

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 ACCOUNT # (Ethics Commission filers) 00062641	2 PAGE # 1 of 6				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Michael	MI	OFFICE USE ONLY			
	NICKNAME Mike	LAST Seiler	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 318 S. Silvershire Circle The Woodlands, TX 77381			Date Received			
				Date Hand-delivered or Date Postmarked			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Christopher	MI	Receipt #			
	NICKNAME Chris	LAST Denison	SUFFIX	Amount			
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 50 Palmiera The Woodlands, TX 77382			Date Processed			
				Date Imaged			
7 CAMPAIGN TREASURER PHONE	AREA CODE (281)	PHONE NUMBER 362-9123	EXTENSION				
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 \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)						
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
		11/12/2007		12/31/2007			
10 ELECTION	ELECTION DATE Month Day Year 03/04/2008		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special				
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known) District Judge District 435			
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	. . . Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. . .						
	Name						
	Address/PO Box; Apt. / Suite #; City; State; Zip Code						

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME Seiler, Michael (Mr.)

15 ACCOUNT # (Ethics Commission filers)
00062641

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

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

\$

2,700.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

0.00

4. **TOTAL POLITICAL EXPENDITURES**

\$

1,576.85

CONTRIBUTION BALANCE

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

\$

900.00

OUTSTANDING LOAN TOTALS

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

\$

0.00

18 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.

Michael T. Seiler

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

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 3/6	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 12/21/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Denison, Christopher (Mr.) 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation banker		10 Contributor's job title Senior Vice President-Residential Construction	
11 Contributor's employer / law firm Amegy Mortgage		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 12/20/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fabrick, Harriett (Ms.) Contributor address; City; State; Zip Code Spring, TX 77386	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) stuffed animals and books (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation author		Contributor's job title author	
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 12/03/2007	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seiler, Michael (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation attorney		Contributor's job title assistant district attorney	
Contributor's employer / law firm Montgomery County District Attorney's Office		Law firm of contributor's spouse (if any) Hope & Causey P.C.	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 4/6
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date 12/12/2007	5 Payee name Montgomery County Republican Party 6 Payee address; City; State; Zip Code 310 Collins Street Conroe, TX 77301	7 Amount (\$) \$1,500.00
8 Purpose of payment (See instructions regarding type of information required.) filing fee (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 5/6

2 FILER NAME Seiler, Michael (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00062641

4 Date	5 Payee name U.S. Postal Service	8 Amount (\$)
12/01/2007	6 Payee address; City; State; Zip Code 10800 Gosling The Woodlands, TX 77381	\$42.00
	7 Purpose of expenditure (See instructions regarding type of information required.) post office box (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name U.S. Postal Service	Amount (\$)
12/26/2007	Payee address; City; State; Zip Code 10800 Gosling The Woodlands, TX 77381	\$34.85
	Purpose of expenditure (See instructions regarding type of information required.) postage stamps (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input type="checkbox"/> Reimbursement from political contributions intended

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 6/6

2 FILER NAME Seiler, Michael (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00062641

<p>4 Date</p> <p>12/17/2007</p>	<p>5 Payee name Children's Protective Services</p> <p>.....</p> <p>6 Payee address; City; State; Zip Code 2017 N. Frazier Conroe, TX 77301</p>	<p>8 Amount (\$)</p> <p>\$300.00</p>
<p>7 Purpose of expenditure (See instructions regarding type of information required.) charity</p>		

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 ACCOUNT # (Ethics Commission filers) 00062641	2 PAGE # 1 of 6	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Michael	MI	OFFICE USE ONLY
	NICKNAME Mike	LAST Seiler	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 318 S. Silvershire Circle The Woodlands, TX 77381			Date Received
				Date Hand-delivered or Date Postmarked
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Christopher	MI	Receipt #
	NICKNAME Chris	LAST Denison	SUFFIX	Amount
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 50 Palmiera The Woodlands, TX 77382			
7 CAMPAIGN TREASURER PHONE	AREA CODE (281)	PHONE NUMBER 362-9123	EXTENSION	
8 REPORT TYPE	<input type="checkbox"/> January 15	<input checked="" 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 \$500 limit	<input type="checkbox"/> Final report (Attach C/OH - FR)
9 PERIOD COVERED	Month	Day	Year	THROUGH
		01/01/2008	01/24/2008	
10 ELECTION	ELECTION DATE Month Day Year 03/04/2008		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) District Judge District 435	
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	. . . Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. . .			
	Name			
	Address/PO Box; Apt. / Suite #; City; State; Zip Code			

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME Seiler, Michael (Mr.)

15 ACCOUNT # (Ethics Commission filers)
00062641

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

50.00

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

\$

3,012.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

50.00

4. **TOTAL POLITICAL EXPENDITURES**

\$

2,450.00

CONTRIBUTION BALANCE

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

\$

8,900.20

OUTSTANDING LOAN TOTALS

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

\$

0.00

18 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.

Michael Seiler

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

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 3/6	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 01/22/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Offices of Atkinson & Associates 6 Contributor address; City; State; Zip Code Conroe, TX 77391	7 Amount of contribution (\$) \$1,500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation		10 Contributor's job title	
11 Contributor's employer / law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 01/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Offices of Bennie D. Rush Contributor address; City; State; Zip Code Huntsville, TX 77340	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
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 01/11/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Offices of Jeremy S. Dishongh Contributor address; City; State; Zip Code Conroe, TX 77391	Amount of contribution (\$) \$162.00	In-kind contribution description (if applicable) postage for mailing
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)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.

1 PAGE #
Schedule: 2/2 Report: 4/6

2 FILER NAME Seiler, Michael (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00062641

4 Date 01/11/2008
5 Full name of contributor out-of-state PAC (ID# _____)
Law Offices of Jeremy S. Dishongh

7 Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
Conroe, TX 77391

\$700.00

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation

10 Contributor's job title

11 Contributor's employer / law firm

12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date 01/11/2008
Full name of contributor out-of-state PAC (ID# _____)
Mackintosh, Hartley (Mr.)

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
The Woodlands, TX 77381

\$100.00

(If travel outside of Texas, complete Schedule T)

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)

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 5/6
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date 01/14/2008	5 Payee name Children's Safe Harbor 6 Payee address; City; State; Zip Code 412 W. Lewis Avenue Conroe, TX 77301	7 Amount (\$) \$200.00
8 Purpose of payment (See instructions regarding type of information required.) donation of books and stuffed animals (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 6/6

2 FILER NAME Seiler, Michael (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00062641

4 Date 01/17/2008	5 Payee name Minuteman Press Westchase	8 Amount (\$) \$2,000.00
	6 Payee address; City; State; Zip Code 10300 Westoffice Suite 100 Houston, TX 77042	
	7 Purpose of expenditure (See instructions regarding type of information required.) printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input type="checkbox"/> Reimbursement from political contributions intended
Date 01/04/2008	Payee name Morgan, Syble (Mrs.)	Amount (\$) \$200.00
	Payee address; City; State; Zip Code 19225 Pickering Road Conroe, TX 77302	
	Purpose of expenditure (See instructions regarding type of information required.) clerical work (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input type="checkbox"/> Reimbursement from political contributions intended

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 ACCOUNT # (Ethics Commission filers) 00062641	2 PAGE # 1 of 20				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Michael	MI	OFFICE USE ONLY			
	NICKNAME Mike	LAST Seiler	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 318 S. Silvershire Circle The Woodlands, TX 77381			Date Received			
				Date Hand-delivered or Date Postmarked			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Christopher	MI	Receipt #			
	NICKNAME Chris	LAST Denison	SUFFIX	Amount			
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 50 Palmiera The Woodlands, TX 77382			Date Processed			
				Date Imaged			
7 CAMPAIGN TREASURER PHONE	AREA CODE (281)	PHONE NUMBER 362-9123	EXTENSION				
8 REPORT TYPE	<input 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)						
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
		01/25/2008				02/23/2008	
10 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE					
03/04/2008		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special					
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) District Judge				
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	. . . Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. . .						
	Name						
	Address/PO Box; Apt. / Suite #; City; State; Zip Code						

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME Seiler, Michael (Mr.)

15 ACCOUNT # (Ethics Commission filers)
00062641

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

50.00

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

\$

13,242.94

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

0.00

4. **TOTAL POLITICAL EXPENDITURES**

\$

23,511.45

CONTRIBUTION BALANCE

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

\$

4,185.44

OUTSTANDING LOAN TOTALS

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

\$

0.00

18 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.

Mike Seiler

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

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G U I D E explains how to complete this form.		1 PAGE # Schedule: 1/11 Report: 3/20	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 02/01/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Behler, William (Mr.) 6 Contributor address; City; State; Zip Code The Woodlands, TX 77380	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation attorney		10 Contributor's job title attorney	
11 Contributor's employer / law firm Bill Behler & Associates P.C.		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 02/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bremyer, John (Mr.) Contributor address; City; State; Zip Code McPherson, KS 67460	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation attorney		Contributor's job title attorney	
Contributor's employer / law firm Bremyer & Wise		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 02/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burgess, Ray (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation attorney		Contributor's job title attorney	
Contributor's employer / law firm Hope & Causey P.C.		Law firm of contributor's spouse (if any) Haynes & Boone	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 2/11 Report: 4/20	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 02/22/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cantrell, Tim (Mr.) 6 Contributor address; City; State; Zip Code Conroe, TX 77301	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation builder		10 Contributor's job title Builder	
11 Contributor's employer / law firm Cantrell Homes		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 01/29/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Caplin, Emily (Mrs.) Contributor address; City; State; Zip Code Sag Harbor, NY 11963	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
Contributor's principal occupation registered nurse		Contributor's job title registered nurse	
Contributor's employer / law firm none		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 02/21/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Causey, John (Mr.) Contributor address; City; State; Zip Code Conroe, TX 77303	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable)
Contributor's principal occupation attorney		Contributor's job title president	
Contributor's employer / law firm Hope & Causey P.C.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 3/11 Report: 5/20	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 02/19/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cockrell, Fletcher (Mr.) 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation attorney		10 Contributor's job title attorney	
11 Contributor's employer / law firm Smith & Hassler		12 Law firm of contributor's spouse (if any) Codilis & Stawiariski P.C.	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 02/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Criaco & Associates Contributor address; City; State; Zip Code Houston, TX 77060	Amount of contribution (\$) \$1,250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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 02/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Doutel, Carol (Ms.) Contributor address; City; State; Zip Code The Woodlands, TX 77384	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation administrator		Contributor's job title administrator	
Contributor's employer / law firm Saint Anthony of Padua		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 4/11 Report: 6/20	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 02/06/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ferester, Beth (Mrs.) 6 Contributor address; City; State; Zip Code The Woodlands, TX 77380	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation realtor		10 Contributor's job title realtor	
11 Contributor's employer / law firm Coldwell Banker		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 01/28/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fruge, Shane (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation insurance sales		Contributor's job title personal insurance sales	
Contributor's employer / law firm Northwestern Mutual Financial Network		Law firm of contributor's spouse (if any) Winstead Sechrest & Minick	
If contributor is a child, law firm of parent(s) (if any)			
Date 02/05/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grossman & Waldman L.L.P. Contributor address; City; State; Zip Code Humble, TX 77338-3504	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
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)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G U I D E explains how to complete this form.		1 PAGE # Schedule: 5/11 Report: 7/20	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 02/14/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) H. Tom Shipp & Associates P.C. 6 Contributor address; City; State; Zip Code Humble, TX 77338	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation		10 Contributor's job title	
11 Contributor's employer / law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 02/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harrison, William (Mr.) Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation attorney		Contributor's job title attorney	
Contributor's employer / law firm LaBella & Associates		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 02/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holder, Patricia (Mrs.) Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation legal assistant		Contributor's job title legal assistant	
Contributor's employer / law firm Hope & Causey P.C.		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 6/11 Report: 8/20	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 01/29/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hope & Causey P.C. 6 Contributor address; City; State; Zip Code Conroe, TX 77301	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation		10 Contributor's job title	
11 Contributor's employer / law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 02/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hope & Causey P.C. Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of contribution (\$) \$865.27	In-kind contribution description (if applicable) food for fundraiser (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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 02/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) LaBella, Robin (Mrs.) Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation None		Contributor's job title None	
Contributor's employer / law firm None		Law firm of contributor's spouse (if any) Labella & Associates	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 7/11 Report: 9/20	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 02/19/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lanier, Robert (Mr.) 6 Contributor address; City; State; Zip Code The Woodlands, TX 77380	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation real estate		10 Contributor's job title real estate	
11 Contributor's employer / law firm Hailey Sadler Properties		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 02/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McMahon, Jamice (Mrs.) Contributor address; City; State; Zip Code Willis, TX 77318	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation vice president of operations		Contributor's job title vice president of operations	
Contributor's employer / law firm North American Metals		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 02/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, J.R. (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation tax assessor/collector		Contributor's job title tax assessor/collector	
Contributor's employer / law firm Montgomery County		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 8/11 Report: 10/20	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 01/29/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Otroszko, Anne (Mrs.) 6 Contributor address; City; State; Zip Code Olathe, KS 66062	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation high school math teacher		10 Contributor's job title math teacher	
11 Contributor's employer / law firm Olathe School District		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 02/01/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, John (Mr.) Contributor address; City; State; Zip Code Montgomery, TX 77356	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation attorney		Contributor's job title attorney	
Contributor's employer / law firm LaBella & Associates		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 02/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rose, Michael (Mrs.) Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation Board of Directors		Contributor's job title Board of Directors	
Contributor's employer / law firm Frontier Oil Corporation		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 9/11 Report: 11/20	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 02/04/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schrader, Harvey (Mr.) 6 Contributor address; City; State; Zip Code The Woodlands, TX 77380	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation insurance agent		10 Contributor's job title insurance agent	
11 Contributor's employer / law firm State Farm Insurance		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 01/29/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Seiler, William Jr. (Mr.) Contributor address; City; State; Zip Code McPherson, KS 67460	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation general counsel and chief of staff		Contributor's job title general counsel and chief of staff	
Contributor's employer / law firm Viega LLC		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 02/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Starzyk, Michael (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation attorney		Contributor's job title attorney	
Contributor's employer / law firm Starzyk & Associates		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 10/11 Report: 12/20	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 02/13/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Starzyk & Associates 6 Contributor address; City; State; Zip Code The Woodlands, TX 77380	7 Amount of contribution (\$) \$527.67	8 In-kind contribution description (if applicable) food for fundraising event
9 Contributor's principal occupation		10 Contributor's job title	
11 Contributor's employer / law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 01/29/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sumrall, Brice (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor's principal occupation commercial insurance executive		Contributor's job title commercial insurance executive	
Contributor's employer / law firm Hilb Rogall & Hobbs		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 02/19/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vertrees, Dan (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor's principal occupation vice president of alliances		Contributor's job title vice president of alliances	
Contributor's employer / law firm Hewlett Packard		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.

1 PAGE #
Schedule: 11/11 Report: 13/20

2 FILER NAME Seiler, Michael (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00062641

4 Date

02/18/2008

5 Full name of contributor out-of-state PAC (ID# _____)
Volke, Janell (Mrs.)

6 Contributor address; City; State; Zip Code

The Woodlands, TX 77381

7 Amount of contribution (\$)

\$150.00

8 In-kind contribution description (if applicable)
food for party

(If travel outside of Texas, complete Schedule T)

9 Contributor's principal occupation
None

10 Contributor's job title
registered nurse

11 Contributor's employer / law firm
None

12 Law firm of contributor's spouse (if any)

13 If contributor is a child, law firm of parent(s) (if any)

Date

02/19/2008

Full name of contributor out-of-state PAC (ID# _____)
Whisenant, Thad (Mr.)

Contributor address; City; State; Zip Code

The Woodlands, TX 77382

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor's principal occupation
attorney

Contributor's job title
attorney

Contributor's employer / law firm
Whisenant & Associates

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 14/20
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date 02/19/2008	5 Payee name Carlton Woods Country Club 6 Payee address; City; State; Zip Code 1 Carlton Woods Drive The Woodlands, TX 77382	7 Amount (\$) \$1,500.00
8 Purpose of payment (See instructions regarding type of information required.) venue and food for fundraiser (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 02/08/2008	Payee name Denison, Chris (Mr.) Payee address; City; State; Zip Code 50 S. Palmiera Circle The Woodlands, TX 77382	Amount (\$) \$421.76
Purpose of payment (See instructions regarding type of information required.) invitations for fundraiser (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 02/15/2008	Payee name Minuteman Press Westchase Payee address; City; State; Zip Code 10300 Westoffice Suite 100 Houston, TX 77042	Amount (\$) \$9,000.00
Purpose of payment (See instructions regarding type of information required.) printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 01/30/2008	Payee name Montgomery County Builders and Developers Payee address; City; State; Zip Code 9511 West Sam Houston Parkway Houston, TX 77064	Amount (\$) \$60.00
Purpose of payment (See instructions regarding type of information required.) lunch (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/2 Report: 15/20
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date 02/05/2008	5 Payee name U.S. Postal Service 6 Payee address; City; State; Zip Code 10800 Gosling The Woodlands, TX 77381	7 Amount (\$) \$123.00
8 Purpose of payment (See instructions regarding type of information required.) stamps (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/5 Report: 16/20
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date	5 Payee name Airbrush Images	8 Amount (\$) \$649.50
02/18/2008	6 Payee address; City; State; Zip Code 851 N FM 3083 East Conroe, TX 77303	
7 Purpose of expenditure (See instructions regarding type of information required.) billboard vinyl (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Date	Payee name Conroe Courier	Amount (\$) \$283.50
01/30/2008	Payee address; City; State; Zip Code 523 North Sam Houston Parkway East Houston, TX 77060	
Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Date	Payee name Conroe Courier	Amount (\$) \$283.50
01/30/2008	Payee address; City; State; Zip Code 523 North Sam Houston Parkway East Houston, TX 77060	
Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Date	Payee name Conroe Courier	Amount (\$) \$875.00
02/21/2008	Payee address; City; State; Zip Code 523 North Sam Houston Parkway East Houston, TX 77060	
Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Date	Payee name Conroe Courier	Amount (\$) \$1,139.20
02/21/2008	Payee address; City; State; Zip Code 523 North Sam Houston Parkway East Houston, TX 77060	
Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/5 Report: 17/20
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date	5 Payee name Conroe Courier	8 Amount (\$)
02/21/2008	6 Payee address; City; State; Zip Code 523 North Sam Houston Parkway East Houston, TX 77060	\$594.72
	7 Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Conroe Courier	Amount (\$)
02/21/2008	Payee address; City; State; Zip Code 523 North Sam Houston Parkway East Houston, TX 77060	\$625.00
	Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name HLS&R	Amount (\$)
02/01/2008	Payee address; City; State; Zip Code P.O. Box 20070 Houston, TX 77225	\$50.00
	Purpose of expenditure (See instructions regarding type of information required.) entry fee for Go Texan parade (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Lowe's	Amount (\$)
02/08/2008	Payee address; City; State; Zip Code 3052 College Park Drive Conroe, TX 77384	\$246.11
	Purpose of expenditure (See instructions regarding type of information required.) sign supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Lowe's	Amount (\$)
02/15/2008	Payee address; City; State; Zip Code 3052 College Park Drive Conroe, TX 77384	\$91.15
	Purpose of expenditure (See instructions regarding type of information required.) sign supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/5 Report: 18/20
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date	5 Payee name Minuteman Press Westchase 6 Payee address; City; State; Zip Code 10300 Westoffice Suite 100 Houston, TX 77042 7 Purpose of expenditure (See instructions regarding type of information required.) printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 Amount (\$) \$3,000.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Montgomery County Republican Party Payee address; City; State; Zip Code 310 Collins Street Conroe, TX 77301 Purpose of expenditure (See instructions regarding type of information required.) CD with names and addresses of Republican voters (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$250.00 <input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Montgomery County Republican Women Payee address; City; State; Zip Code P.O. Box 1766 Conroe, TX 77305 Purpose of expenditure (See instructions regarding type of information required.) political ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$75.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name North Shore Republican Woman PAC Payee address; City; State; Zip Code P.O. Box 524 Willis, TX 77378 Purpose of expenditure (See instructions regarding type of information required.) advertisement (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$60.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name North Shore Republican Woman PAC Payee address; City; State; Zip Code P.O. Box 524 Willis, TX 77378 Purpose of expenditure (See instructions regarding type of information required.) advertisement (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/5 Report: 19/20
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date	5 Payee name Party City North 320	8 Amount (\$)
02/23/2008	6 Payee address; City; State; Zip Code 19189 I45 South Shenandoah, TX 77365	\$109.93
	7 Purpose of expenditure (See instructions regarding type of information required.) balloons inflated for parade (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name San Antonio Real Estate Company Ltd.	Amount (\$)
02/06/2008	Payee address; City; State; Zip Code 15450 Walden Road Montgomery, TX 77356	\$1,750.00
	Purpose of expenditure (See instructions regarding type of information required.) billboard (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Santos, Joe (Mr.)	Amount (\$)
02/23/2008	Payee address; City; State; Zip Code 19002 Summer Anne Drive Humble, TX 77346	\$250.00
	Purpose of expenditure (See instructions regarding type of information required.) billboard installation (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name South Montgomery County Woodlands Chamber of Commerce	Amount (\$)
02/11/2008	Payee address; City; State; Zip Code 1400 Woodloch Forest Drive Suite 300 The Woodlands, TX 77380	\$500.00
	Purpose of expenditure (See instructions regarding type of information required.) sponsor for Meet the Candidates: Whistle STop Tour Luncheon (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name T Shirts Ink and Press	Amount (\$)
02/11/2008	Payee address; City; State; Zip Code 22820 Interstate 45 North Suite 3 Spring, TX 77373	\$1,347.98
	Purpose of expenditure (See instructions regarding type of information required.) campaign t-shirts (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/5 Report: 20/20

2 FILER NAME Seiler, Michael (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00062641

4 Date 02/11/2008	5 Payee name Windy Balloon Company	8 Amount (\$) \$126.10
	6 Payee address; City; State; Zip Code 1335 W. 134th Street Gardenia, CA 90247	
7 Purpose of expenditure (See instructions regarding type of information required.) campaign balloons (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME Seiler, Michael (Mr.)	15 ACCOUNT # (Ethics Commission filers) 00062641
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	.. This box is for notice of political expenditures 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. ..													
<table style="width:100%"> <tr> <td style="width:20%"><input type="checkbox"/> GENERAL</td> <td>COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td></td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	<input type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> SPECIFIC		COMMITTEE ADDRESS			COMMITTEE CAMPAIGN TREASURER NAME			COMMITTEE CAMPAIGN TREASURER ADDRESS		
	<input type="checkbox"/> GENERAL	COMMITTEE TYPE	COMMITTEE NAME											
	<input type="checkbox"/> SPECIFIC		COMMITTEE ADDRESS											
			COMMITTEE CAMPAIGN TREASURER NAME											
		COMMITTEE CAMPAIGN TREASURER ADDRESS												

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	188.10
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,563.10
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	40.00
	4. TOTAL POLITICAL EXPENDITURES	\$	13,704.63
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	850.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

18 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.

Michael T. Seiler

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 Print name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 1/6 Report: 3/10	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 02/28/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bluestein, David (Mr.) 6 Contributor address; City; State; Zip Code Montgomery, TX 77356	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation attorney		10 Contributor's job title First Assistant	
11 Contributor's employer / law firm Montgomery County District Attorney's Office		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 03/18/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duck, Charles (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation controller		Contributor's job title controller	
Contributor's employer / law firm Archdiocese of Galveston-Houston		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 03/26/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duckworth & Ray Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 2/6 Report: 4/10	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 02/26/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grice, Chris (Mr.) 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation banker		10 Contributor's job title Senior Vice President and Private Banking Manager	
11 Contributor's employer / law firm Amegy Bank of Texas		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 02/26/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gustafson, Rick (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation insurance		Contributor's job title insurance	
Contributor's employer / law firm Travelers		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 03/18/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) KDM Property Acquisitions Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 3/6 Report: 5/10	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 03/26/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Knittig, Tim (Mr.) 6 Contributor address; City; State; Zip Code The Woodlands, TX 77380	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation unknown		10 Contributor's job title unknown	
11 Contributor's employer / law firm unknown		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 03/18/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Office of Bill Pattillo Contributor address; City; State; Zip Code Conroe, TX 77301	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
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 03/18/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Offices of Rocket Rosen Contributor address; City; State; Zip Code Houston, TX 77002	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
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)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 4/6 Report: 6/10	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 03/18/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Offices of William S. Featherston 6 Contributor address; City; State; Zip Code Houston, TX 77007	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation		10 Contributor's job title	
11 Contributor's employer / law firm		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 03/06/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matthew J.M. Prebeg P.C. Contributor address; City; State; Zip Code Houston, TX 77706	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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 03/16/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miggins, Penelope (Mrs.) Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation doctor		Contributor's job title anesthesiologist	
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)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G U I D E explains how to complete this form.		1 PAGE # Schedule: 5/6 Report: 7/10	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 03/18/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Quijano, Walter (Mr.) 6 Contributor address; City; State; Zip Code Conroe, TX 77301	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation psychologist		10 Contributor's job title psychologist	
11 Contributor's employer / law firm self-employed		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 03/18/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Renke, Steve (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77381	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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 02/26/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schuenaman, Fred (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G U I D E explains how to complete this form.		1 PAGE # Schedule: 6/6 Report: 8/10	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 03/06/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vaughan, Jill (Ms.) 6 Contributor address; City; State; Zip Code Montgomery, TX 77356	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Contributor's principal occupation banker		10 Contributor's job title Commercial Lending Manager	
11 Contributor's employer / law firm Amegy Bank of Texas		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 02/26/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Woods, Cristen (Mrs.) Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
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 03/18/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yollick Law Firm P.L.L.C. Contributor address; City; State; Zip Code The Woodlands, TX 77387	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable)
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)			

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 9/10
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date 03/28/2008	5 Payee name Minuteman Press Westchase 6 Payee address; City; State; Zip Code 10300 Westoffice Suite 100 Houston, TX 77042	7 Amount (\$) \$7,071.50
8 Purpose of payment (See instructions regarding type of information required.) printing/postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 10/10
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date	5 Payee name Home Depot	8 Amount (\$)
03/25/2008	6 Payee address; City; State; Zip Code 19103 Interstate 45 Conroe, TX 77385	\$135.13
	7 Purpose of expenditure (See instructions regarding type of information required.) stakes (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Minuteman Press Westchase	Amount (\$)
03/17/2008	Payee address; City; State; Zip Code 10300 Westoffice Suite 100 Houston, TX 77042	\$6,000.00
	Purpose of expenditure (See instructions regarding type of information required.) printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Montgomery County Republican Party	Amount (\$)
03/21/2008	Payee address; City; State; Zip Code 310 Collins Street Conroe, TX 77301	\$458.00
	Purpose of expenditure (See instructions regarding type of information required.) CD/list with names and addresses of Republican voters (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

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

14 C/OH NAME Seiler, Michael (Mr.)

15 ACCOUNT # (Ethics Commission filers)
00062641

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

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

\$

1,345.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

55.00

4. **TOTAL POLITICAL EXPENDITURES**

\$

15,455.50

CONTRIBUTION BALANCE

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

\$

530.00

OUTSTANDING LOAN TOTALS

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

\$

0.00

18 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.

Michael T. Seiler

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

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G UIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 3/8	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 04/01/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bouthillette, Max (Mr.) 6 Contributor address; City; State; Zip Code The Woodlands, TX 77381	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation attorney		10 Contributor's job title Chief Compliance Officer	
11 Contributor's employer / law firm BJ Services		12 Law firm of contributor's spouse (if any) Friend & Associates	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 04/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gelfman, Gary (Mr.) Contributor address; City; State; Zip Code The Woodlands, TX 77382	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation attorney		Contributor's job title attorney	
Contributor's employer / law firm Gelfman & Associates		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			
Date 06/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McMahon, Jamice (Mrs.) Contributor address; City; State; Zip Code Willis, TX 77318	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Contributor's principal occupation vice president of operations		Contributor's job title vice president of operations	
Contributor's employer / law firm North American Metals		Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

SCHEDULE A (J)

The I NSTRUCTION G U I D E explains how to complete this form.		1 PAGE # Schedule: 2/2 Report: 4/8	
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641	
4 Date 04/30/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mitchell, Robin (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77008	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Contributor's principal occupation attorney		10 Contributor's job title attorney	
11 Contributor's employer / law firm Law Offices of Robin Mitchell		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			
Date 04/15/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Montgomery County Conservative Coalition Contributor address; City; State; Zip Code Magnolia, TX 77355	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) printing/mailling on behalf endorsing 4 candidates (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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 03/30/2008	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tough Law Firm PLLC Contributor address; City; State; Zip Code Spring, TX 77373	Amount of contribution (\$) \$620.00	In-kind contribution description (if applicable) postage and printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
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)			

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/3 Report: 5/8
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date	5 Payee name Armadillo Advertising	8 Amount (\$)
04/01/2008	6 Payee address; City; State; Zip Code 517 West Main Tomball, TX 77375	\$1,527.10
	7 Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Conroe Courier	Amount (\$)
03/31/2008	Payee address; City; State; Zip Code 523 North Sam Houston Parkway East Houston, TX 77060	\$817.00
	Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Conroe Courier	Amount (\$)
03/31/2008	Payee address; City; State; Zip Code 523 North Sam Houston Parkway East Houston, TX 77060	\$554.92
	Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Conroe Courier	Amount (\$)
03/31/2008	Payee address; City; State; Zip Code 523 North Sam Houston Parkway East Houston, TX 77060	\$682.18
	Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Conroe Courier	Amount (\$)
03/31/2008	Payee address; City; State; Zip Code 523 North Sam Houston Parkway East Houston, TX 77060	\$1,639.44
	Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/3 Report: 6/8
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date	5 Payee name Conroe Courier	8 Amount (\$)
03/31/2008	6 Payee address; City; State; Zip Code 523 North Sam Houston Parkway East Houston, TX 77060	\$567.00
	7 Purpose of expenditure (See instructions regarding type of information required.) newspaper ad (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name El Sol	Amount (\$)
04/13/2008	Payee address; City; State; Zip Code 519 Lilly Conroe, TX 77301	\$95.00
	Purpose of expenditure (See instructions regarding type of information required.) newspaper advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name El Sol	Amount (\$)
05/12/2008	Payee address; City; State; Zip Code 519 Lilly Conroe, TX 77301	\$90.00
	Purpose of expenditure (See instructions regarding type of information required.) newspaper advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Minuteman Press Westchase	Amount (\$)
05/25/2008	Payee address; City; State; Zip Code 10300 Westoffice Suite 100 Houston, TX 77042	\$7,099.05
	Purpose of expenditure (See instructions regarding type of information required.) printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Starzyk & Associates	Amount (\$)
04/13/2008	Payee address; City; State; Zip Code 25025 Grogans Mill Road Suite 300 The Woodlands, TX 77380	\$2,195.97
	Purpose of expenditure (See instructions regarding type of information required.) postage and printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/3 Report: 7/8
2 FILER NAME Seiler, Michael (Mr.)		3 ACCOUNT # (Ethics Commission filers) 00062641
4 Date	5 Payee name U.S. Postal Service	8 Amount (\$) \$44.28
03/30/2008	6 Payee address; City; State; Zip Code 10800 Gosling The Woodlands, TX 77381	
7 Purpose of expenditure (See instructions regarding type of information required.) stamps (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name U.S. Postal Service	Amount (\$) \$44.28
03/30/2008	Payee address; City; State; Zip Code 10800 Gosling The Woodlands, TX 77381	
Purpose of expenditure (See instructions regarding type of information required.) stamps (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name U.S. Postal Service	Amount (\$) \$44.28
03/30/2008	Payee address; City; State; Zip Code 10800 Gosling The Woodlands, TX 77381	
Purpose of expenditure (See instructions regarding type of information required.) stamps (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

ASSETS VALUED AT \$500 OR MORE

SCHEDULE M

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 8/8

2 FILER NAME Seiler, Michael (Mr.)

3 ACCOUNT # (Ethics Commission filers)
00062641

4 Description of Asset
\$500.00 worth of stuffed animals and books