

PERSONAL FINANCIAL STATEMENT

**FORM PFS
COVER SHEET**

PAGE 1

Filed in accordance with chapter 572 of the Government Code. ✓
 For filings required in 2014 covering calendar year ending December 31, 2013.
 Use FORM PFS--INSTRUCTION GUIDE when completing this form.

TOTAL NUMBER OF PAGES FILED:

ACCOUNT # 20266

NAME	TITLE: FIRST; MI Michael E.
	NICKNAME: LAST; SUFFIX Keasler

OFFICE USE ONLY	
Date Received	HAND DELIVERED RECEIVED APR 22 2014 <i>Texas Ethics Commission</i>
Receipt #	
<input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS)	Amount Date Processed 4/22 PROCESSED APR 22 2014 Date Imaged

ADDRESS	ADDRESS / PO BOX; APT / SUITE #: CITY; STATE; ZIP CODE P.O. Box 12308, Austin, TX 78711
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TELEPHONE NUMBER	AREA CODE PHONE NUMBER; EXTENSION (512) 633-5508
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REASON FOR FILING STATEMENT	<input type="checkbox"/> CANDIDATE _____ (INDICATE OFFICE)
	<input checked="" type="checkbox"/> ELECTED OFFICER <u>Judge, Texas Court of Criminal Appeals, Place 6</u> (INDICATE OFFICE)
	<input type="checkbox"/> APPOINTED OFFICER _____ (INDICATE AGENCY)
	<input type="checkbox"/> EXECUTIVE HEAD _____ (INDICATE AGENCY)
	<input type="checkbox"/> FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT
	<input type="checkbox"/> STATE PARTY CHAIR _____ (INDICATE PARTY)
	<input type="checkbox"/> OTHER _____ (INDICATE POSITION)

Family members whose financial activity you are reporting (see instructions).

SPOUSE Nancy A. Keasler

DEPENDENT CHILD 1. _____
 2. _____
 3. _____

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

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R: 611403

PERSONAL FINANCIAL STATEMENT**COVER SHEET
PAGE 2**

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. ***If you place a check in a box, do NOT include pages for that Part in the report.***

6 PARTS NOT APPLICABLE TO FILER

- N/A Part 1A - Sources of Occupational Income
- N/A Part 1B - Retainers
- N/A Part 2 - Stock
- N/A Part 3 - Bonds, Notes & Other Commercial Paper
- N/A Part 4 - Mutual Funds
- N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
- N/A Part 6 - Personal Notes and Lease Agreements
- N/A Part 7A - Interests in Real Property
- N/A Part 7B - Interests in Business Entities
- N/A Part 8 - Gifts
- N/A Part 9 - Trust Income
- N/A Part 10A - Blind Trusts
- N/A Part 10B - Trustee Statement
- N/A Part 11A - Assets of Business Associations
- N/A Part 11B - Liabilities of Business Associations
- N/A Part 12 - Boards and Executive Positions
- N/A Part 13 - Expenses Accepted Under Honorarium Exception
- N/A Part 14 - Interest in Business in Common with Lobbyist
- N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
- N/A Part 16 - Representation by Legislator Before State Agency
- N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
- N/A Part 18 - Legislative Continuances

SOURCES OF OCCUPATIONAL INCOME

PART 1A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<p>1 INFORMATION RELATES TO</p>	<p> <input checked="" type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ </p>
<p>2 EMPLOYMENT</p> <p><input checked="" type="checkbox"/> EMPLOYED BY ANOTHER</p> <p><input type="checkbox"/> SELF-EMPLOYED</p>	<p style="text-align: center;">NAME AND ADDRESS OF EMPLOYER / POSITION HELD</p> <p style="text-align: center;"><input type="checkbox"/> (Check if Filer's Home Address)</p> <p>State of Texas Texas Court of Criminal Appeals P.O. Box 12308 Austin, Texas 78711</p> <hr style="border-top: 1px dashed black;"/> <p style="text-align: center;">NATURE OF OCCUPATION</p> <p>Judge, Texas Court of Criminal Appeals</p>
<p>INFORMATION RELATES TO</p>	<p> <input type="checkbox"/> FILER <input checked="" type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ </p>
<p>EMPLOYMENT</p> <p><input checked="" type="checkbox"/> EMPLOYED BY ANOTHER</p> <p><input type="checkbox"/> SELF-EMPLOYED</p>	<p style="text-align: center;">NAME AND ADDRESS OF EMPLOYER / POSITION HELD</p> <p style="text-align: center;"><input type="checkbox"/> (Check if Filer's Home Address)</p> <p>St. Andrew's Episcopal School 1112 W 31st St Austin, TX 78705</p> <hr style="border-top: 1px dashed black;"/> <p style="text-align: center;">NATURE OF OCCUPATION</p> <p>Classroom Teacher</p>
<p>INFORMATION RELATES TO</p>	<p> <input type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____ </p>
<p>EMPLOYMENT</p> <p><input type="checkbox"/> EMPLOYED BY ANOTHER</p> <p><input type="checkbox"/> SELF-EMPLOYED</p>	<p style="text-align: center;">NAME AND ADDRESS OF EMPLOYER / POSITION HELD</p> <p style="text-align: center;"><input type="checkbox"/> (Check if Filer's Home Address)</p> <p style="text-align: center;">NATURE OF OCCUPATION</p>

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION PART 13

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Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS--INSTRUCTION GUIDE.

1 PROVIDER	NAME AND ADDRESS Texas Tech University Law School MS0004 1802 Hartford Avenue Lubbock, Texas 79409-0004
2 AMOUNT	\$90.95 (Lodging)
PROVIDER	NAME AND ADDRESS The National Judicial College Judicial College Building/MS 358 Reno, NV 89557
AMOUNT	\$1155.90 (airfare, six night's lodging, and meals while teaching a week-long course)
PROVIDER	NAME AND ADDRESS
AMOUNT	
PROVIDER	NAME AND ADDRESS
AMOUNT	

COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2013, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

Michael E. Keaster

Signature of Filer



AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Michael E. Keaster, this the 22nd day of April, 2014, to certify which, witness my hand and seal of office.

Olga P. Zuniga Olga P. Zuniga Notary Public
Signature of officer administering oath Print name of officer administering oath Title of officer administering oath