

**JUDICIAL CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

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

15 C/OH NAME Olga Seelig **16 ACCOUNT # (Ethics Commission Filers)**

17 NOTICE FROM POLITICAL COMMITTEE(S)

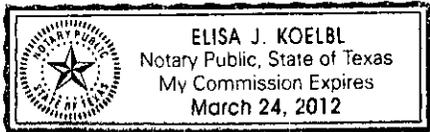
* This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required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

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

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 130.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$3,480.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 12.83
	4. TOTAL POLITICAL EXPENDITURES	\$12,291.02
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$16,901.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,000.00

19 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.



[Handwritten Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the 1 day of Feb, 20 10, to certify which, witness my hand and seal of office.

[Handwritten Signature]
Signature of officer administering oath

Elisa Koelbl
Print name of officer administering oath

Notary Public
Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

Schedule A (J)

Total Pages A (J)

Pg 1 of 6

FILER NAME

Seelig, Olga (Ms.)

Date	Full name of contributor	Amount of Contribution	In-kind
1/5/2010	Jana Ortega	\$200.00	

Contributor address: City, State, Zip Code
700 Lavaca St., Ste 1010, Austin, Tx. 78701

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Law Office of Janet Ortega

Contributor's job title

Attorney

Law firm of contributor's spouse (if any)

Date	Full name of contributor	Amount of Contribution	In-kind
1/4/2010	Clark Richards	\$300.00	

Contributor address: City, State, Zip Code
2104 Wright, Austin, Tx. 78704

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Richards Rodriguez & Skeith

Contributor's job title

Attorney

Law firm of contributor's spouse (if any)

Date	Full name of contributor	Amount of Contribution	In-kind
1/5/2010	Jerry Galow	\$250.00	

Contributor address: City, State, Zip Code
1204 Nueces, Austin, Tx. 78701

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Galow & Smith PC

Contributor's job title

Attorney

Law firm of contributor's spouse (if any)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

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FILER NAME

Seelig, Olga (Ms.)

Date	Full name of contributor	Amount of Contribution	In-kind
1/5/2010	Wade Russell	\$100.00	
	Contributor address: City, State, Zip Code 404 W 13th St, Austin, Tx. 78701		

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Wade Russell, Attorney at Law

Contributor's job title

Attorney

Law firm of contributor's spouse (if any)

Date	Full name of contributor	Amount of Contribution	In-kind
1/6/2010	Steven Margolin	\$500.00	
	Contributor address: City, State, Zip Code 5222 Burnet Rd, Ste 200, Austin, Tx. 78756		

Contributor's principal occupation

Doctor

Contributor's employer/law firm

Austin Family Care Center

Contributor's job title

Owner

Law firm of contributor's spouse (if any)

Date	Full name of contributor	Amount of Contribution	In-kind
1/13/2010	Chris Dorbandt	\$200.00	
	Contributor address: City, State, Zip Code 603 W 12th St, Austin, Tx. 78701		

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Chris Dorbandt & Assoc

Contributor's job title

Attorney

Law firm of contributor's spouse (if any)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

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FILER NAME

Seelig, Olga (Ms.)

Date	Full name of contributor	Amount of Contribution	In-kind
1/10/2010	Lewis Little, Jr	\$100.00	
	Contributor address: City, State, Zip Code 2525 Jarratt Ave, Austin, Tx. 78703		

Contributor's principal occupation

Retired

Contributor's employer/law firm

Contributor's job title

Law firm of contributor's spouse (if any)

Date	Full name of contributor	Amount of Contribution	In-kind
1/10/2010	Melanie Belt	\$250.00	
	Contributor address: City, State, Zip Code 2716 Barton Creek Blvd, #922, Austin, Tx. 78735		

Contributor's principal occupation

Doctor

Contributor's employer/law firm

Contributor's job title

Doctor

Law firm of contributor's spouse (if any)

Date	Full name of contributor	Amount of Contribution	In-kind
1/14/2010	Ray, Wood & Bonilla Attorneys at Law	\$250.00	
	Contributor address: City, State, Zip Code		

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Ray, Wood & Bonilla Attorneys at Law

Contributor's job title

Attorney

Law firm of contributor's spouse (if any)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

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FILER NAME

Seelig, Olga (Ms.)

Date	Full name of contributor	Amount of Contribution	In-kind
1/14/2010	Reymundo Rodriguez	\$100.00	

Contributor address: City, State, Zip Code
12327 Blue Water Dr, Austin, Tx. 78758

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Reymundo Rodriguez

Contributor's job title

Attorney

Law firm of contributor's spouse (if any)

Date	Full name of contributor	Amount of Contribution	In-kind
1/14/2010	Linda Von Quintos	\$150.00	

Contributor address: City, State, Zip Code
2303 Lear Lane, Austin, Tx. 78745

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Linda Von Quintos Attorney at Law

Contributor's job title

Attorney

Law firm of contributor's spouse (if any)

Date	Full name of contributor	Amount of Contribution	In-kind
1/15/2010	Michael Garbe	\$100.00	

Contributor address: City, State, Zip Code
805 East 44th Street, Austin, Tx. 78751

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Texas Workforce Commission

Contributor's job title

Hearing Officer

Law firm of contributor's spouse (if any)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

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FILER NAME

Seelig, Olga (Ms.)

Date	Full name of contributor	Amount of Contribution	In-kind
1/21/2010	John McKetta III	\$500.00	

Contributor address: City, State, Zip Code
4200 Park hollow Ct, Austin, Tx. 78746

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Graves Dougherty Hearon & Moody

Contributor's job title

Attorney

Law firm of contributor's spouse (if any)

Date	Full name of contributor	Amount of Contribution	In-kind
1/21/2010	Daniel Calamia	\$100.00	

Contributor address: City, State, Zip Code
812 San Antonio St, Austin, Tx. 78701

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Calamia Law Firm

Contributor's job title

Attorney

Law firm of contributor's spouse (if any)

Date	Full name of contributor	Amount of Contribution	In-kind
1/21/2010	Herbert Martinez	\$100.00	

Contributor address: City, State, Zip Code
4301 William Cannon Dr, Ste B-250, Austin, Tx. 78749

Contributor's principal occupation

Realtor

Contributor's employer/law firm

Herb Martinez Properties

Contributor's job title

President & CEO

Law firm of contributor's spouse (if any)

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS (JUDICIAL)**

Schedule A (J)

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FILER NAME

Seelig, Olga (Ms.)

Date	Full name of contributor	Amount of Contribution	In-kind
1/21/2010	Zeke DeRose III		\$150.00

Contributor address: City, State, Zip Code
26 Marganita Crescent, Austin, Tx. 78703

Contributor's principal occupation

Attorney

Contributor's employer/law firm

Vinson & Elkins

Contributor's job title

Attorney

Law firm of contributor's spouse (if any)

Baker Potts

Date	Full name of contributor	Amount of Contribution	In-kind

Contributor address: City, State, Zip Code

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

Date	Full name of contributor	Amount of Contribution	In-kind

Contributor address: City, State, Zip Code

Contributor's principal occupation

Contributor's job title

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

POLITICAL EXPENDITURES

Schedule F

Total Pages Sched F

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FILER NAME

Seelig, Olga (Ms.)

Date	Payee Name	Amount (\$)
1/1/2010	Piryx	\$498.90
	Payee address: City, State, Zip Code	
	401 W 15th St, Ste 520, Austin, Tx 78701	
Purpose of Payment		Direct expenditure to benefit C/OH
Merchant account fees		

Date	Payee Name	Amount (\$)
1/1/2010	Sean Foley	\$500.00
	Payee address: City, State, Zip Code	
	1712 Woodward St #111, Austin, Tx. 78704	
Purpose of Payment		Direct expenditure to benefit C/OH
Contract labor		

Date	Payee Name	Amount (\$)
1/1/2010	Alex Tucciarone	\$1,250.00
	Payee address: City, State, Zip Code	
	1730 Timber Ridge, #145, Austin, Tx. 78741	
Purpose of Payment		Direct expenditure to benefit C/OH
Contract labor		

Date	Payee Name	Amount (\$)
1/1/2010	Sandra Ramos	\$750.00
	Payee address: City, State, Zip Code	
	1309 Rosewood Ave, Austin, Tx. 78702	
Purpose of Payment		Direct expenditure to benefit C/OH
Fundraising consulting		

POLITICAL EXPENDITURES

Schedule F

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FILER NAME

Seelig, Olga (Ms.)

Date	Payee Name	Amount (\$)
1/1/2010	Sandra Ramos	\$375.00
	Payee address: City, State, Zip Code	
	1309 Rosewood Ave, Austin, Tx. 78702	
Purpose of Payment		Direct expenditure to benefit C/OH
Rent		

Date	Payee Name	Amount (\$)
1/1/2010	Travis County Democratic Party	\$750.00
	Payee address: City, State, Zip Code	
	1311 E 6th, Austin, Tx. 78701	
Purpose of Payment		Direct expenditure to benefit C/OH
Campaign filing dinner		

Date	Payee Name	Amount (\$)
1/4/2010	La Voz Newspaper	\$275.00
	Payee address: City, State, Zip Code	
	P.O. Box 19457, Austin, Tx. 78760	
Purpose of Payment		Direct expenditure to benefit C/OH
Advertising		

Date	Payee Name	Amount (\$)
1/6/2010	Net Victories	\$250.00
	Payee address: City, State, Zip Code	
	P.O. Box 5013, Austin, Tx. 78763	
Purpose of Payment		Direct expenditure to benefit C/OH
Website		

POLITICAL EXPENDITURES

Schedule F

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FILER NAME

Seelig, Olga (Ms.)

Date	Payee Name	Amount (\$)
1/6/2010	Austin Tejano Democrats	\$325.00
	Payee address: City, State, Zip Code	
	Austin, Tx.	
Purpose of Payment		Direct expenditure to benefit C/OH
Advertising		

Date	Payee Name	Amount (\$)
1/12/2010	Leland Beatty	\$2,500.00
	Payee address: City, State, Zip Code	
	1103 Upland St, Austin, Tx. 78741	
Purpose of Payment		Direct expenditure to benefit C/OH
Contract labor		

Date	Payee Name	Amount (\$)
1/15/2010	Worley Printing	\$384.29
	Payee address: City, State, Zip Code	
	3217 N IH 35, Austin, Tx. 78722	
Purpose of Payment		Direct expenditure to benefit C/OH
Printing		

Date	Payee Name	Amount (\$)
1/15/2010	Alex Tucciarone	\$850.00
	Payee address: City, State, Zip Code	
	1730 Timber Ridge, #145, Austin, Tx. 78741	
Purpose of Payment		Direct expenditure to benefit C/OH
Contract labor		

POLITICAL EXPENDITURES

Schedule F

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FILER NAME

Seelig, Olga (Ms.)

Date	Payee Name	Amount (\$)
1/15/2010	Austin Bar Foundation	\$250.00
	Payee address: City, State, Zip Code 816 Congress Ave, Ste 700, Austin, Tx. 78701	
Purpose of Payment Advertising		Direct expenditure to benefit C/OH

Date	Payee Name	Amount (\$)
1/16/2010	Delwin Goss	\$3,320.00
	Payee address: City, State, Zip Code 6410 Tonka St, Austin, Tx. 78741	
Purpose of Payment Contract labor		Direct expenditure to benefit C/OH

Date	Payee Name	Amount (\$)
	Payee address: City, State, Zip Code	
Purpose of Payment		Direct expenditure to benefit C/OH

Date	Payee Name	Amount (\$)
	Payee address: City, State, Zip Code	
Purpose of Payment		Direct expenditure to benefit C/OH