

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

MAY 16 2022

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <p style="text-align:center;">Todd</p> <hr style="border-top: 1px dotted black;"/> NICKNAME LAST SUFFIX <p style="text-align:center;">Kolls</p>	OFFICE USE ONLY Date Received <p style="font-size: 2em; margin: 10px 0;">MAY 16 2022</p> Date Hand-delivered or Date Postmarked Receipt # Amount \$ Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <small>Change of Address</small>	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <p style="font-size: 1.2em;">3521 Silver Spur Dr. San Angelo, Tx 76904</p>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <p style="font-size: 1.2em;">(325) 212-2894</p>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <p style="text-align:center;">Ryan</p> <hr style="border-top: 1px dotted black;"/> NICKNAME LAST SUFFIX <p style="text-align:center;">Newlin</p>		
7 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <p style="font-size: 1.2em;">2525 W Ave. J San Angelo, Tx 76903</p>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <p style="font-size: 1.2em;">(325) 277-2828</p>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <p style="font-size: 1.2em; text-align:center;">2 / 20 / 22 THROUGH 5 / 14 / 22</p>		
11 ELECTION	ELECTION DATE Month Day Year <p style="font-size: 1.2em;">5 / 24 / 22</p>	ELECTION TYPE Primary <input checked="" type="checkbox"/> Runoff Other Description General Special _____	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <p style="font-size: 1.2em;">Tom Green County Judge</p>	
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
GO TO PAGE 2			

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 99.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 16,324.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 12,821.56
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 4,619.31
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,500.00

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

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ 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

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20_____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 16,324.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE E: LOANS		\$ 5,500.00
5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 12,821.56
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Todd Kolls		3 Filer ID (Ethics Commission Filers)
4 Date 02/21/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Dale & Sandra Creeecy 6 Contributor address; City; State; Zip Code 2906 Palo Duro San Angelo Tx 76904	7 Amount of contribution (\$) 300.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Mayfield Paper
Date 02/22/2022	Full name of contributor out-of-state PAC (ID#: _____) Jerry Roach Contributor address; City; State; Zip Code 1126 Ashford San Angelo Tx 76901	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self
Date 02/23/2022	Full name of contributor out-of-state PAC (ID#: _____) Basil El Masri Contributor address; City; State; Zip Code 1646 La Villa Cir. San Angelo Tx 76904	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Business Owner/Investor		Employer (See Instructions) self
Date 02/23/2022	Full name of contributor out-of-state PAC (ID#: _____) Tom Granaghan Contributor address; City; State; Zip Code 3105 Oak Mountain San Angelo Tx 76904	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Shannon
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Todd Kolls		3 Filer ID (Ethics Commission Filers)
4 Date 02/23/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Steve Mayer	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code PO Box 1741 San Angelo Tx 76902		
8 Principal occupation / Job title (See Instructions) rancher		9 Employer (See Instructions) self
Date 02/28/2022	Full name of contributor out-of-state PAC (ID#: _____) David & Dinah Cummings	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 1515 Paseo De Vaca San Angelo Tx 76901		
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Shannon
Date 03/01/2022	Full name of contributor out-of-state PAC (ID#: _____) Max Puello	Amount of contribution (\$) 200.00
Contributor address; City; State; Zip Code 5421 Enclave San Angelo Tx 76904		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Caldwell Banker
Date 03/01/2022	Full name of contributor out-of-state PAC (ID#: _____) Brian Rice	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 2905 Brianwood Crt. Cedar Park Tx 78613		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) self
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Todd Kolls		3 Filer ID (Ethics Commission Filers)
4 Date 03/05/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Zach & Leah Drennan 6 Contributor address; City; State; Zip Code 5406 Bent Green Crt. San Angelo Tx 76904	7 Amount of contribution (\$) 1,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Original energy services
Date 03/05/2022	Full name of contributor out-of-state PAC (ID#: _____) Rodney Fleming Contributor address; City; State; Zip Code 2404 College Hills San Angelo Tx 76904	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Real estate		Employer (See Instructions) self
Date 03/07/2022	Full name of contributor out-of-state PAC (ID#: _____) Elizabeth White Contributor address; City; State; Zip Code PO Box 1991 San Angelo Tx 76902	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions) Property Managment		Employer (See Instructions) self
Date 03/07/2022	Full name of contributor out-of-state PAC (ID#: _____) Lee Pfluger Contributor address; City; State; Zip Code PO Box 1991 San Angelo Tx 76902	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) self
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Todd Kolls		3 Filer ID (Ethics Commission Filers)
4 Date 03/07/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Amy Pfluger	7 Amount of contribution (\$) 1,000.00
6 Contributor address; City; State; Zip Code Po Box 1991 San Angelo Tx 76902		
8 Principal occupation / Job title (See Instructions) Ranching		9 Employer (See Instructions) self
Date 03/07/2022	Full name of contributor out-of-state PAC (ID#: _____) Graham Sutliff	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 1501 Pallisades Point Austin Tx 78738		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) self
Date 03/08/2022	Full name of contributor out-of-state PAC (ID#: _____) Ben & Beverly Stribling	Amount of contribution (\$) 1,000.00
Contributor address; City; State; Zip Code 119 S. Irving San Angelo Tx 76903		
Principal occupation / Job title (See Instructions) Banking		Employer (See Instructions) self
Date 03/09/2022	Full name of contributor out-of-state PAC (ID#: _____) Ken Newman	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 36 E. Twohig San Angelo Tx 76903		
Principal occupation / Job title (See Instructions) property Mangment		Employer (See Instructions) self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Todd Kolls		3 Filer ID (Ethics Commission Filers)
4 Date 03/10/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Tom Davidson 6 Contributor address; City; State; Zip Code 36 E. Twohig San Angelo Tx 76903	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) self
Date 03/19/2022	Full name of contributor out-of-state PAC (ID#: _____) Dale Creecy Contributor address; City; State; Zip Code 2906 Palo Duro San Angelo Tx 76904	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Mayfield Paper
Date 03/25/2022	Full name of contributor out-of-state PAC (ID#: _____) Jon Conn Contributor address; City; State; Zip Code Po Box 62266 San Angelo Tx 76902	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) self
Date 04/05/2022	Full name of contributor out-of-state PAC (ID#: _____) Mike Brown Contributor address; City; State; Zip Code 1122 W. Twohig San Angelo Tx 76901	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Tom Green County Judge

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Todd Kolls		3 Filer ID (Ethics Commission Filers)
4 Date 04/05/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Marty Self <hr/> 6 Contributor address; City; State; Zip Code 206 Clover Dr. San Angelo Tx 76904	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) self
Date 04/07/2022	Full name of contributor out-of-state PAC (ID#: _____) Larry Ricci <hr/> Contributor address; City; State; Zip Code 718 W. Ave D. San Angelo Tx	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self
Date 04/07/2022	Full name of contributor out-of-state PAC (ID#: _____) John Childers <hr/> Contributor address; City; State; Zip Code 1300 Dorrance Rd. San Angelo Tx 76904	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Banking		Employer (See Instructions) Bank of San Angelo
Date 04/08/2022	Full name of contributor out-of-state PAC (ID#: _____) Carlos Rodriguez <hr/> Contributor address; City; State; Zip Code 314 W. Harris San Angelo Tx 76903	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Webb Stokes and Sparks

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Todd Kolls		3 Filer ID (Ethics Commission Filers)
4 Date 04/26/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Pierce Miller	7 Amount of contribution (\$) 100.00
	6 Contributor address; City; State; Zip Code PO Box 2832 San Angelo Tx 76902	
8 Principal occupation / Job title (See Instructions) Rancher		9 Employer (See Instructions) self
Date 05/04/2022	Full name of contributor out-of-state PAC (ID#: _____) Michael & Emilee Brinlee	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 5517 Bentwood Dr. San Angelo Tx 76904	
Principal occupation / Job title (See Instructions) medical supplies		Employer (See Instructions) med way
Date 05/05/2022	Full name of contributor out-of-state PAC (ID#: _____) Keeseey Boyd	Amount of contribution (\$) 700.00
	Contributor address; City; State; Zip Code 3157 Red Bluff Rd. San Angelo Tx 76904	
Principal occupation / Job title (See Instructions) doctor		Employer (See Instructions) Shannon
Date 05/05/2022	Full name of contributor out-of-state PAC (ID#: _____) Mike Boyd	Amount of contribution (\$) 250.00
	Contributor address; City; State; Zip Code 6517 Green Oaks San Angelo Tx 76904	
Principal occupation / Job title (See Instructions) Banking		Employer (See Instructions) retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Todd Kolls		3 Filer ID (Ethics Commission Filers)
4 Date 05/06/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Walter & Cheryl Pfluger 6 Contributor address; City; State; Zip Code 1402 Grierson San Angelo Tx 76903	7 Amount of contribution (\$) 400.00
8 Principal occupation / Job title (See Instructions) ranching		9 Employer (See Instructions) self
Date 05/09/2022	Full name of contributor out-of-state PAC (ID#: _____) Peter Batjer Contributor address; City; State; Zip Code 6544 Spy Glass San Angelo Tx 76904	Amount of contribution (\$) 150.00
Principal occupation / Job title (See Instructions) Insurance		Employer (See Instructions) Trimble Batjer
Date 05/09/2022	Full name of contributor out-of-state PAC (ID#: _____) Steve & Polyanna Stevens Contributor address; City; State; Zip Code 3417 Knickerbocker Rd San Angelo Tx 76904	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self
Date 05/09/2022	Full name of contributor out-of-state PAC (ID#: _____) Marvin Hall Contributor address; City; State; Zip Code 3061 Champion Cir. San Angelo Tx 76904	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Todd Kolls		3 Filer ID (Ethics Commission Filers)
4 Date 05/09/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Lourell Sutliff 6 Contributor address; City; State; Zip Code 7151 Hollye Square Crt. Tyler Tx 75703	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) self
Date 05/09/2022	Full name of contributor out-of-state PAC (ID#: _____) George & Sande Harrison Contributor address; City; State; Zip Code 2033 Beaty Rd. San Angelo Tx 76904	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 05/09/2022	Full name of contributor out-of-state PAC (ID#: _____) Brett Schniers Contributor address; City; State; Zip Code 8185 Iron Horse Wall Tx 76957	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions) farmer		Employer (See Instructions) self
Date 05/10/2022	Full name of contributor out-of-state PAC (ID#: _____) Elizabeth Bengtsson Contributor address; City; State; Zip Code 5606 King Mill Cir. San Angelo Tx 76904	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

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2 FILER NAME Todd Kolls		3 Filer ID (Ethics Commission Filers)
4 Date 05/11/2022	5 Full name of contributor Mlcah & Brandi Tyner out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 3518 Silver Spur San Angelo Tx 76904	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) SAISD
Date 05/11/2022	Full name of contributor Martha Sue Oliver out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 3121 Oak Mountain San Angelo Tx 76904	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) self
Date 05/12/2022	Full name of contributor Raymond Meza out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 3126 Oak Mountain San Angelo Tx 76904	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) owner		Employer (See Instructions) Twin Mountain Fence
Date 05/12/2022	Full name of contributor Mike Brown out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code 1122 W Twohig San Angelo Tx 76901	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Tom Green County
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Todd Kolls		3 Filer ID (Ethics Commission Filers)
4 Date 05/12/2022	5 Full name of contributor out-of-state PAC (ID#: _____) Ernie Mayer 6 Contributor address; City; State; Zip Code Po Box 1741 San Angelo Tx 76902	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions) rancher		9 Employer (See Instructions) self
Date 05/12/2022	Full name of contributor out-of-state PAC (ID#: _____) Jamin Burke Contributor address; City; State; Zip Code 4738 Royal Troon San Angelo Tx 76904	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Printing Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |
- The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Todd Kolls	3 Filer ID (Ethics Commission Filers)
4 Date 02/21/2022	5 Payee name Mclaughlin Advertising	
6 Amount (\$) 2,881.83	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 02/28/2022	Payee name Pay Pal	
Amount (\$) 93.05	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Paypal Fees	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03/03/2022	Payee name Lip Balm Store	
Amount (\$) 149.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Lip Balm	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Todd Kolls	3 Filer ID (Ethics Commission Filers)
4 Date 04/21/2022	5 Payee name Mclaughlin Advertising	
6 Amount (\$) 9,161.88	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising expense	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/09/2022	Payee name Grape Creek Vol. fire Dept.	
Amount (\$) 150.00	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Space Rental	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 05/13/2022	Payee name Cactus Hotel	
Amount (\$) 300.00	Payee address; City; State; Zip Code 36 E. Twohig San Angelo Tx 76903	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Space Rental	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Todd Kolls	3 Filer ID (Ethics Commission Filers)
4 Date 05/13/2022	5 Payee name PayPal	
6 Amount (\$) 85.80	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) PayPal Fees	(b) Description
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED