### 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) 00089779 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Mr. Kristopher C. NAME Date Received **ELECTRONICALLY FILED** 07/14/2025 NICKNAME LAST **SUFFIX** Odom CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 2016 Cliffside Drive MAILING Receipt # Amount **ADDRESS** Change of Address Edgecliff Village, TX 76134 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Kristopher NAME NICKNAME LAST **SUFFIX** Odom **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 2016 Cliffside Drive **ADDRESS** (Residence or Business) Edgecliff Village, TX 76134 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 513-6073 **PHONE** 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 Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 06/10/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/03/2026 General Special

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12 OFFICE SOUGHT (if known)

District Judge District 231

11 OFFICE

OFFICE HELD (if any)

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Odom, Kristopher C.	(Mr.)	14 Filer ID 00089779	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.			
Additional Pages	COMMITTEE TYPE COMMITTEE NAME			
	GENERAL			
	_	COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
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)			\$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES			<b>\$</b> 500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
Mr. Kristopher C. Odom				
	Signature of Candidate or Officeho			lder
AFFIX NOT	TARY STAMP / SEAL AB	DVE		
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 offic	er administering oath	Printed name of officer administering oath	Title of office	er administering oath

# SUBTOTALS - JC/OH COVER SHEET PG 3 3 of 4 18 FILER NAME Odom, Kristopher C. (Mr.) 19 Filer ID 00089779 CEthics Commission Filers) 00089779 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE 1. SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) \$ SUBTOTAL AMOUNT

### 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. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 4/4 Odom, Kristopher C. (Mr.) 00089779 Date Payee name 06/11/2025 Fort Worth Republican Women 6 Amount (\$) Payee address; City; State; Zip Code \$500.00 P.O. Box 101613 Reimbursement from political contributions intended Fort Worth, TX 76185 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** Judicial Petition Signing Party Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH