FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00083632 29 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Derek U. NAME Date Received **ELECTRONICALLY FILED** 02/26/2024 NICKNAME LAST **SUFFIX** Obialo CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 20123 Terra Hollow Lane MAILING Amount Receipt # **ADDRESS** Change of Address Richmond, TX 77407 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Nelson U. NAME NICKNAME LAST **SUFFIX** Ukadike STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE: **TREASURER** 7447 Harwin Drive **ADDRESS** Suite 206 (Residence or Business) Houston, TX 77036 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 387-9833 **PHONE** REPORT TYPE 30th day before election Runoff 15th day after campaign treasurer January 15 appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Year Day Year Day **COVERED THROUGH** 01/26/2024 02/24/2024

ELECTION DATE

Year

Day

03/05/2024

OFFICE HELD (if any)

Month

10 ELECTION

11 OFFICE

χ Primary

General

ELECTION TYPE

12 OFFICE SOUGHT (if known)

Other

Court Of Appeals, Justice Place 4 District 14

Runoff

Special

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 29

13 C / OH NAME	Obialo, Derek U. (Mr.)	14 Filer ID 00083632	(Ethics Commission Filers
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditual expenditual expenditures may have been made without distributed officeholders are required to report this information	the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
_	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.0
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN		\$ 13,975.0
EXPENDITURE	S)	\$ 0.0		
TOTALS	4. TOTAL POLIT	ICAL EXPENDITURES		
	4. IOTAL POLIT	ICAL EXPENDITURES		\$ 13,379.2
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 4,155.9
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.0
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.	y of perjury, that the ac Il information required	companying report is to be reported by me
		Mr.	Derek U. Obialo	
		Signature of	Candidate or Officeho	older
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to ca	ertify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

					3 of 29
	ER NAM	ME erek U. (Mr.)	19 Filer ID 00083632	(Eth	nics Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	12,975.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,000.00
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.	Х	SCHEDULE E(J): LOANS (JUDICIAL)		\$	800.00
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	10,538.37
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,840.89
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Fotal pages Schedule A(J)1: Sch: 1/13 Rpt: 4/29
2	FILER NAME Obialo, Dere	ek U. (Mr.)			1	Filer ID (Ethics Commission Filers) 00083632
4	Date 01/27/2024	5 Full name of contributor Achugbuo, Ugo (Mr.)6 Contributor address; City;	out-of-state PAC (ID#:		7 /	Amount of Contribution (\$) \$250.00
		Richmond, TX 77469				
8		Principal Occupation		9 Contributor's Job Title		
	IT Consulting			IT Consultant		
10	Contributor's e United Healt	employer/law firm hcare		11 Law firm of contributor's sp	oouse	(if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ι,	Amount of Contribution (\$)
	01/27/2024	Achugbuo R.N., Rosema Contributor address; City;	ary (Mrs.)			\$100.00
	Caratuila utaula I	Richmond, TX 77469		Contributorio Joh Title		
	Nursing	Principal Occupation		Contributor's Job Title RN		
_		and a saultan fina				(if any)
	United Healt	employer/law firm		Law firm of contributor's sp	Jouse	(II arry)
		s a child, law firm of parent(s) (if	· anu)			
	ii continuator i	s a cilliu, iaw iiiiii oi pareiii(s) (ii	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	<i>-</i>	Amount of Contribution (\$)
	01/27/2024	Akalonu, Theodore				\$1,000.00
		Contributor address; City; Houston, TX 77057	State; Zip Code		·	
\vdash	Contributor's I	I Principal Occupation		Contributor's Job Title	1	
	Engineering			Engineer		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	(if any)
	Texas Precis	sion Logistics LLC				
	If contributor is	s a child, law firm of parent(s) (if	any)	1		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 2/13 Rpt: 5/29
2	FILER NAME Obialo, Dere	ek U. (Mr.)			3	Filer ID (Ethics Commission Filers) 00083632
4	Date 02/15/2024	5 Full name of contributor Anakani, Ejike6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Houston, TX 77074				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Lawyer			Attorney-at-Law		
10	Contributor's e Anakani Lav	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12			: a.a. 3			
12	: II CONTRIBUTOR I	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/27/2024	Anderson, Mary Contributor address; City;	State; Zip Code			\$25.00
	0	Houston, TX 77086		O contributanta dala Titla		
	Healthcare	Principal Occupation		Contributor's Job Title Healthcare worker		
_		employer/law firm		Law firm of contributor's sp	חחופ	se (if any)
	Self employe			Law iiiii oi continuatoi 3 3	Jour	ic (ii dily)
-		s a child, law firm of parent(s) (if	anv)	<u> </u>		
		4-7(3,			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/17/2024	Anunobi, Chidi				\$300.00
		Contributor address; City; Houston, TX 77008	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Lawyer			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	AnunobiLaw	PLLC				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 3/13 Rpt: 6/29
2	FILER NAME Obialo, Dere	ek U. (Mr.)			3	Filer ID (Ethics Commission Filers) 00083632
4	Date 01/27/2024	Full name of contributor Chimezie, Ebere Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
		Katy, TX 77450				
8		Principal Occupation		9 Contributor's Job Title		
	Engineering			Engineer		
10	Contributor's e HIAX Global	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/04/2024	Chimezie, Fred Contributor address; City; Katy, TX 77494	State; Zip Code		·	\$500.00
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Engineering	Thiopai Occupation		Egineer		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	McFreds En	gineeing Consultants				
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/23/2024	Chinwe, Daria Contributor address; City;	State; Zip Code			\$250.00
		Houston, TX 77074		T		
		Principal Occupation		Contributor's Job Title Attorney		
	Lawyer Contributor's 6	employer/law firm		Law firm of contributor's sp	20110	co (if any)
	Daira Lawfiri			Law littl of contributors sp	Jous	e (ii aiiy)
		s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 4/13 Rpt: 7/29
2	FILER NAME Obialo, Dere	ek U. (Mr.)			3	Filer ID (Ethics Commission Filers) 00083632
4	Date 02/10/2024	Full name of contributor Emeghara, Juliet Contributor address; City; 3	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
		Katy, TX 77494				
8		Principal Occupation		9 Contributor's Job Title		
_	Civil Service			Civil Service		
10	USCIS	employer/law firm		11 Law firm of contributor's sp	oous	se (If any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)	1		
_	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/27/2024	Emesih, Gerald (Mr.) Contributor address; City;	State; Zip Code			\$300.00
		Richmond, TX 77407		T		
	Contributor's I	Principal Occupation		Contributor's Job Title Consultant		
_		employer/law firm		Law firm of contributor's sp	2011	co (if any)
	Self employe	, ,		Law iiiii or contributor 3 3	Jou.	se (ii diiy)
		s a child, law firm of parent(s) (if	any)	1		
H	Date	Full name of contributor	Day of the BAG (ID)	\	<u> </u>	Amount of Contribution (\$)
	01/27/2024	Ezeamama J.D., Udo	out-of-state PAC (ID#:)		\$300.00
		Contributor address; City; S	State; Zip Code			
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Lawyer			Attorney-at-Law		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Law Office o	f Ezeamama				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 5/13 Rpt: 8/29
2	FILER NAME Obialo, Dere	ek U. (Mr.)			3	Filer ID (Ethics Commission Filers) 00083632
4	Date 02/10/2024	5 Full name of contributorEzenagu, Nnaemeka6 Contributor address; City; \$	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Huntington Beach, CA 9	2648			
8		Principal Occupation		9 Contributor's Job Title		
_	Retired			Retired		
10	Contributor's e Retired	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/30/2024	Ezenagu, Nnamdi Contributor address; City; \$	State; Zip Code			\$200.00
		San Pedro, CA 90731				
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		or (the same)
	Retired	employer/law firm		Law firm of contributor's sp	Jous	se (II arry)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	01/27/2024	Fort Bend United	_			\$250.00
		Contributor address; City; S Houston, TX 77242	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	I		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	\(J)1
	The Instru	ction Guide explains ho	w to complete this	form.		al pages Schedule A(J)1: n: 6/13 Rpt: 9/29	
2	FILER NAME Obialo, Dere	ek U. (Mr.)			1	r ID (Ethics Commission 83632	n Filers)
4	Date 01/27/2024	5 Full name of contributor Gathogo, Rosemary6 Contributor address; City;	out-of-state PAC (ID#:		7 Amo	ount of Contribution (\$)	\$50.00
		Richmond, TX 77407					
8		Principal Occupation		9 Contributor's Job Title			
	Nursing			RN			
10	Contributor's e Self employe	employer/law firm ed		11 Law firm of contributor's sp	oouse (if	any)	
12	! If contributor i	s a child, law firm of parent(s) (i	f any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amo	ount of Contribution (\$)	
	02/24/2024	Haleem, Shah Contributor address; City;	State; Zip Code				\$500.00
		Katy, TX 77494					
		Principal Occupation		Contributor's Job Title			
	Realtor			Investor			
		employer/law firm		Law firm of contributor's sp	oouse (if	any)	
	SMZJ Holdir		f \				
	ii contributor i	s a child, law firm of parent(s) (i	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amo	ount of Contribution (\$)	
	02/24/2024	Haleem, Shah					\$50.00
		Contributor address; City; Katy, TX 77494	State; Zip Code				
-	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>		
	Realtor			Investor			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if	any)	
	SMZJ Holdir	ngs LLC					
	If contributor is	s a child, law firm of parent(s) (i	f any)	1			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/13 Rpt: 10/29
2	FILER NAME Obialo, Dere	ek U. (Mr.)			3	Filer ID (Ethics Commission Filers) 00083632
4	Date 01/27/2024	5 Full name of contributor Huckeye Health Service 6 Contributor address; City;			7	Amount of Contribution (\$) \$2,500.00
	Contributor's	Katy, TX 77494		Contributor's lob Title		
o	Contributors	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	02/20/2024	Ibeh, Pamela Contributor address; City;	State; Zip Code			\$50.00
		Longview, TX 75602				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Lawyer			Attorney-at-Law		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Greg County					
	If contributor is	s a child, law firm of parent(s) (i	rany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/08/2024	Madu R.N., Rita (Mrs.)				\$400.00
		Contributor address; City; Houston, TX 77071	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Nursing			RN		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Mercy Healt	hcare Services				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS	SCHEDULE A(J)1	
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 8/13 Rpt: 11/29	
2	FILER NAME Obialo, Dere				3 Filer ID (Ethics Commission Filers) 00083632	
4	Date 02/01/2024	 Full name of contributor Ntoka, Idowu Contributor address; City; St San Antonio, TX 78261 	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$500	.00
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title		
	Self employe					
10	O Contributor's employer/law firm		11 Law firm of contributor's sp	spouse (if any)		
	Ion Homes a					
12	If contributor i	s a child, law firm of parent(s) (if a	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	02/20/2024	Nwankwor, Carolyn Contributor address; City; Si Richmond, TX 77407	ate; Zip Code		 \$50	.00
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Healthcare	· · · · · · · · · · · · · · · · · · ·		RN		
		employer/law firm		Law firm of contributor's sp	spouse (if any)	
	Self employe	, ,		·		
		s a child, law firm of parent(s) (if a	nny)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	02/01/2024	Nwoko, Uzo			\$200	.00
		Contributor address; City; Si Houston, TX 77006	ate; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Student			Student		
	Contributor's	employer/law firm		Law firm of contributor's sp	spouse (if any)	
	Student					
	If contributor i	s a child, law firm of parent(s) (if a	nny)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 9/13 Rpt: 12/29
2	FILER NAME Obialo, Dere	ek U. (Mr.)			3	Filer ID (Ethics Commission Filers) 00083632
4	Date 02/01/2024	5 Full name of contributor Nwoko M.D., Dorothy (D6 Contributor address; City;			7	Amount of Contribution (\$) \$100.00
Ļ	Cantuila staula I	Katy, TX 77449		O Constribute de Joh Title		
8	Retired	Principal Occupation		9 Contributor's Job Title Retired		
10		employer/law firm		11 Law firm of contributor's sp	2011	co (if any)
10	Retired	employer/iaw iiim		11 Law IIIII of Contributor's Sp	Jou	se (II dily)
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	01/27/2024	Nzenwa, Chinkata Contributor address; City;	State; Zip Code			\$400.0
		Houston, TX 77008				
		Principal Occupation		Contributor's Job Title		
	Nursing			RN		- Chara
		employer/law firm e and Hospice LLC		Law firm of contributor's sp	ous	se (II any)
_		s a child, law firm of parent(s) (if	· anv)			
	ii contributor i	s a crima, law iiriri or parcria(s) (ii	arry			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	02/08/2024	Obialo, Theodore (Mr.) Contributor address; City;	State; Zip Code			\$200.0
		Coppell, TX 75019				
		Principal Occupation		Contributor's Job Title		
	Pharmacist			Pharmacist		
	Self employe	employer/law firm		Law firm of contributor's sp	oous	se (if any)
		s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 10/13 Rpt: 13/29	
2	FILER NAME Obialo, Dere	ek U. (Mr.)			1	Filer ID (Ethics Commission I 00083632	Filers)
4	Date 02/20/2024	Full name of contributor Obigwe M.D., Adanna (I Contributor address; City;			7	Amount of Contribution (\$)	\$500.00
		Vernon, TX 76384					
8		Principal Occupation		9 Contributor's Job Title			
	Physician			MD			
10	O Contributor's employer/law firm Vernon Clinic PLLC 11 Law firm of contributor's spi			oouse	e (if any)		
12		s a child, law firm of parent(s) (i	f any)	<u>l</u>			
			• •				
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/30/2024	Oguche, Henry Contributor address; City;	<u> </u>				\$200.00
		Fulshear, TX 77441					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Healthcare			Administrator			
		employer/law firm		Law firm of contributor's sp	oouse	e (if any)	
	Huckeye He						
	If contributor is	s a child, law firm of parent(s) (i	f any)				
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Ι.	Amount of Contribution (\$)	
	02/08/2024	Oguike, Uzoma					\$500.00
		Contributor address; City; Houston, TX 77008	State; Zip Code		·•		
_	Contributor's I	Principal Occupation		Contributor's Job Title			
	Self			Business owner			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)	
	Self employe	ed					
	If contributor is	s a child, law firm of parent(s) (i	f any)	•			

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 11/13 Rpt: 14/29	
2	FILER NAME Obialo, Derek U. (Mr.)		3	Filer ID (Ethics Commission Filers) 00083632		
4			7	Amount of Contribution (\$) \$200.00		
		Hanover, NJ 07936				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Lawyer			Attorney-at-Law		
10	Contributor's e Self employe	employer/law firm ed		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if a	any)	L		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	02/02/2024	Okwara, Kenneth (Mr.) Contributor address; City; S	<u> </u>			\$150.00
	Cambrillanda	Houston, TX 77008		Constributoulo Joh Titlo		
	Self employe	Principal Occupation		Contributor's Job Title Self employed		
		employer/law firm		Law firm of contributor's sp	יוח	se (if any)
	Self employe					,
		s a child, law firm of parent(s) (if a	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	02/04/2024	Onwuzurike, Chris (CEO) Contributor address; City; S West Bloomfield, MI 4832	tate; Zip Code		•	\$250.00
	Contributor's I	Principal Occupation		Contributor's Job Title	_	
	Engineering			CEO		
Contributor's employer/law firm Law firm of contributor's sp		oous	se (if any)			
	Keon and As	ssociates				
	If contributor is	s a child, law firm of parent(s) (if a	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 12/13 Rpt: 15/29	
2	FILER NAME Obialo, Dere	ek U. (Mr.)			3	Filer ID (Ethics Commission Filers) 00083632
4			7	Amount of Contribution (\$) \$500.00		
		Richmond, TX 77407				
8		Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	Contributor's e Retired	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor i	s a child, law firm of parent(s) (i	f any)	•		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/15/2024	Uju, Jeffrey Contributor address; City; Bolingbrook, IL 60490	State; Zip Code			\$200.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Business Ov			CEO		
-		employer/law firm		Law firm of contributor's sp	oous	se (if anv)
		oe and Palliative				
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	02/24/2024	Ukadike, Chuka (Mr.) Contributor address; City;	State; Zip Code			\$200.00
		Houston, TX 77083				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Lawyer			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Ukadike Lav					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A(J)1: Sch: 13/13 Rpt: 16/29	
2	FILER NAME Obialo, Dere	ek U. (Mr.)			3	Filer ID (Ethics Commission Filers) 00083632
4			7	Amount of Contribution (\$) \$100.00		
		Houston, TX 77008				
8		Principal Occupation		9 Contributor's Job Title		
	Self employe			Self employed		
10	Contributor's e Self employe	employer/law firm ed		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	02/09/2024	Unaka, Jonathan Contributor address; City; Boston, MA 02124	State; Zip Code			\$100.00
_	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Architecture	Thiopai Occupation		Archetect		
Contributor's employer/law firm Law firm of contributor's s			oous	se (if any)		
	Self employe	s a child, law firm of parent(s) (if	(any)			
	ii contributor i	s a cilliu, iaw iiiiii oi pareiii(s) (ii	arry			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	02/23/2024	Vanchez, Lachezar Contributor address; City;	State; Zip Code			\$400.00
		Corral Springs, FL 3307	7			
		Principal Occupation		Contributor's Job Title		
	Lawyer			Attorney		
Contributor's employer/law firm Southern Law Center PLLC Law firm of contributor's sp		oous	se (if any)			
			·			
	ii contributor ii	s a child, law firm of parent(s) (if	any)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	L	SCHEDULE A2
The Instruction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 17/29
2 FILER NAME Obialo, Derek U. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083632	
TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	\$	
5 Date 02/20/2024 6 Full name of contributor out-of-state PAC (ID#: Sajjad, Muzzammil aka "Voterbiz" 7 Contributor address; City; State; Zip Code	8 Amount of contribution (\$) In-kind contribution description \$1,000.00	
Missouri City, TX 77459		Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	· · · · · · · · · · · · · · · · · · ·
12 Contributor's principal occupation (FOR JUDICIAL) IT Consulting	13 Contributor's job title IT Consultant	(FOR JUDICIAL) (See instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
Innovative Solutions 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

	LOANS (J	UDICIAL)			SCHEDULE E(J)	
	The Instructio	ages Schedule E(J): /2 Rpt: 18/29				
2	FILER NAME Obialo, Derek U.	. (Mr.)		3 Filer ID 000836	(Ethics Commission Filers)	
4	TOTAL OF UN	ITEMIZED LOANS			\$	
5	Date of loan 02/10/2024	7 Name of lender	C (ID#:)	9 Loan Amount (\$) \$300.00	
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate	
	No	Houston, TX 77008			11 Maturity Date 02/14/2024	
12	Lender's Principal	Occupation	13 Lender's Job Title			
14	Lender's Employer		15 Law Firm of lender's spous	se (if any)		
16		w firm of parent(s) (if any)				
17 Description of Collateral X None			18 Check if personal funds were deposited into political account (See Instructions)			
19	GUARANTOR INFORMATION	20 Name of guarantor	22 Amount Guaranteed (\$)			
X not applicable 21 Guarantor address; City; State; Zip Code						
23	Guarantor's Princip	pal Occupation	24 Guarantor's Job Title			
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's spouse (if any)			
27	If guarantor is child	d, law firm of parent(s) (if any)				

	LOANS (J	UDICIAL)			SCHEDULE E(J)	
	The Instructio	1	pages Schedule E(J): 2/2 Rpt: 19/29			
2	FILER NAME Obialo, Derek U.	. (Mr.)		3 Filer ID 000836	(Ethics Commission Filers)	
4	TOTAL OF UN	ITEMIZED LOANS			\$	
5	Date of loan 02/04/2024	7 Name of lender out-of-state PA Ojiako, Ikechukwu	C (ID#:)	9 Loan Amount (\$) \$500.00	
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code		10 Interest Rate	
	No	Fulshear, TX 77441			11 Maturity Date 02/09/2024	
12	Lender's Principal	Occupation	13 Lender's Job Title			
	Engineering		Engineer			
14	Lender's Employer Total Oil	r/Law Firm	15 Law Firm of lender's spous	e (if any)		
16	16 If lender is child, law firm of parent(s) (if any)					
17 Description of Collateral X None			18 Check if personal funds we	into political account (See Instructions)		
19	GUARANTOR INFORMATION	20 Name of guarantor	22 Amount Guaranteed (\$)			
	X not applicable	21 Guarantor address; City; State;	Zip Code			
23	Guarantor's Princip	pal Occupation	24 Guarantor's Job Title			
25	Guarantor's Emplo	oyer/Law Firm	26 Law Firm of guarantor's spouse (if any)			
27	If guarantor is child	d, law firm of parent(s) (if any)				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a cottogon not listed above)

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/7 Rpt: 20/29	Obialo, Derek U. (Mr.) 00083632
4	Date	5 Payee name
	02/15/2024	CVS
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$32.21	10301 Main St
		Houston, TX 77006
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	ZA ZIIDII GRZ	Crum line
		Supplies.
Ļ		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/29/2024	Ft Bend County Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$900.00	13515 SW Freeway
	4000.00	Ste 204
		Sugar Land, TX 77478
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign donation.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	D :	
	Date	Payee name
	02/03/2024	Houston Black American Democratic PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	1034 Saulnier St
		Houston, TX 77019
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	-	Candidate/Officeholder/Political Committee
		Dollation.
_	Operation ONE VIII II	On didn't 10 ff a balden name
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	- parametric 30 2000000 0/01	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
	Sch: 2/7 Rpt: 21/29	Obialo, Derek U. (Mr.)		00083632			
4	Date	5 Payee name		·			
	02/02/2024	Innovative Solutions					
6	Amount (\$)	7 Payee address; City; State; Zip Co	de				
	\$2,077.63	10862 Redstoe Ct					
		Missouri City, TX 77459					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Printing Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
				Yard signs.			
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held			
	expenditure to benefit C/O	1					
F	Date	Payee name					
	02/14/2024	Innovative Solutions					
	Amount (\$)	Payee address; City; State; Zip Co	de	_			
	\$666.20	10862 Redstoe Ct					
		Missouri City, TX 77459					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Printing Expense		Check if travel outside of Texas. Complete Schedule T.			
				Check if Austin, TX, officeholder living expense Yard signs.			
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held			
	expenditure to benefit C/O	1					
	Date	Payee name					
	02/08/2024	Innovative Solutions					
	Amount (\$)	Payee address; City; State; Zip Co	de				
	\$605.00	10862 Redstoe Ct					
		Missouri City, TX 77459					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Printing Expense		Check if travel outside of Texas. Complete Schedule T.			
				Check if Austin, TX, officeholder living expense Yard signs.			
				raid signs.			
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held			
	expenditure to benefit C/O		J	22			
\vdash							

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/7 Rpt: 22/29	Obialo, Derek U. (Mr.) 00083632
4	Date	5 Payee name
	02/08/2024	Innovative Solutions
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	10862 Redstoe Ct
		Missouri City, TX 77459
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Yard signs.
Ļ	Operation ONLY & Street	Occasional Office health and a second of the
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┕	<u>'</u>	
	Date	Payee name
	02/02/2024	Innovative Solutions
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	10862 Redstoe Ct
		Missouri City, TX 77459
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Yard signs.
		i alu signs.
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
L		
	Date	Payee name
	02/17/2024	Jolie Houston
	Amount (\$)	Payee address; City; State; Zip Code
	\$28.08	506 Main Street
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Campaign event.
L	Operation ONE VIII II	Outside to 10 ff and a later and a second to the second to
1	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/7 Rpt: 23/29	Obialo, Derek U. (Mr.) 00083632
4	Date	5 Payee name
	02/14/2024	Law Office of Derek U Obialo
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	1415 N Loop West
		1411
		Houston, TX 77008
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Repayment of 2/10/24 loan.
		Repayment of 2/10/24 toan.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/01/2024	Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$164.61	2602 Eldgridge Pkwy
		Houston, TX 77082
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Supplies.
		<u> </u>
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/08/2024	Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.71	2602 Eldgridge Pkwy
		Houston, TX 77082
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Supplies.
		Supplies.
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
1		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries Wagnes/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/7 Rpt: 24/29	Obialo, Derek U. (Mr.) 00083632
4	Date	5 Payee name
	02/09/2024	Ojiako, Ikechukwu
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	4215 Meadow Court
		Fulshear, TX 77441
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Repayment of 2/4/24 loan.
		Repayment of 214/24 loan.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	
_		
	Date	Payee name
	02/20/2024	Paul Revee Middle School
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	10502 Briar Forest
		Houston, TX 77042
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Donation.
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	D .	
	Date	Payee name
	02/21/2024	Sprint 2 Print
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,482.00	8748 Clay Road
		#300
		Houston, TX 77080
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
		Check if Austin, TX, officeholder living expense
		Yard signs.
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

	Credit Card Payment	The Instruction Guide explains how to complete this fo	rm.
1	Total pages Schedule F1: Sch: 6/7 Rpt: 25/29	2 FILER NAME Obialo, Derek U. (Mr.)	3 Filer ID (Ethics Commission Filers) 00083632
4	Date 02/06/2024	5 Payee name Sprint 2 Print	
	Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 8748 Clay Road #300 Houston, TX 77080	
8	PURPOSE OF EXPENDITURE	Trinting Expense	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 01/26/2024	Payee name Wazobia Kitchen	
	Amount (\$) \$32.99	Payee address; City; State; Zip Code 16203 Westheimer Road Suite 106 Houston, TX 77082	
	PURPOSE OF EXPENDITURE	Event Expense	if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 02/24/2024	Payee name Westheimer Liquor	
	Amount (\$) \$64.94	Payee address; City; State; Zip Code 6425 FM 1464	
		Houston, TX 77082	
	PURPOSE OF EXPENDITURE	Check	ion if travel outside of Texas. Complete Schedule T. if Austin, TX, officeholder living expense ign event.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gilt/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 7/7 Rpt: 26/29	Obialo, Derek U. (Mr.)	00083632
4	Date	5 Payee name	
	02/17/2024	Williams Smokehouse BBQ	
6	Amount (\$) \$925.00	7 Payee address; City; State; Zip Code 2105 Lone Star Dr. Sugar Land, TX 77479	
8	PURPOSE OF EXPENDITURE	Event Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense ge.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Advertising Expense Event Expense

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense Polling Expe y - Gift/Awards/Memorials Expense Printing Exp					
Credit Card Payment The Instruction Guide explains how to complete this form.							
1	Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 1/3 Rpt: 27/29	Obialo, Derek U. (Mr.)	00083632				
4	Date	5 Payee name	1				
	02/12/2024	African Christian Fellowship					
6	Amount (\$)	7 Payee address; City; State; Zip Code	9				
	\$50.00	12204 Sharpview Drive					
	Reimbursement from political contributions intended	Ste 2331					
		Houston, TX 77072					
_			Description Check if traval outside of Tayon Complete Cabadula T				
8	PURPOSE OF	1, ,	b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Campaign Donation.				
			ampaign Donation.				
9	Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held				
9	expenditure to benefit	Candidate/Officeriolider name	Office 30ugnt Office field				
	C/OH						
	Date	Payee name					
	01/29/2024	Ft Bend County Democratic Parti					
	Amount (\$) Payee address; City; State; Zip Code						
	\$850.00 13515 SW Freeway						
	Reimbursement from	Ste 204					
	political contributions intended	Sugar Land, TX 77478					
_	PURPOSE	Category (See Categories listed at the top of this schedule)	Description				
OF EXPENDITURE		Contributions/Donations Made By	Check if Austin, TX, officeholder living expense				
		Candidate/Officeholder/Political Committee Donation to Ft Bend County Democratic Party					
			,				
	Complete ONLY if direct	Candidate/Officeholder name	Office sought Office held				
	expenditure to benefit		•				
	C/OH						
	Date	Payee name					
	02/23/2024	Innovation Solutions					
	Amount (\$)	Payee address; City; State; Zip Code	e				
	\$1,000.00	10862 Redstoe Ct					
	Reimbursement from						
	political contributions intended	Missouri City, TX 77459					
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.				
	OF EXPENDITURE	Printing Expense	Check if Austin, TX, officeholder living expense				
		 Y	ard signs.				
L							
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought Office held				
	C/OH						
\vdash							

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		· ·	Salaries	Expense /Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)	
			The Instruction Guide expl	ains now to c			
1	1 0	2	FILER NAME		[3	Filer ID (Ethics Commission Filers)	
	Sch: 2/3 Rpt: 28/29		Obialo, Derek U. (Mr.)			00083632	
4	Date	5	Payee name				
	02/23/2024		Innovative Solutions				
6	Amount (\$)	7	Payee address; City; S	tate; Zip C	ode		
	\$750.00		10862 Redstoe Ct				
	Reimbursement from						
	political contributions intended		Missouri City, TX 77459				
8	PURPOSE	(a)	Category (See Categories listed at the top of thi	is schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE		Printing Expense			Check if Austin, TX, officeholder living expense	
	EXPENDITORE				Yard signs.		
9	Complete ONLY if direct	Can	didate/Officeholder name		Office sought	Office held	
	expenditure to benefit				· ·		
	C/OH						
	Date		Payee name				
	02/24/2024		Kroger				
	Amount (\$)	\vdash	Payee address; City; S	tate; Zip C	code		
	\$37.36 6425 FM 1464						
			04201 W 1404				
	Reimbursement from political contributions						
	intended		Houston, TX 77082				
	PURPOSE		Category (See Categories listed at the top of the	is schedule)	Description	Check if travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE			Event Expense			Check if Austin, TX, officeholder living expense	
					Supplies.		
	•	Can	didate/Officeholder name		Office sought	Office held	
expenditure to benefit C/OH							
		_					
	Date		Payee name				
	02/20/2024	Paul Revee Middle School					
	Amount (\$)		Payee address; City; State; Zip Code				
	\$100.00		10502 Briar Forest				
	Reimbursement from						
	political contributions intended		Houston, TX 77042				
	PURPOSE	t	Category (See Categories listed at the top of thi	is schedule)	Description	Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE		Contributions/Donations Made By			Check if Austin, TX, officeholder living expense	
	EXPENDITURE		Candidate/Officeholder/Political Co	mmittee	Donation to HISD		
	Complete ONLY if direct	Can	didate/Officeholder name		Office sought	Office held	
	expenditure to benefit						
	C/OH						

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 3/3 Rpt: 29/29 Obialo, Derek U. (Mr.) 00083632 Date Payee name 02/21/2024 Sprint 2 Print 6 Amount (\$) Payee address; City; State; Zip Code \$53.53 8748 Clay Road #300 Reimbursement from political contributions intended Houston, TX 77080 (a) Category (See Categories listed at the top of this schedule) **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 OF Check if Austin, TX, officeholder living expense **Printing Expense EXPENDITURE** Sign printing. Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH