

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:

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

OFFICE USE ONLY

Date Received

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

☐ Change of Address

RECVD VIA EMAIL
07/15/2026

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

Date Hand-delivered or Date Postmarked

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

Receipt #

Amount \$

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign
treasurer appointment
(Officeholder Only)

☒ July 15

☐ 8th day before election

☐ Exceeded Modified
Reporting Limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

Month

Day

Year

01 / 01 / 2026

THROUGH

06 / 30 / 2026

11 ELECTION

ELECTION DATE

Month

Day

Year

11 / 3 / 2026

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

PORT BEND

JUDGE, COUNTY COURT AT LAW #2

13 OFFICE SOUGHT (if known)

PORT BEND

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.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

15 JC/OH NAME

TYRA JONES MCCOLLUM

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

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 1,200.00

EXPENDITURE
TOTALS

3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 4,252.25

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD

\$ 9,628.95

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 0

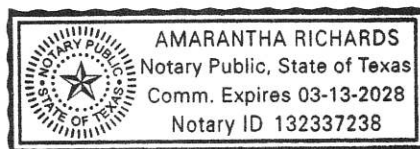
18 SIGNATURE

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.

[Signature]
Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP/SEAL

Sworn to and subscribed before me by Tyra Jones McCollum this the 15th day of July,
2020, to certify which, witness my hand and seal of office.

Amarantha Richards
Signature of officer administering oath

Amarantha Richards
Printed name of officer administering oath

Notary Public
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 - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME

TYRA JONES MCOLLUM

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	☒	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,200. ⁰⁰
2.	☐	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	☐	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	☐	SCHEDULE E: LOANS	\$ 0
5.	☒	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 4,252.25
6.	☐	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	☐	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	☐	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	☒	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 175. ⁰⁰
10.	☐	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	☐	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	☐	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

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: 1
2 FILER NAME TYRA JONES MCCOLLUM		3 Filer ID (Ethics Commission Filers)
4 Date 2-3-26	5 Full name of contributor ☐ out-of-state PAC ID#: Taylor Armstrong	7 Amount of contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 3410 Nomi's 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 3-27-26	Full name of contributor ☐ out-of-state PAC ID#: Ethenia King	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code 1882 Princeton Ave, Suite 8, Atlanta, Georgia 30337		
Contributor's principal occupation Attorney		Contributor's job title Attorney, Managing Partner
Contributor's employer/law firm Justice & Liberty Attorney, LLC		Law firm of contributor's spouse (if any) Unknown
If contributor is a child, law firm of parent(s) (if any) N/A		
Date 5-1-26	Full name of contributor ☐ out-of-state PAC ID#: Valerie Sutton	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 6815 Manhattan Blvd, Suite 204, Fort Worth, TX 76126		
Contributor's principal occupation Attorney		Contributor's job title Attorney
Contributor's employer/law firm Boston Burnett, 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

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
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: 4/12		2 FILER NAME TYRA JONES MCCOLLUM		3 Filer ID (Ethics Commission Filers)	
4 Date 1-12-26		5 Payee name TGM PRINTING			
6 Amount (\$) \$449.00		7 Payee address; 13910 Murphy Rd		City; Stafford TX	State; TX
				Zip Code 77477	
8		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Signs / literature	
PURPOSE OF EXPENDITURE		(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ 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 1-9-26		Payee name TGM Printing			
Amount (\$) \$617.85		Payee address; 13910 Murphy Rd .		City; Stafford TX	State; TX
				Zip Code 77477	
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description push cards / literature	
		☐ 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	
Date 1-12-26		Payee name Greater St. Matthew Baptist Church			
Amount (\$) \$50.00		Payee address; 14919 S. Main St.		City; Houston TX	State; TX
				Zip Code 77035	
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Contribution / Donation		Description Donation / Advertising	
		☐ 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

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
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: 2/12		2 FILER NAME TYRA JONES McLOLLUM		3 Filer ID (Ethics Commission Filers)	
4 Date 1-22-26		5 Payee name Wix.com			
6 Amount (\$) \$31.39		7 Payee address: 500 Terry A Francois, Suite 600		City: San Francisco	State: CA
		☐ Check if individual's residence address.		Zip Code 94158	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Website		
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 1-26-26		Candidate / Officeholder name Dibrell and Associates			
Amount (\$) \$125.00		Payee address: 4203 Glade Shadow Ct.		City: Katy	State: TX
		☒ Check if individual's residence address.		Zip Code 77494-4170	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense / Advertising		Description Printing Design fee		
	☐ 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					
Date 1-29-26		Candidate / Officeholder name Wix.com			
Amount (\$) \$25.98		Payee address: 500 Terry A Francois, Suite 600		City: San Francisco	State: CA
		☐ Check if individual's residence address.		Zip Code 94158	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description Website		
	☐ 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					
Date		Candidate / Officeholder name			
		Office sought		Office held	

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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
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: 3/12	2 FILER NAME TYRA JONES McCOLLUM	3 Filer ID (Ethics Commission Filers)
4 Date 1-30-26	5 Payee name Mary Kelly / Myster's Barber Academy	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 2420 Cartwright Rd Missouri City TX 77489 ☐ Check if individual's residence address.	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Donation / Contribution	(b) Description Heart of Hope Day Event / Advertising
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 1-30-26	Payee name Amegy Bank	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 3400 Avenue H Rosenberg TX 77471 ☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting / Banking	Description Fees
	☐ 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		
Date 2-3-26	Payee name Lowe's	
Amount (\$) \$103.53	Payee address; City; State; Zip Code 9505 Spring Green Blvd Katy TX 77494 ☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense / Other	Description TPOSTS / signage
	☐ 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		
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
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: 4/12	2 FILER NAME TYRA JONES McCOLLUM	3 Filer ID (Ethics Commission Filers)
4 Date 2-5-26	5 Payee name Towana Bryant / Fort Bend East Advocates	
6 Amount (\$) \$100⁰⁰	7 Payee address: 4219 Shadow Haven Dr., Fresno	City; State; Zip Code TX 77545
☒ Check if individual's residence address.		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense / Donation / Contribution	(b) Description event sponsorship
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 2-9-26	Payee name Lowe's	
Amount (\$) \$179.90	Payee address: 9505 Spring Green Blvd	City; State; Zip Code Katy TX 77494
☐ Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense / Other	Description T-posts / signage
	☐ 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		
Date 2-10-26	Payee name Missouri City Chambers Public Affairs Committee	
Amount (\$) \$28.52	Payee address: P.O. BOX 2272	City; State; Zip Code Missouri City TX 77459
☐ Check if individual's residence address.		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Booth / Candidate's Forum
	☐ 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		

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
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: 5/12		2 FILER NAME TYRA JONES MCCOLLUM		3 Filer ID (Ethics Commission Filers)	
4 Date 2-12-26		5 Payee name T&M Printing			
6 Amount (\$) \$649.50		7 Payee address: 13910 Murphy Rd		City: Stafford	State: TX
				Zip Code 77477	
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description pa yard/road signs	
		(c) ☐ Check if individual's residence address.		☐ 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 2-23-26		Payee name HEB			
Amount (\$) \$55.20		Payee address: 8900 Hwy 6, Missouri City Texas		City: Texas	State: 77459
				Zip Code	
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Donation/Contribution		Description Online/Advertising	
		☐ 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	
Date 2-23-26		Payee name Wix.com			
Amount (\$) \$31.39		Payee address: 500 Terry A. Francois, Suite 600 San Francisco		City: San Francisco	State: CA
				Zip Code 94158	
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description Website	
		☐ 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

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
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: 6/12	2 FILER NAME TYRA JONES McCOLLUM	3 Filer ID (Ethics Commission Filers)
4 Date 3-2-26	5 Payee name Wix.com	
6 Amount (\$) \$25.98	7 Payee address; City; State; Zip Code 500 Terry A. Francois, Suite 600 San Francisco CA 94158 ☐ Check if individual's residence address.	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description website
	(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/OH Candidate / Officeholder name Office sought Office held		
Date 3-23-26	Payee name Wix.com	
Amount (\$) \$31.39	Payee address; City; State; Zip Code 500 Terry A Francois, Suite 600 San Francisco CA 94158 ☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense Printing	Description website
	☐ 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		
Date 3-30-26	Payee name Wix.com	
Amount (\$) \$25.98	Payee address; City; State; Zip Code 500 Terry A Francois, Suite 600 San Francisco CA 94158 ☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description website
	☐ 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		

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
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: 7/12	2 FILER NAME TYRA JONES McCOLLUM	3 Filer ID (Ethics Commission Filers)
4 Date 2-24-26	5 Payee name Texas Coalition of Black Democrats	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 3 Mission City, Texas tkblackdems.org ☐ Check if individual's residence address. HQ 1034 Smitner St., Houston TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event / Donation / Advertising	(b) Description Gala Tickets / Advertising
	(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/OH	Candidate / Officeholder name	Office sought Office held
Date 2-25-26	Payee name Dibrell and Associates	
Amount (\$) \$110.00	Payee address; City; State; Zip Code 4203 Glade Shadow Ct. Katy TX 77494-4170 ☒ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description stickers / printing
	☐ 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
Date 2-27-26	Payee name Amegy Bank	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 3400 Avenue H Rosenberg TX 77471 ☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting / Banking	Description Fees
	☐ 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

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
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: 8/12		2 FILER NAME TYRA JONES McCOLLUM		3 Filer ID (Ethics Commission Filers)	
4 Date 3-31-26		5 Payee name Amegy Bank			
6 Amount (\$) \$2⁰⁰		7 Payee address; 3400 Avenue H		City; Rosenberg	State; TX Zip Code 77471
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting / Banking		(b) Description Fees	
		(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ 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 4-22-26		Payee name Wix.com			
Amount (\$) \$31.39		Payee address; 500 Terry A Francois, Suite 600		City; San Francisco	State; CA Zip Code 94158
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description website	
		☐ 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
Date 4-29-26		Payee name Wix.com			
Amount (\$) \$25.98		Payee address; 500 Terry A Francois, Suite 600		City; San Francisco	State; CA Zip Code 94158
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description website	
		☐ 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

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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: 9/12	2 FILER NAME TYRA JONES McCOLLUM	3 Filer ID (Ethics Commission Filers)
4 Date 4-30-26	5 Payee name TGM Printing	
6 Amount (\$) \$703.63	7 Payee address: 13910 Murphy Rd City: Stafford State: TX Zip Code: 77477 ☐ 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 Yard/Road Signs
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 4-30-26	Payee name Amegy Bank	
Amount (\$) \$2.00	Payee address: 3400 Avenue H City: Rosenberg State: TX Zip Code: 77471 ☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Fees
	☐ 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 _____		
Date 5-1-26	Payee name See You at the Polls	
Amount (\$) \$375.00	Payee address: 3311 Raleigh Pkwy City: Missouri City State: TX Zip Code: 77459 ☒ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution/Donation Advertising	Description Hosted events
	☐ 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 _____		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 10/12	2 FILER NAME TYRA JONES MCDOWM	3 Filer ID (Ethics Commission Filers)
4 Date 5-22-26	5 Payee name Wix.com	
6 Amount (\$) \$31.39	7 Payee address; 500 Terry A Francoi's, Suite 600 San Francisco ☐ Check if individual's residence address.	City; San Francisco State; CA Zip Code 94158
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description website
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 5-29-26	Payee name Wix.com		
Amount (\$) \$25.98	Payee address; 500 Terry A Francoi's, Suite 600 San Francisco ☐ Check if individual's residence address.	City; San Francisco State; CA Zip Code 94158	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description website	
	☐ 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			

Date 5-29-26	Payee name Amegy Bank		
Amount (\$) \$2.00	Payee address; 3400 Avennett ☐ Check if individual's residence address.	City; Rosenberg State; TX Zip Code 77471	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting / Banking	Description Fees	
	☐ 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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 11/12	2 FILER NAME TYRA JONES McCOLLUM	3 Filer ID (Ethics Commission Filers)
4 Date 6-22-26	5 Payee name Wix.com	
6 Amount (\$) \$31.39	7 Payee address; City; State; Zip Code 500 Terry A Francois, Suite 600 San Francisco CA 94158 ☐ Check if individual's residence address.	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description website
	(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ 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 6-29-26	Payee name Wix.com	
Amount (\$) \$25.98	Payee address; City; State; Zip Code 500 Terry A Francois, Suite 600 San Francisco CA 94158 ☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description website
	☐ 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		
Date 6-30-26	Payee name Amegy Bank	
Amount (\$) \$2.00	Payee address; City; State; Zip Code 3400 Avenue H Rosenberg TX 77471 ☐ Check if individual's residence address.	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting / Banking	Description Fees
	☐ 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		
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 12/12		2 FILER NAME TYRA JONES MCCOLLUM		3 Filer ID (Ethics Commission Filers)			
4 Date 6-30-26		5 Payee name Amedot, Inc.					
6 Amount (\$) \$48.90		7 Payee address; City; State; Zip Code 1340 Poydras St, Suite 1770 New Orleans LA 70112 ☐ Check if individual's residence address.					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising Expense		(b) Description Platform				
	(c) ☐ Check if travel outside of Texas. Complete Schedule T.		☐ 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		Payee name					
Amount (\$)		Payee address; City; State; Zip Code					
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Description					
		☐ 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	
Date		Payee name					
Amount (\$)		Payee address; City; State; Zip Code					
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Description					
		☐ 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	

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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
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: 1	2 FILER NAME TYRA JONES MCOLLUM		3 Filer ID (Ethics Commission Filers)	
4 Date 6-19-26	5 Payee name PATRICK QUINCY PA PARTY IN THE PARK EVENT			
6 Amount (\$) \$75.00 ☐ Reimbursement from political contributions intended	7 Payee address; 4310 TX - 36 S		City; Rosenberg	State; TX
	Zip Code 77471			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributor/Donation/Advertising		(b) Description Sponsorship / Ad / Booth	
	☐ Check if individual's residence address.		☐ Check if travel outside of Texas. Complete Schedule T.	
☐ 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 2-24-26	Payee name Texas Coalition of Black Democrats - Ft. Bend			
Amount (\$) \$100.00 ☐ Reimbursement from political contributions intended	Payee address; Missouri City, Texas txblackdems.org HQ 1034 Saulnier St, Houston TX 77019		City; Houston	State; TX
	Zip Code 77019			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other. Membership		Description Networking / Advertising	
	☐ Check if individual's residence address.		☐ Check if travel outside of Texas. Complete Schedule T.	
☐ Check if Austin, TX, officeholder living expense				
Candidate / Officeholder name Office sought Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date	Payee name			
Amount (\$)	Payee address;		City;	State; Zip Code
☐ Reimbursement from political contributions intended	☐ Check if individual's residence address.			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description	
	☐ Check if travel outside of Texas. Complete Schedule T.		☐ Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				

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