For help completing Form 2, please double-click the

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icon next to each line number.

1

1. (a) Name of Candidate (in full)				
Sean Eric Lee Seiber		<u>, , , , , , , , , , , , , , , , , , , </u>		
(b) Address (number and street) Check if address changed 5239. Arboles Drive Unit P		ess changed	2. Identification Number TBA	
(c) City, State, and ZIP Code			3. Is This New Amended	
Houston, TX, 77035			Statement 🗹 (N)	OR (A)
. Party Affiliation	5. Office Sought		trict of Candidate	
Repúblican	Congress	TX 18	- ما معرين فرود - معاني فرون و المراقع المراقع المراقع المراقع المراقع المراقع المراقع المراقع الم	
I hereby designate the following	DESIGNATION OF PR g named political committee as r		0040	election(s).
-	be filed with the appropriate of	fice listed in the instructions.		
(a) Name of Committee (in full)				
Sean Seibert for	Congress			
(b) Address (number and stree	t)			
PO Box 31758				
(c) City, State, and ZIP Codo			.8	
	1004			1012 JU
Houston, TX 77	231			<u> </u>
	DESIGNATION OF OT	THER AUTHORIZED	COMMITTEES	_
	·	int Fundraising Representativ	-	<b>5</b>
I hereby authorize the following	g named committee, which is NC	OT my principal campaign cor	mmittee, to receive and expend	funds on behall of my
candidacy.				····
NOTE: This designation should be filed with the principal campaign committee.				<b>0:</b> 0
(a) Name of Committee (in full	)			
	,			
		البرز بالان المراجع المراجع المراجع المراجع المراجع المراجع		
(b) Address (number and stree	rt) -		tadi kalenda ana ing manakan na manakan kana ing manakan na sa	
	()		i ali di mangan katang kikang kikang kikang katang katang katang kikang katang katang katang katang katang kata	
	rt) -			
(b) Address (number and stree	rt) -			
(b) Address (number and stree (c) City, State, and ZIP Code	•			
(b) Address (number and stree (c) City, State, and ZIP Code I certify that I hav	t) e examined this Statement and t	to the best of my knowledge a		complete.
(b) Address (number and stree (c) City, State, and ZIP Code I certify that I hav	•	to the best of my knowledge a	and belief it is true, correct and Date	complete.
(b) Address (number and stree (c) City, State, and ZIP Code I certify that I hav	•	to the best of my knowledge a		complete.
(b) Address (number and stree (c) City, State, and ZIP Code	•	to the best of my knowledge a		complete.
(b) Address (number and stree (c) City, State, and ZIP Code I certify that I hav Signature of Candidate	e examined this Statement and		Date	
(b) Address (number and stree (c) City, State, and ZIP Code I certify that I hav Signature of Candidate	e examined this Statement and		Date	
(b) Address (number and stree (c) City, State, and ZIP Code	e examined this Statement and		Date	

To print and file this form, select "Print" from the "File" menu above. In the "Print" window, select "Document" from the drop down menu labeled "Comments and Forms" Doing so will ensure that the icons and other instructions will not appear on your filing. Click here for a video printing demonstration.

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USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
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Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
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