

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) 00087763	2 Total pages filed: 22				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Matthew J.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2025			
	NICKNAME	LAST Kolodoski	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 4900 Airport Pkwy #367 Addison, TX 75001			Date Hand-delivered or Date Postmarked			
	Receipt #		Amount	Date Processed			
				Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Laura E.	MI				
	NICKNAME	LAST Jones	SUFFIX				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1415 Legacy Drive Suite 350 Frisco, TX 75034						
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(214)	387-9056					
8 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)						
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	10/27/2024				12/31/2024		
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024			ELECTION TYPE			
				<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
			<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known) Court Of Appeals, Justice Place 9 District 5			

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 22

13 C / OH NAME Kolodoski, Matthew J. (Mr.) **14 Filer ID** (Ethics Commission Filers)
00087763

15 NOTICE FROM POLITICAL COMMITTEE(S)
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *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.

Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
<input checked="" type="checkbox"/> GENERAL	Judicial Fairness PAC
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS 919 Congress Ave. Ste. 455 Austin, TX 78701
	COMMITTEE CAMPAIGN TREASURER NAME Parsley, Lee
	COMMITTEE CAMPAIGN TREASURER ADDRESS 919 Congress Ave. Ste. 455 Austin, TX 78701

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 19,216.46
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 557.11
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 19,777.69
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 4,505.00

17 AFFIDAVIT

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

Mr. Matthew J. Kolodoski

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - JC/OH

18 FILER NAME Kolodoski, Matthew J. (Mr.)		19 Filer ID 00087763	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS			SUBTOTAL AMOUNT
	NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	19,216.46
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	557.11
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	0.65

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/12 Rpt: 4/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Jerry	7 Amount of Contribution (\$) \$3,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75270	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Passam & Jones		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Janice	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75357	
Contributor's Principal Occupation Unemployed		Contributor's Job Title Unemployed
Contributor's employer/law firm Unemployed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowen, Wesley	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75243	
Contributor's Principal Occupation Real Estate		Contributor's Job Title President
Contributor's employer/law firm Venture Commercial Management, LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/12 Rpt: 5/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brainard, Mark	7 Amount of Contribution (\$) \$26.34
	6 Contributor address; City; State; Zip Code Frazee, MN 56544	
8 Contributor's Principal Occupation Q.E.		9 Contributor's Job Title Q.E.
10 Contributor's employer/law firm Team Ind		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Michele	Amount of Contribution (\$) \$26.34
	Contributor address; City; State; Zip Code Santa Ana, CA 92705	
Contributor's Principal Occupation Ins Broker		Contributor's Job Title Ins Broker
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bulgrien, Kevin	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Longview, TX 75602	
Contributor's Principal Occupation Software		Contributor's Job Title Network Engineer
Contributor's employer/law firm Computer Systems Design, Inc dba Systems Design		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/12 Rpt: 6/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 12/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camacho, Vladimir	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75202	
8 Contributor's Principal Occupation Air Cargo		9 Contributor's Job Title VP
10 Contributor's employer/law firm SmartKargo		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Eric	Amount of Contribution (\$) \$260.59
	Contributor address; City; State; Zip Code Cedar Hill, TX 75104	
Contributor's Principal Occupation Systems Engineer		Contributor's Job Title Systems Engineer
Contributor's employer/law firm Lockheed Martin		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Patricia	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code McKinney, TX 75070	
Contributor's Principal Occupation Unemployed		Contributor's Job Title Unemployed
Contributor's employer/law firm Unemployed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/12 Rpt: 7/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davison, Merv	7 Amount of Contribution (\$) \$52.37
	6 Contributor address; City; State; Zip Code Saratoga Springs, NY 12866	
8 Contributor's Principal Occupation Unemployed		9 Contributor's Job Title Unemployed
10 Contributor's employer/law firm Unemployed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dickinson, Patrick	Amount of Contribution (\$) \$15.93
	Contributor address; City; State; Zip Code Renton, WA 98059	
Contributor's Principal Occupation Unemployed		Contributor's Job Title Unemployed
Contributor's employer/law firm Unemployed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ekroos, Mary	Amount of Contribution (\$) \$26.34
	Contributor address; City; State; Zip Code Portland, TX 78374	
Contributor's Principal Occupation Secretary		Contributor's Job Title Secretary
Contributor's employer/law firm St Stephen Lutheran Church		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/12 Rpt: 8/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Florey, Joe	7 Amount of Contribution (\$) \$52.37
	6 Contributor address; City; State; Zip Code Odessa, TX 79768	
8 Contributor's Principal Occupation CPA		9 Contributor's Job Title CPA
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fulginiti, Michael	Amount of Contribution (\$) \$104.42
	Contributor address; City; State; Zip Code Matthews, NC 28105	
Contributor's Principal Occupation Unemployed		Contributor's Job Title Unemployed
Contributor's employer/law firm Unemployed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furman, Barbara	Amount of Contribution (\$) \$52.37
	Contributor address; City; State; Zip Code Gilbertsville, PA 19525	
Contributor's Principal Occupation Unemployed		Contributor's Job Title Unemployed
Contributor's employer/law firm Unemployed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/12 Rpt: 9/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Homoleski, Miriam	7 Amount of Contribution (\$) \$52.37
	6 Contributor address; City; State; Zip Code Cedar Hill, TX 75104	
8 Contributor's Principal Occupation Unemployed		9 Contributor's Job Title Unemployed
10 Contributor's employer/law firm Unemployed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudgens, Roger	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75217	
Contributor's Principal Occupation Unknown		Contributor's Job Title Unknown
Contributor's employer/law firm Unknown		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson Walker LLP Political Action Committee	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
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)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/12 Rpt: 10/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaime, Daniel	7 Amount of Contribution (\$) \$15.93
	6 Contributor address; City; State; Zip Code Harvest, AL 35749	
8 Contributor's Principal Occupation Unemployed		9 Contributor's Job Title Unemployed
10 Contributor's employer/law firm Unemployed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judith, Canion	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75243	
Contributor's Principal Occupation N/A		Contributor's Job Title NA
Contributor's employer/law firm NA		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenas, Jean	Amount of Contribution (\$) \$104.42
	Contributor address; City; State; Zip Code Carrollton, TX 75006	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/12 Rpt: 11/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kroeze, Denny	7 Amount of Contribution (\$) \$104.42
	6 Contributor address; City; State; Zip Code Visalia, CA 93291	
8 Contributor's Principal Occupation Unemployed		9 Contributor's Job Title Unemployed
10 Contributor's employer/law firm Unemployed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Jordan	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sunnyvale, TX 75182	
Contributor's Principal Occupation Banker/Attorney		Contributor's Job Title Banker/Attorney
Contributor's employer/law firm First Guaranty Bank		Law firm of contributor's spouse (if any) Ross, Smith & Binford
If contributor is a child, law firm of parent(s) (if any)		
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Debra	Amount of Contribution (\$) \$52.37
	Contributor address; City; State; Zip Code Kettering, OH 45429	
Contributor's Principal Occupation Unemployed		Contributor's Job Title Unemployed
Contributor's employer/law firm Unemployed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/12 Rpt: 12/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesquite Republican Women's PAC <hr/> 6 Contributor address; City; State; Zip Code Mesquite, TX 75185	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mesquite Republican Women's PAC <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75185	Amount of Contribution (\$) \$250.00
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)		
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, James <hr/> Contributor address; City; State; Zip Code Denison, TX 75020	Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Unemployed		Contributor's Job Title Unemployed
Contributor's employer/law firm Unemployed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/12 Rpt: 13/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/22/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Power, Robert	7 Amount of Contribution (\$) \$52.37
	6 Contributor address; City; State; Zip Code Spring, TX 77382	
8 Contributor's Principal Occupation Engineer		9 Contributor's Job Title Engineer
10 Contributor's employer/law firm Milpower Source		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Phillip	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Farmers Branch, TX 75234	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stell, Jan	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75238	
Contributor's Principal Occupation Realtor		Contributor's Job Title Realtor
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/12 Rpt: 14/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, T.E.	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Rowlett, TX 75088	
8 Contributor's Principal Occupation Unemployed		9 Contributor's Job Title Unemployed
10 Contributor's employer/law firm Unemployed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tillotson, Jeff	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75202	
Contributor's Principal Occupation Attorney		Contributor's Job Title Partner
Contributor's employer/law firm Tillotson Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walton, Mike	Amount of Contribution (\$) \$10.72
	Contributor address; City; State; Zip Code Chelsea, MI 48118	
Contributor's Principal Occupation Machinist		Contributor's Job Title Machinist
Contributor's employer/law firm Stillion		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/12 Rpt: 15/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webster, Kathy	7 Amount of Contribution (\$) \$52.37
	6 Contributor address; City; State; Zip Code Plano, TX 75094	
8 Contributor's Principal Occupation Real Estate Broker		9 Contributor's Job Title Real Estate Broker
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wenick, Barry	Amount of Contribution (\$) \$104.42
	Contributor address; City; State; Zip Code Dallas, TX 75380	
Contributor's Principal Occupation Attorney-Mediator-Arbitrator		Contributor's Job Title Attorney-Mediator-Arbitrator
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any) Wenick Law Group
If contributor is a child, law firm of parent(s) (if any)		
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingo, Paul	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation Attorney		Contributor's Job Title Partner
Contributor's employer/law firm Hamilton Wingo		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 16/22	2 FILER NAME Kolodoski, Matthew J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/08/2024	5 Payee name Donorbox	
6 Amount (\$) \$87.50	7 Payee address; City; State; Zip Code 1520 Belle View Blvd, Ste 4106 Alexandria, VA 22307	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 11/11/2024	Payee name Donorbox	
Amount (\$) \$87.50	Payee address; City; State; Zip Code 1520 Belle View Blvd, Ste 4106 Alexandria, VA 22307	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 11/20/2024	Payee name Donorbox	
Amount (\$) \$10.77	Payee address; City; State; Zip Code 1520 Belle View Blvd, Ste 4106 Alexandria, VA 22307	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 17/22	2 FILER NAME Kolodoski, Matthew J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087763
4 Date 11/19/2024	5 Payee name Donorbox	
6 Amount (\$) \$13.40	7 Payee address; City; State; Zip Code 1520 Belle View Blvd, Ste 4106 Alexandria, VA 22307	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2024	Payee name Donorbox	
Amount (\$) \$3.36	Payee address; City; State; Zip Code 1520 Belle View Blvd, Ste 4106 Alexandria, VA 22307	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2024	Payee name Donorbox	
Amount (\$) \$4.05	Payee address; City; State; Zip Code 1520 Belle View Blvd, Ste 4106 Alexandria, VA 22307	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 18/22	2 FILER NAME Kolodoski, Matthew J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087763
4 Date 12/01/2024	5 Payee name Donorbox	
6 Amount (\$) \$0.28	7 Payee address; City; State; Zip Code 1520 Belle View Blvd, Ste 4106 Alexandria, VA 22307	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2024	Payee name Stripe, Inc.	
Amount (\$) \$145.30	Payee address; City; State; Zip Code 354 Oyster Point Boulevard South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/11/2024	Payee name Stripe, Inc.	
Amount (\$) \$145.30	Payee address; City; State; Zip Code 354 Oyster Point Boulevard South San Francisco, CA 94080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 19/22	2 FILER NAME Kolodoski, Matthew J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087763
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4 Date 11/19/2024	5 Payee name Stripe, Inc.
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6 Amount (\$) \$23.69	7 Payee address; City; State; Zip Code 354 Oyster Point Boulevard South San Francisco, CA 94080
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/20/2024	Payee name Stripe, Inc.
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Amount (\$) \$19.94	Payee address; City; State; Zip Code 354 Oyster Point Boulevard South San Francisco, CA 94080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/21/2024	Payee name Stripe, Inc.
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Amount (\$) \$7.36	Payee address; City; State; Zip Code 354 Oyster Point Boulevard South San Francisco, CA 94080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 20/22	2 FILER NAME Kolodoski, Matthew J. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087763
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4 Date 11/22/2024	5 Payee name Stripe, Inc.
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6 Amount (\$) \$7.90	7 Payee address; City; State; Zip Code 354 Oyster Point Boulevard South San Francisco, CA 94080
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name Stripe, Inc.
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Amount (\$) \$0.76	Payee address; City; State; Zip Code 354 Oyster Point Boulevard South San Francisco, CA 94080
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment processing.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 21/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
4 Date 12/04/2024	5 Name of person from whom amount is received Frost Bank	8 Amount (\$) \$0.53
	6 Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76162	
	7 Purpose for which amount is received Interest Payment <input type="checkbox"/> Check if political contribution returned to filer	
Date 11/05/2024	Name of person from whom amount is received Frost Bank	Amount (\$) \$0.12
	Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76162	
	Purpose for which amount is received Interest Payment <input type="checkbox"/> Check if political contribution returned to filer	

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.		1 Total pages Schedule L: Sch: 1/1 Rpt: 22/22
2 FILER NAME Kolodoski, Matthew J. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087763
LENDER INFORMATION	4 Name of lender Kolodoski, Matthew	
	5 Lender address; City; State; Zip Code Addison, TX 75001	
GUARANTOR INFORMATION	6 Name of guarantor	
	<input checked="" type="checkbox"/> not applicable 7 Guarantor address; City; State; Zip Code	