRA JONES MCCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-9-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Mable Scott Austin	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 2119 Windy Meadow Sugar Land TX 77478		
8 Contributor's principal occupation Business owner / Retired		9 Contributor's job title Owner
10 Contributor's employer/law firm N/A		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 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Frank Fraley	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 11611 W. Airport Blvd Suite H Meadows Place TX 77477		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 10-9-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Shah Haleem	Amount of contribution (\$) \$ 75.00
Contributor address; City; State; Zip Code 5815 Si'ikbay Meadow Katy TX 77494		
Contributor's principal occupation Business Owner		Contributor's job title Owner
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 12 of 15
2 FILER NAME TYRA JONES McCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-9-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Patrick Quiney	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 1517 Eugene Heimann Circle Richmond TX 77469		
8 Contributor's principal occupation Peace Officer		9 Contributor's job title Constable
10 Contributor's employer/law firm Fort Bend County		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 10-11-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Tonika Davis	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 4712 Las Castitas Way Bryan TX 77807		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Brazos County		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 10-12-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Ernest Barroncos	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 1714 Mercoal Dr. Spring TX 77386		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 13 of 15
2 FILER NAME TYRA JONES McCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-16-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Grace Nwanguma	7 Amount of contribution (\$) \$300.00
6 Contributor address; City; State; Zip Code 6214 Santiago Mountain Ct Katy TX 77450		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Self		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 11-1-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Eric Ashford	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 10101 SW Fwy 403 Houston TX 77074		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 11-11-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Monty Meave	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 1301 Lee St. Houston TX 77009		
Contributor's principal occupation Business		Contributor's job title C.O.O.
Contributor's employer/law firm All-Pro Auto Reconditioning		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 14 of 15
2 FILER NAME TYRA JONES MCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 10-8-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Alicia Klosowsky	7 Amount of contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 14055 S.W. Fruey, Suite 14 Sugarland TX 77478		
8 Contributor's principal occupation Attorney		9 Contributor's job title Attorney
10 Contributor's employer/law firm Klosowsky Law Office, PLLC		11 Law firm of contributor's spouse (if any) Klosowsky Law Office, PLLC
12 If contributor is a child, law firm of parent(s) (if any) N/A		
Date 11-3-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Joyce M. Phoenix	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 8910 Royal Crest Lane Richmond TX 77469		
Contributor's principal occupation Retired (Attorney)		Contributor's job title N/A
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 11-13-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Lewis White	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 117 Legion Dr. Richmond TX 77469		
Contributor's principal occupation Associate Judge		Contributor's job title Associate Judge
Contributor's employer/law firm Port Bend County		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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
(JUDICIAL)**

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.		1 Total pages Schedule A(J)1: 15 of 15
2 FILER NAME TYRA JONES MCCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 12-8-25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Byron Fletcher	7 Amount of contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code 16010 Gray Trail Ct. Tomball TX 77377		
8 Contributor's principal occupation Cyber Security		9 Contributor's job title Consultant
10 Contributor's employer/law firm Deloitte		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 11-5-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Ziad A Zeini	Amount of contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 5175 Huckberry Dr. Houston TX 77056		
Contributor's principal occupation		Contributor's job title
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

Date 12-31-25	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Arthur DeGray	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 13818 Blue Vista Dr. Sugarland TX 77498		
Contributor's principal occupation Retired		Contributor's job title Retired
Contributor's employer/law firm N/A		Law firm of contributor's spouse (if any) N/A
If contributor is a child, law firm of parent(s) (if any) N/A		

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related 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.

1 Total pages Schedule F1: <i>1 of 9</i>	2 FILER NAME <i>TYRA JONES MCCOLLUM</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>7-22-25</i>	5 Payee name <i>Wix.com</i>	
6 Amount (\$) <i>\$31.39</i>	7 Payee address; City; State; Zip Code <i>500 Terry A Francois, San Francisco CA 94158</i> <i>Suite 600</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <i>Website</i>
	(c) <input type="checkbox"/> Check if individual's residence address. <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>7/29/26</i>	Payee name <i>Wix.com</i>	
Amount (\$) <i>\$25.98</i>	Payee address; City; State; Zip Code <i>500 Terry A Francois, San Francisco CA 94158</i> <i>Suite 600</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Website</i>
	<input type="checkbox"/> Check if individual's residence address. <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

Date <i>7-31-25</i>	Payee name <i>Amegy Bank</i>	
Amount (\$) <i>\$10.00</i>	Payee address; City; State; Zip Code <i>3400 Avenue H Rosenberg TX 77471</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Banking/Accounting</i>	Description <i>Fees</i>
	<input type="checkbox"/> Check if individual's residence address. <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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 | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 9	2 FILER NAME TYRA JONES McCOLLUM	3 Filer ID (Ethics Commission Filers)
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4 Date 8-22-25	5 Payee name Wix.com
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6 Amount (\$) \$31.39	7 Payee address; City; State; Zip Code 500 Terry A Francois, San Francisco CA 94158 <input type="checkbox"/> Check if individual's residence address. Suite 600
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Website
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8-29-25	Payee name Amegy Bank
------------------------	---------------------------------

Amount (\$) \$10.00	Payee address; City; State; Zip Code 3400 Avenue H Rosenberg TX 77471 <input type="checkbox"/> Check if individual's residence address.
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date 8-29-25	Payee name Wix.com
------------------------	------------------------------

Amount (\$) \$25.98	Payee address; City; State; Zip Code 500 Terry A Francois, San Francisco CA 94158 <input type="checkbox"/> Check if individual's residence address. Suite 600
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Website
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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 | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>3 of 9</i>	2 FILER NAME <i>TYRA JONES McCOLLUM</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>9-29-25</i>	5 Payee name <i>Wix.com</i>	
6 Amount (\$) <i>\$ 25.98</i>	7 Payee address; City; State; Zip Code <i>500 Terry A Francois, San Francisco CA 94158</i> <input type="checkbox"/> Check if individual's residence address. <i>Suite 600</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <i>Website</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>9-29-25</i>	Payee name <i>Wix.com</i>	
Amount (\$) <i>\$31.39</i>	Payee address; City; State; Zip Code <i>500 Terry A Francois, San Francisco TX 94158</i> <input type="checkbox"/> Check if individual's residence address. <i>Suite 600</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Website</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

Date <i>9-30-25</i>	Payee name <i>Amegy Bank</i>	
Amount (\$) <i>\$10.00</i>	Payee address; City; State; Zip Code <i>3400 Avenue H Rosenberg TX 77471</i> <input type="checkbox"/> Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Accounting/Banking</i>	Description <i>Fees</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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 | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related 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.

1 Total pages Schedule F1: <i>4 of 9</i>	2 FILER NAME <i>TYRA JONES McCOLLUM</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>10-22-25</i>	5 Payee name <i>Wix.com</i>	
6 Amount (\$) <i>\$31.39</i>	7 Payee address; City; State; Zip Code <i>500 Terry A Francois, San Francisco CA 94158</i> <input type="checkbox"/> Check if individual's residence address. <i>Suite 600</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <i>Website</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>10-28-25</i>	Payee name <i>Black Hawk Country Club</i>	
Amount (\$) <i>\$2,500.37</i>	Payee address; City; State; Zip Code <i>12610 FM 1464 Richmond TX 77407</i> <input type="checkbox"/> Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Solicitation/Fundraising Expense</i>	Description <i>Campaign Kickoff</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
Date <i>10-29-25</i>	Payee name <i>Wix.com</i>	
Amount (\$) <i>\$25.98</i>	Payee address; City; State; Zip Code <i>500 Terry A Francois, San Francisco CA 94158</i> <input type="checkbox"/> Check if individual's residence address. <i>Suite 600</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Website</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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 | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related 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.

1 Total pages Schedule F1: 5 of 9	2 FILER NAME TYRA JONES McCOLLUM	3 Filer ID (Ethics Commission Filers)
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4 Date 10-31-25	5 Payee name Amegy Bank
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6 Amount (\$) \$2.00	7 Payee address; 3400 Arvenett	City; Rosenberg	State; TX	Zip Code 77471
<input type="checkbox"/> Check if individual's residence address.				

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting / Banking	(b) Description Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11-12-25	Payee name Katy Democrats
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Amount (\$) \$200.00	Payee address; PO Box 6952, Katy, TX 77491	City;	State;	Zip Code
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Donation / Contribution	Description Democracy Katy Palooza Sponsor
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date 11-13-25	Payee name Fort Bend Democratic Party
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Amount (\$) \$500.00	Payee address; 1315 Southwest Freeway, Suite 204	City; Sugar Land	State; TX	Zip Code 77478
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution / Donation	Description "We The People" Gala (1/2 Table)
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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 | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related 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.

1 Total pages Schedule F1: <i>6 of 9</i>	2 FILER NAME <i>TYRA JONES McCOLLUM</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>11-18-25</i>	5 Payee name <i>American Caribbean Chamber of Commerce</i>
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6 Amount (\$) <i>\$300.00</i>	7 Payee address; <i>6201 Bonhomme Rd., Ste. 210N Houston TX 77036</i>	City;	State;	Zip Code
<input type="checkbox"/> Check if individual's residence address.				

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Contributions/Donations</i>	(b) Description <i>6th Annual Thanksgiving Turkey & Food Distribution</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>11-24-25</i>	Payee name <i>Wix.com</i>
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Amount (\$) <i>\$31.39</i>	Payee address; <i>500 Terry A Francois, Suite 600 San Francisco CA 94158</i>	City;	State;	Zip Code
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	Description <i>Website</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date <i>11-28-25</i>	Payee name <i>Amegy Bank</i>
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Amount (\$) <i>\$2.00</i>	Payee address; <i>3400 Avenue H Rosenberg TX 77471</i>	City;	State;	Zip Code
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Accounting/Banking</i>	Description <i>Fees</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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 | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related 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.

1 Total pages Schedule F1: <i>7 of 9</i>	2 FILER NAME <i>TYRA JONES McLOLLUM</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>12-1-25</i>	5 Payee name <i>Wix.com</i>
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6 Amount (\$) <i>\$25.98</i>	7 Payee address; City; State; Zip Code <i>500 Terry A Francois, San Francisco CA 94158</i> <i>Suite 600</i>
	<input type="checkbox"/> Check if individual's residence address.

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <i>Website</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>12-2-25</i>	Payee name <i>Amegy Bank</i>
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Amount (\$) <i>\$16.00</i>	Payee address; City; State; Zip Code <i>3400 Avenue H, Rosenberg TX 77471</i>
	<input type="checkbox"/> Check if individual's residence address.

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Accounting/Banking</i>	Description <i>Fees</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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Date <i>12-2-25</i>	Payee name <i>Secretary of State (Texas)</i>
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Amount (\$) <i>\$1,500.00</i>	Payee address; City; State; Zip Code <i>P.O. Box 12887/1019 Brazos Austin TX 78701</i>
	<input type="checkbox"/> Check if individual's residence address.

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>Filing fee (judicial)</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> 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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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 | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related 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.

1 Total pages Schedule F1: 8 of 9	2 FILER NAME TYRA JONES McLOUM	3 Filer ID (Ethics Commission Filers)
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4 Date 12-2-25	5 Payee name Fort Bend County Democratic Party
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6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 13515 Southwest Freeway, Suite 204 Sugarland TX 77478
<input type="checkbox"/> Check if individual's residence address.	

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Literature
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-22-25	Payee name Wix.com
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Amount (\$) \$31.39	Payee address; City; State; Zip Code 500 Terry A Francois, San Francisco CA 94158 Suite 600
<input type="checkbox"/> Check if individual's residence address.	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description website
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date 12-29-25	Payee name Wix.com
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Amount (\$) \$ 25.98	Payee address; City; State; Zip Code 500 Terry A Francois, San Francisco CA 94158 Suite 600
<input type="checkbox"/> Check if individual's residence address.	

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Website
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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 | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>9 pgs</i>	2 FILER NAME <i>TYRA JONES McLOLLUM</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>12-30-25</i>	5 Payee name <i>Walgreen's</i>
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6 Amount (\$) <i>\$72.28</i>	7 Payee address; <i>25620 Kingsland Blvd.</i>	City; <i>Katy</i>	State; <i>TX</i>	Zip Code <i>77494</i>
<input type="checkbox"/> Check if individual's residence address.				

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description <i>Holiday Cards</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>12-31-25</i>	Payee name <i>Amegy Bank</i>
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Amount (\$) <i>\$2.00</i>	Payee address; <i>3400 Avenue H</i>	City; <i>Rosenberg</i>	State; <i>TX</i>	Zip Code <i>77471</i>
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Accounting/ Banking</i>	Description <i>Fees</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
<input type="checkbox"/> Check if individual's residence address.				

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED