

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

14 C/OH NAME Michael R "Mike" Southerland, Sr **15 Filer ID (Ethics Commission Filers)**

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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ none
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,650.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ none
	4. TOTAL POLITICAL EXPENDITURES	\$ 9,494.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,786.60
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,787.87

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.

Sarah Alger
130438418
Notary Public, State of Texas
My Commission Expires
November 12 2019

M. Southerland

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Michael R "Mike" Southerland, Sr, this the 30th day of October, 2017, to certify which, witness my hand and seal of office.

Sarah Alger

Signature of officer administering oath

Sarah Holleman

Printed name of officer administering oath

Records Coordinator

Title of officer administering oath

SUBTOTALS - C/OH

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

19 FILER NAME Michael R "Mike" Southerland, Sr		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 8,650.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input type="checkbox"/> SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 9,494.31
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

File: 1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 6
2 FILER NAME Michael R "Mike" Southerland, Sr		3 Filer ID (Ethics Commission Filers)
4 Date [REDACTED] <i>MS</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) [REDACTED] <i>MS</i>	7 Amount of contribution (\$) [REDACTED] <i>MS</i>
6 Contributor address; City; State; Zip Code [REDACTED] <i>MS</i>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/4/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry Anderson and Nancy Rose Eder	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 728 Garden Acres Blvd Bryan TX 77802		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/3/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) P L Cleere	Amount of contribution (\$) \$10.00
Contributor address; City; State; Zip Code PO BOX 2698 College Station TX 77841		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/4/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert and Linda Stipanovic	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1103 Esther Blvd Bryan TX 77802		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

4/11

2

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
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2 FILER NAME Michael R "Mike" Southerland, Sr	3 Filer ID (Ethics Commission Filers)
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4 Date 10/4/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger and Martha Smith	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code PO Box 6177 Bryan TX 77802		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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Date 10/4/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee Roy and Carolyn Johnson	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 1305 Barak Bryan TX 77802		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 10/4/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janis Atkins	Amount of contribution (\$) \$20.00
Contributor address; City; State; Zip Code 745 Oak Ln Bryan TX 77802		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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Date 10/4/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Oliver	Amount of contribution (\$) \$120.00
Contributor address; City; State; Zip Code 207 Fairway Bryan TX 77803		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

5/11

3

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME

Michael R "Mike" Southerland, Sr

3 Filer ID (Ethics Commission Filers)

4 Date

10/4/2017

5 Full name of contributor

out-of-state PAC (ID#: _____)

Roger Sheridan

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City; State; Zip Code

806 Edgewood Dr Bryan TX 77802

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

10/4/2017

Full name of contributor

out-of-state PAC (ID#: _____)

William Kuykendall Jr

Amount of contribution (\$)

\$200.00

Contributor address;

City; State; Zip Code

1205 Sul Ross Dr Bryan TX 77802

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/4/2017

Full name of contributor

out-of-state PAC (ID#: _____)

Patrick Giammalva

Amount of contribution (\$)

\$100.00

Contributor address;

City; State; Zip Code

213 Faieway Dr Bryan TX 77801

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/6/2017

Full name of contributor

out-of-state PAC (ID#: _____)

William Bill Oliver

Amount of contribution (\$)

\$1000.00

Contributor address;

City; State; Zip Code

PO Box 625 Bryan TX 77806

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

6/11

6

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME
Michael R "Mike" Southerland, Sr

3 Filer ID (Ethics Commission Filers)

4 Date
10/9/2017

5 Full name of contributor out-of-state PAC (ID#: _____)
Thomas and Dianne Hilde

7 Amount of contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code
2515 Oak Cir Bryan TX 77802

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
10/11/17

Full name of contributor out-of-state PAC (ID#: _____)
John and Frances Smith

Amount of contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
2517 Briarwood Cr Bryan TX 77802

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/13/2017

Full name of contributor out-of-state PAC (ID#: _____)
John Epstein

Amount of contribution (\$)
\$5,000.00

Contributor address; City; State; Zip Code
11239 Oak Lake Rd Bryan TX 77808

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
10/13/17

Full name of contributor out-of-state PAC (ID#: _____)
Robert and Catherine Van Brunt

Amount of contribution (\$)
\$350.00

Contributor address; City; State; Zip Code
310 N Texas Av Bryan TX 77803

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

7/11

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME Michael R "Mike" Southerland, Sr		3 Filer ID (Ethics Commission Filers)
4 Date 10/4/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank and Patricia Dworaczyk 6 Contributor address; City; State; Zip Code 3123 Peterson Way Bryan TX 77802	7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/4/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patricia Dworaczyk Contributor address; City; State; Zip Code 3123 Peterson Way Bryan TX 77802	Amount of contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Lero Contributor address; City; State; Zip Code 4421 Nottingham Bryan TX 77802	Amount of contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William A Broome Contributor address; City; State; Zip Code 2307 Oxford St Bryan TX 77802	Amount of contribution (\$) \$300.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

8/11

8

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 FILER NAME
Michael R "Mike" Southerland, Sr

3 Filer ID (Ethics Commission Filers)

4 Date
10/19/2017

5 Full name of contributor out-of-state PAC (ID#: _____)

Karen Hall

7 Amount of contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code

6111 SH 21 E Bryan TX 77803

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

10/25/2017

EA Lyne

\$50.00

Contributor address; City; State; Zip Code

808 Dogwood Bryan TX 77803

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

10/27/2017

Janis Adkins

\$20.00

Contributor address; City; State; Zip Code

705 Oak Ln Bryan TX 77802

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

9/11

file: 1

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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	Polling 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	2 FILER NAME Michael R "Mike" Southerland, Sr	3 Filer ID (Ethics Commission Filers)
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4 Date 10/13/2017	5 Payee name Bryan Broadcasting
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6 Amount (\$) \$2,046.00	7 Payee address; City; State; Zip Code 2700 Earl Rudder FWY S #5000, College Station, TX 77845
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Ad Expense Radio	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/16/2017	Payee name KBTX
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Amount (\$) \$4,260.00	Payee address; City; State; Zip Code 4141 E 29th St Bryan TX 77802
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense - TV	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/18/2017	Payee name Advertising Mail Corp Inc, dba ADMAIL
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Amount (\$) \$2,060.54	Payee address; City; State; Zip Code 427 Dellwood St Bryan TX 77801
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense - card mailing and printing	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

10/11

2

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Michael R "Mike" Southerland, Sr	3 Filer ID (Ethics Commission Filers)
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4 Date 10/24/2017	5 Payee name Bryan Broadcasting
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 2700 Earl Rudder FWY #5000, College Station TX 77845
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Ad Expense - Radio	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/19/2017	Payee name Prosperity Bank
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Amount (\$) \$10.00	Payee address; City; State; Zip Code 2807 S Texas Av Bryan TX 77802
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking - bank service charge	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10/27/2017	Payee name ADMAIL
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Amount (\$) \$1,017.77	Payee address; City; State; Zip Code 427 Dellwood Bryan TX 77801
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Ad Expense- card mailing and printing	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

11/11