

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Darlene Miller for Congress

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	34475.00	411749.70
(b) Total Contribution Refunds (from Line 20(d))	55900.00	55900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-21425.00	355849.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	142653.07	372358.47
(b) Total Offsets to Operating Expenditures (from Line 14).....	2635.77	2635.77
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	140017.30	369722.70
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2822.92	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Darlene Miller for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y
07 / 21 / 2016 To: M M / D D / Y Y Y Y
09 / 30 / 2016

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	25875.00	309900.20
(ii) Unitemized.....	3100.00	24849.50
(iii) TOTAL of contributions from individuals ▶	28975.00	334749.70
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	5500.00	77000.00
(d) The Candidate.....	.00	.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	34475.00	411749.70
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	.00	16695.92
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	.00	.00
(b) All Other Loans.....	.00	.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	.00	.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	2635.77	2635.77
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	.00	.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	37110.77	431081.39

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 57

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	142653.07	372358.47
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	.00	.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	.00	.00
(b) Of All Other Loans .....	.00	.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	.00	.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	49900.00	49900.00
(b) Political Party Committees.....	.00	.00
(c) Other Political Committees (such as PACs).....	6000.00	6000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	55900.00	55900.00
21. OTHER DISBURSEMENTS .....	.00	.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	198553.07	428258.47

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	164265.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	37110.77
25. SUBTOTAL (add Line 23 and Line 24).....	201375.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	198553.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2822.92

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
Ames, Raymond, G, ,
Mailing Address 2321 Wildwood Ct
City Burnsville State MN Zip Code 55306-5393
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Ames Construction
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 02 / 2016
Transaction ID : SA11Ai-CN669
Amount of Each Receipt this Period
2700.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Boyd, Ladonna, Mae, ,
Mailing Address 15400 Chippendale Ave Apt 204
City Rosemount State MN Zip Code 55068
FEC ID number of contributing federal political committee. **C**
Name of Employer Dakota Electric Assn Occupation Economic Development Director
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 26 / 2016
Transaction ID : SA11Ai-CN646
Amount of Each Receipt this Period
200.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Brooks, John, , ,
Mailing Address 905 Ferndale Rd W
City Wayzata State MN Zip Code 55391
FEC ID number of contributing federal political committee. **C**
Name of Employer The JCB Group LLC Occupation Consultant
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 09 / 2016
Transaction ID : SA11Ai-CN2706
Amount of Each Receipt this Period
500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3400.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
Byelick, Stephen, Charles, ,
 Mailing Address 864 Basswood Ln
 City Eagan State MN Zip Code 55123
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Alliance Bank Occupation CFO
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016
Transaction ID : SA11Ai-CN666
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
DeGrange, Jeff, , ,
 Mailing Address 8634 Sherwood Bluff
 City Eden Prairie State MN Zip Code 55347
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Impossible Objects Occupation COO
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 04 / 2016
Transaction ID : SA11Ai-CN1684
 Amount of Each Receipt this Period
 200.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Fetters, Jeffrey, , ,
 Mailing Address 5100 Meadville St
 City Excelsior State MN Zip Code 55331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Federated Insurance Occupation CEO
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2016
Transaction ID : SA11Ai-CN634
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
Fleck, Sheldon, , ,

Mailing Address 4611 Browndale Ave

City Minneapolis State MN Zip Code 55424

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : SA11Ai-CN661

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Geier, Mark, Raymond, ,

Mailing Address 25445 Ipava Ave

City Lakeville State MN Zip Code 55044

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
Larkin Hoffman Attorney

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 26 / 2016

Transaction ID : SA11Ai-CN642

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Grangaard, Paul D, , ,

Mailing Address 6927 Mark Ter Cir

City Edina State MN Zip Code 55439

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
Allen Edmonds Corp Shoe Manufacturing

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11Ai-CN677

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 950.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 57	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Granow, Leslie, S, Ms.,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2016	
Mailing Address 865 17th St			Transaction ID : SA11Ai-CN678	
City Manhattan Beach	State CA	Zip Code 90266	Amount of Each Receipt this Period _____ 425.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Requested		Occupation Requested	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 425.00		

Full Name (Last, First, Middle Initial) B. Haglund, James, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 29 / 2016	
Mailing Address 4330 Bassett Creek Rd			Transaction ID : SA11Ai-CN662	
City Golden Valley	State MN	Zip Code 55422	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Requested Central Container		Occupation Requested Owner	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 500.00		

Full Name (Last, First, Middle Initial) C. Hawkins, Bill, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 02 / 2016	
Mailing Address 312 Blackwell St Apt 211			Transaction ID : SA11Ai-CN667	
City Durham	State NC	Zip Code 27701	Amount of Each Receipt this Period _____ 1000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Requested Bioventus		Occupation Requested Corporate Director	<input type="checkbox"/> Memo Item	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 1000.00		

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 1925.00
TOTAL This Period (last page this line number only)..... ▶	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
Head, Martha, , ,
Mailing Address 1616 22nd St W

City Minneapolis	State MN	Zip Code 55405
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer self	Occupation business
--------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11Ai-CN675

Amount of Each Receipt this Period

1000.00

 Memo Item

B. Full Name (Last, First, Middle Initial)
Hogle, Helene, , ,
Mailing Address 59 4th St W

City St Paul	State MN	Zip Code 55102
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Cosmetologist
-----------------------------	-----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11Ai-CN1683

Amount of Each Receipt this Period

2700.00

 Memo Item

C. Full Name (Last, First, Middle Initial)
Holec, Ken, , ,
Mailing Address 5958 Hardscrabble Cir

City Mound	State MN	Zip Code 55364
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2005.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11Ai-CN1681

Amount of Each Receipt this Period

1000.00

 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	4700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
Kline, Vicky, Sheldon, ,
Mailing Address 355 Maple Island Rd

City Burnsville State MN Zip Code 55306-5523

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 26 / 2016
Transaction ID : SA11Ai-CN643

Amount of Each Receipt this Period
250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Kocina, Robin, R, ,
Mailing Address 222 Hennepin Ave
Apt 772

City Minneapolis State MN Zip Code 55401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Media Relations Owner
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 26 / 2016
Transaction ID : SA11Ai-CN641

Amount of Each Receipt this Period
250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Lenzen, David, , ,
Mailing Address 2655 Hemlock Ln

City Plymouth State MN Zip Code 55441

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Liberty Diversified Inter Accountant
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 03 / 2016
Transaction ID : SA11Ai-CN1678

Amount of Each Receipt this Period
250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
Lowe, Thomas P, , ,
 Mailing Address 2630 Lafayette Rd W
 City Excelsior State MN Zip Code 55331
 FEC ID number of contributing federal political committee. **C**
 Name of Employer retired Occupation retired
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 25 / 2016
Transaction ID : SA11Ai-CN640
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
MacMillan, Whitney, , ,
 Mailing Address 1050 Beach Rd
 City Vero Beach State FL Zip Code 32963
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016
Transaction ID : SA11Ai-CN2693
 Amount of Each Receipt this Period
 2000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Marchessault, James, , ,
 Mailing Address 4811 Island Pond Ct
 City Bonita Springs State FL Zip Code 34134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Buisness Card Service Inc. Occupation CEO
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 05 / 2016
Transaction ID : SA11Ai-CN2700
 Amount of Each Receipt this Period
 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2700.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 57
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
McDonald, Keith, , ,

Mailing Address 95 Timber Island Trl

City: Maple Plain State: MN Zip Code: 55359

FEC ID number of contributing federal political committee: **C**

Name of Employer: Shingobee Builders Occupation: Owner

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
1000.00

Date of Receipt
07 / 27 / 2016

Transaction ID : SA11Ai-CN652

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
McGibbon, Norman, Charles, ,

Mailing Address 3647 Crystal Bay Ln NW

City: Prior Lake State: MN Zip Code: 55372

FEC ID number of contributing federal political committee: **C**

Name of Employer: Requested Occupation: Requested

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
250.00

Date of Receipt
08 / 04 / 2016

Transaction ID : SA11Ai-CN1686

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Mendenhall, James, , ,

Mailing Address 2471 Belmont Dr

City: Achorage State: AK Zip Code: 99517

FEC ID number of contributing federal political committee: **C**

Name of Employer: Mendenhall & Associates Occupation: Principal

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
500.00

Date of Receipt
07 / 25 / 2016

Transaction ID : SA11Ai-CN637

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 13 OF 57
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
Michaels, Lorie, ,
Mailing Address 2060 Pinot Dr
City Wayzata State MN Zip Code 55391
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Farm Manager
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 01 / 2016
Transaction ID : SA11Ai-CN671
Amount of Each Receipt this Period
500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Nerge, Lavonne, Berniece, ,
Mailing Address 4165 Hilltop Pt
Apt 203
City Eagan State MN Zip Code 55123-1457
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 01 / 2016
Transaction ID : SA11Ai-CN673
Amount of Each Receipt this Period
100.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Newman, Sam, , Mr.,
Mailing Address 215 S Valley Dr
City Manhattan Beach State CA Zip Code 90266
FEC ID number of contributing federal political committee. **C**
Name of Employer Gibson Dunn Occupation Attorney
Receipt For: 2016
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 28 / 2016
Transaction ID : SA11Ai-CN654
Amount of Each Receipt this Period
500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 57
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
O'Brien, Edgar, , ,

Mailing Address 5333 Minnehaha Blvd

City Minneapolis State MN Zip Code 55424

FEC ID number of contributing federal political committee. **C**

Name of Employer O'Brien-Staley Partners Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11Ai-CN1685

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
O'Hara, Nancy, , ,

Mailing Address 15201 Rockaway Blvd

City Jamaica State NY Zip Code 11434

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 29 / 2016

Transaction ID : SA11Ai-CN657

Amount of Each Receipt this Period
2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Reimann, Ronald, Hill, , Sr

Mailing Address 6120 Hadley Ave S

City Cottage Grove State MN Zip Code 55016-1027

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 22 / 2016

Transaction ID : SA11Ai-CN632

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3800.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 57	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
Schwarzman, Stephen, A, Mr.,

Mailing Address 345 Park Avenue

City New York	State NY	Zip Code 10154
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Blackstone	Occupation CEO Chairman & Co-founder
--------------------------------	---

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2016

Transaction ID : SA11Ai-CN668

Amount of Each Receipt this Period
 _____ 2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Slipka, Linda, Eileen, ,

Mailing Address 13410 Washburn Dr

City Burnsville	State MN	Zip Code 55337-2164
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : SA11Ai-CN648

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Smith, Julius, , ,

Mailing Address 1185 Gallery Ln

City Chaska	State MN	Zip Code 55318
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
-------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : SA11Ai-CN659

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 3300.00
TOTAL This Period (last page this line number only)..... ▶	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 57
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
Spiegel, Daniel, , ,

Mailing Address PO Box 398078

City Edina State MN Zip Code 55439-8078

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : SA11Ai-CN650

Amount of Each Receipt this Period
 250.00

Memo Item

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	25875.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 57	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
CMR PAAC

Mailing Address PO Box 2485

City Springfield State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C** C00469429

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016

Transaction ID : SA11C-CN2694

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Kline For Congress

Mailing Address 332 W Lee Hwy # 303

City Warrenton State VA Zip Code 20186

FEC ID number of contributing federal political committee. **C** C00326629

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2016

Transaction ID : SA11C-CN658

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Maggie's List

Mailing Address 6675 Weeping Willow Way

City Tallahassee State FL Zip Code 32311

FEC ID number of contributing federal political committee. **C** C00469023

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 26 / 2016

Transaction ID : SA11C-CN653

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	5500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)		PAGE 18 OF 57	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Full Name (Last, First, Middle Initial)
Burnsville Showroom LLC

Mailing Address 11975 Portland Ave S
138

City Burnsville	State MN	Zip Code 55337
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2635.77

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : SA14-ER1

Amount of Each Receipt this Period
2635.77

Memo Item
Expenditure Refund

B. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2635.77
TOTAL This Period (last page this line number only).....▶	2635.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2016		
Mailing Address 420 Montgomery St			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94104	Amount of Each Disbursement this Period 183.50		
Purpose of Disbursement Bank Service Charge		Category/ Type 001	Transaction ID : SB17-EX317		
Candidate Name		Memo Item Bank Service Charge			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address 420 Montgomery St			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94104	Amount of Each Disbursement this Period 200.50		
Purpose of Disbursement Bank Service Charge		Category/ Type 001	Transaction ID : SB17-EX356		
Candidate Name		Memo Item Bank Service Charge			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Wells Fargo			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016		
Mailing Address 420 Montgomery St			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94104	Amount of Each Disbursement this Period 3.00		
Purpose of Disbursement Bank Service Charge		Category/ Type 001	Transaction ID : SB17-EX357		
Candidate Name		Memo Item Bank Service Charge			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	387.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 57			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. LMH Consulting Services LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016		
Mailing Address 756 O'Day Dr			FEC Identification Number C		
City Jordan	State MN	Zip Code 55352	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Fundraising Retainer		Category/ Type 003	Transaction ID : SB17-EX280		
Candidate Name		Memo Item Fundraising Retainer			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. LMH Consulting Services LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 756 O'Day Dr			FEC Identification Number C		
City Jordan	State MN	Zip Code 55352	Amount of Each Disbursement this Period 1451.61		
Purpose of Disbursement Fundraising Services		Category/ Type 003	Transaction ID : SB17-EX331		
Candidate Name		Memo Item Fundraising Services			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Shanna Woodbury Consulting LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016		
Mailing Address PO Box 120697			FEC Identification Number C		
City Saint Paul	State MN	Zip Code 55112	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Fundraising Retainer		Category/ Type 003	Transaction ID : SB17-EX281		
Candidate Name		Memo Item Fundraising Retainer			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	11451.61
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 57			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Shanna Woodbury Consulting LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016		
Mailing Address PO Box 120697			FEC Identification Number C		
City Saint Paul	State MN	Zip Code 55112	Amount of Each Disbursement this Period 274.32		
Purpose of Disbursement Mileage Reimbursement		Category/ Type 002	Transaction ID : SB17-EX287		
Candidate Name		Memo Item Mileage Reimbursement			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Shanna Woodbury Consulting LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address PO Box 120697			FEC Identification Number C		
City Saint Paul	State MN	Zip Code 55112	Amount of Each Disbursement this Period 1515.87		
Purpose of Disbursement Fundraising Services		Category/ Type 003	Transaction ID : SB17-EX332		
Candidate Name		Memo Item Fundraising Services			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. FEC Financial Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016		
Mailing Address 332 W Lee Hwy # 303			FEC Identification Number C		
City Warrenton	State VA	Zip Code 20186	Amount of Each Disbursement this Period 1081.82		
Purpose of Disbursement PAYMENT: SEE BELOW		Category/ Type 001	Transaction ID : SB17-EX283		
Candidate Name		Memo Item PAYMENT: SEE BELOW			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2872.01
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. FEC Financial Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016	
Mailing Address 332 W Lee Hwy # 303			FEC Identification Number C	
City Warrenton	State VA	Zip Code 20186	Amount of Each Disbursement this Period 1050.00	
Purpose of Disbursement Accounting Services		Category/ Type 001	Transaction ID : SB17-EX284	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. FEC Financial Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016	
Mailing Address 332 W Lee Hwy # 303			FEC Identification Number C	
City Warrenton	State VA	Zip Code 20186	Amount of Each Disbursement this Period 31.82	
Purpose of Disbursement Postage Reimbursement		Category/ Type 001	Transaction ID : SB17-EX285	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. FEC Financial Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016	
Mailing Address 332 W Lee Hwy # 303			FEC Identification Number C	
City Warrenton	State VA	Zip Code 20186	Amount of Each Disbursement this Period 650.00	
Purpose of Disbursement Accounting Services		Category/ Type 001	Transaction ID : SB17-EX330	
Candidate Name		Memo Item <input type="checkbox"/> Accounting Services		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. FEC Financial Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2016
Mailing Address 332 W Lee Hwy # 303		FEC Identification Number C
City Warrenton	State VA	Zip Code 20186
Purpose of Disbursement Accounting Services		001
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 544.69
State: District:		Transaction ID : SB17-EX371 <input type="checkbox"/> Memo Item Accounting Services

Full Name (Last, First, Middle Initial) B. Targeted Creative Communications Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016
Mailing Address 106 S Columbus St		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Direct Mail		003
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 8026.00
State: District:		Transaction ID : SB17-EX274 <input type="checkbox"/> Memo Item Direct Mail

Full Name (Last, First, Middle Initial) c. Targeted Creative Communications Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2016
Mailing Address 106 S Columbus St		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Direct Mail		003
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 5800.00
State: District:		Transaction ID : SB17-EX275 <input type="checkbox"/> Memo Item Direct Mail

SUBTOTAL of Disbursements This Page (optional).....▶	14370.69
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Targeted Creative Communications Inc.			Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2016		
Mailing Address 106 S Columbus St			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 5705.70		
Purpose of Disbursement Direct Mail		Category/ Type 003	Transaction ID : SB17-EX276		
Candidate Name		Memo Item Direct Mail			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Targeted Creative Communications Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016		
Mailing Address 106 S Columbus St			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 5705.70		
Purpose of Disbursement Direct Mail		Category/ Type 003	Transaction ID : SB17-EX282		
Candidate Name		Memo Item Direct Mail			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Targeted Creative Communications Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016		
Mailing Address 106 S Columbus St			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 6830.70		
Purpose of Disbursement Direct Mail		Category/ Type 003	Transaction ID : SB17-EX286		
Candidate Name		Memo Item Direct Mail			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	18242.10
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Targeted Creative Communications Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2016		
Mailing Address 106 S Columbus St			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 5800.00		
Purpose of Disbursement Direct Mail		Category/ Type 003	Transaction ID : SB17-EX289		
Candidate Name		Memo Item Direct Mail			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Targeted Creative Communications Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016		
Mailing Address 106 S Columbus St			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 5800.00		
Purpose of Disbursement Direct Mail		Category/ Type 003	Transaction ID : SB17-EX290		
Candidate Name		Memo Item Direct Mail			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Targeted Creative Communications Inc.			Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2016		
Mailing Address 106 S Columbus St			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 3000.00		
Purpose of Disbursement Advertising/Strategic Consulting		Category/ Type 004	Transaction ID : SB17-EX292		
Candidate Name		Memo Item Advertising/Strategic Consulting			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	14600.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. American Express			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016		
Mailing Address PO Box 0001			FEC Identification Number C		
City Los Angeles	State CA	Zip Code 90096	Amount of Each Disbursement this Period 3452.62		
Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW		Category/ Type 001	Transaction ID : SB17-EX311		
Candidate Name		Memo Item CREDIT CARD PAYMENT: SEE BELOW			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. OfficeMax			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016		
Mailing Address 14121 Aldrich Ave S			FEC Identification Number C		
City Burnsville	State MN	Zip Code 55337	Amount of Each Disbursement this Period 582.82		
Purpose of Disbursement Toner Paper Name Tags & Envelopes		Category/ Type 001	Transaction ID : SB17-EX295		
Candidate Name		<input checked="" type="checkbox"/> Memo Item Toner Paper Name Tags & Envelopes			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016				
State: District:					

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016		
Mailing Address 13800 Nicollet Blvd			FEC Identification Number C		
City Burnsville	State MN	Zip Code 55337	Amount of Each Disbursement this Period 154.45		
Purpose of Disbursement Postage		Category/ Type 001	Transaction ID : SB17-EX295		
Candidate Name		<input checked="" type="checkbox"/> Memo Item Postage			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3452.62
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Bonfire		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016
Mailing Address 14120 S Hwy 13		FEC Identification Number C
City Savage	State MN	Zip Code 55378
Purpose of Disbursement Food and Beverage	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 40.20
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016	
State: District:	<input checked="" type="checkbox"/> Memo Item Food and Beverage	

Full Name (Last, First, Middle Initial) B. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016
Mailing Address 14141 Aldrich Ave S		FEC Identification Number C
City Burnsville	State MN	Zip Code 55337
Purpose of Disbursement Computer Equipment	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 37.54
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016	
State: District:	<input checked="" type="checkbox"/> Memo Item Computer Equipment	

Full Name (Last, First, Middle Initial) C. WalMart		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016
Mailing Address 1360 Town Centre Dr		FEC Identification Number C
City Saint Paul	State MN	Zip Code 55123
Purpose of Disbursement Pens & Paper	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 17.68
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016	
State: District:	<input checked="" type="checkbox"/> Memo Item Pens & Paper	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Facebook

Full Name (Last, First, Middle Initial)
Mailing Address 1 Hacker Way

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Online Advertising
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement: 08 / 02 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 90.05

Transaction ID: SB17-EX300

Memo Item Online Advertising

B. Cheap Fast & Easy Tees

Full Name (Last, First, Middle Initial)
Mailing Address 8948 Oakland Ave S

City Minneapolis State MN Zip Code 55420

Purpose of Disbursement Campaign TShirts
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement: 08 / 02 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 601.00

Transaction ID: SB17-EX301

Memo Item Campaign TShirts

C. Screen Tech

Full Name (Last, First, Middle Initial)
Mailing Address 2272 N 3rd St Suite A

City Saint Paul State MN Zip Code 55109

Purpose of Disbursement Campaign Signs
Candidate Name

Office Sought: House Senate President
Disbursement For: 2016
 Primary General
 Other (specify) Primary 2016

State: District:

Date of Disbursement: 08 / 02 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 1119.46

Transaction ID: SB17-EX302

Memo Item Campaign Signs

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Papa Johns			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016	
Mailing Address 2040 Cliff Rd			FEC Identification Number C	
City Saint Paul	State MN	Zip Code 55122	Amount of Each Disbursement this Period 59.00	
Purpose of Disbursement Food and Beverage		Category/ Type 001	Transaction ID : SB17-EX303	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Food and Beverage		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) B. SuperAmerica			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016	
Mailing Address 13195 Pioneer Tr			FEC Identification Number C	
City Eden Prairie	State MN	Zip Code 55347	Amount of Each Disbursement this Period 9.98	
Purpose of Disbursement Food and Beverage		Category/ Type 001	Transaction ID : SB17-EX304	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Food and Beverage		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) C. Pioneer Press			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016	
Mailing Address 10 River Park Plaza # 700			FEC Identification Number C	
City Saint Paul	State MN	Zip Code 55107	Amount of Each Disbursement this Period 76.00	
Purpose of Disbursement Publication Subscription		Category/ Type 001	Transaction ID : SB17-EX305	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Publication Subscription		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Google		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016
Mailing Address 1600 Amphitheatre Parkway		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Online Software	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016	
State: District:	<input checked="" type="checkbox"/> Memo Item Online Software	

Full Name (Last, First, Middle Initial) B. Menards		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016
Mailing Address 12600 Plaza Dr		FEC Identification Number C
City Eden Prairie	State MN	Zip Code 55344
Purpose of Disbursement Cable Ties	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 58.07
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016	
State: District:	<input checked="" type="checkbox"/> Memo Item Cable Ties	

Full Name (Last, First, Middle Initial) c. Original Pancake House		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016
Mailing Address 3501 W 70th St		FEC Identification Number C
City Minneapolis	State MN	Zip Code 55435
Purpose of Disbursement Food and Beverage	Category/ Type 007	
Candidate Name		Amount of Each Disbursement this Period 254.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016	
State: District:	<input checked="" type="checkbox"/> Memo Item Food and Beverage	

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Wabasha Kellogg Chamber			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016		
Mailing Address 137 Main St			FEC Identification Number C		
City Wabasha	State MN	Zip Code 55981	Amount of Each Disbursement this Period 200.00		
Purpose of Disbursement Parade Entry Fee		Category/ Type 007	Transaction ID : SB17-EX309		
Candidate Name		Memo Item <input checked="" type="checkbox"/> Parade Entry Fee			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016				
State: District:					

Full Name (Last, First, Middle Initial) B. FedEx Office			Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2016		
Mailing Address 700 County Rd 42 W			FEC Identification Number C		
City Burnsville	State MN	Zip Code 55337	Amount of Each Disbursement this Period 122.37		
Purpose of Disbursement Printing		Category/ Type 001	Transaction ID : SB17-EX310		
Candidate Name		Memo Item <input checked="" type="checkbox"/> Printing			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016				
State: District:					

Full Name (Last, First, Middle Initial) C. American Express			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016		
Mailing Address PO Box 0001			FEC Identification Number C		
City Los Angeles	State CA	Zip Code 90096	Amount of Each Disbursement this Period 640.48		
Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW		Category/ Type 001	Transaction ID : SB17-EX370		
Candidate Name		Memo Item <input type="checkbox"/> CREDIT CARD PAYMENT: SEE BELOW			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	640.48
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. FedEx Office			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address 700 County Rd 42 W			FEC Identification Number C	
City Burnsville	State MN	Zip Code 55337	Amount of Each Disbursement this Period 18.75	
Purpose of Disbursement Delivery		Category/ Type 001	Transaction ID : SB17-EX360	
Candidate Name		Memo Item Delivery <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) B. WalMart			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address 1360 Town Centre Dr			FEC Identification Number C	
City Saint Paul	State MN	Zip Code 55123	Amount of Each Disbursement this Period 49.61	
Purpose of Disbursement Food and Beverage		Category/ Type 007	Transaction ID : SB17-EX362	
Candidate Name		Memo Item Food and Beverage <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) c. Google			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address 1600 Amphitheatre Parkway			FEC Identification Number C	
City Mountain View	State CA	Zip Code 94043	Amount of Each Disbursement this Period 30.00	
Purpose of Disbursement Online Software		Category/ Type 001	Transaction ID : SB17-EX363	
Candidate Name		Memo Item Online Software <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Facebook			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 68.81	
Purpose of Disbursement Online Advertising		Category/ Type 004	Transaction ID : SB17-EX364	
Candidate Name		Memo Item Online Advertising		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) B. Menards			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address 12600 Plaza Dr			FEC Identification Number C	
City Eden Prairie	State MN	Zip Code 55344	Amount of Each Disbursement this Period 94.33	
Purpose of Disbursement Parade Materials		Category/ Type 007	Transaction ID : SB17-EX365	
Candidate Name		Memo Item Parade Materials		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) c. SuperAmerica			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address 13195 Pioneer Tr			FEC Identification Number C	
City Eden Prairie	State MN	Zip Code 55347	Amount of Each Disbursement this Period 5.62	
Purpose of Disbursement Food and Beverage		Category/ Type 001	Transaction ID : SB17-EX366	
Candidate Name		Memo Item Food and Beverage		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. OfficeMax			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address 14121 Aldrich Ave S			FEC Identification Number C	
City Burnsville	State MN	Zip Code 55337	Amount of Each Disbursement this Period 12.85	
Purpose of Disbursement Name Tags		Category/ Type 001	Transaction ID : SB17-EX367	
Candidate Name		Memo Item Name Tags <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) B. Rivertown Days Parade			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address 314 Vermillion St Suite 100			FEC Identification Number C	
City Hastings	State MN	Zip Code 55033	Amount of Each Disbursement this Period 199.99	
Purpose of Disbursement Parade Entry		Category/ Type 007	Transaction ID : SB17-EX368	
Candidate Name		Memo Item Parade Entry <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) c. FedEx Office			Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2016	
Mailing Address 700 County Rd 42 W			FEC Identification Number C	
City Burnsville	State MN	Zip Code 55337	Amount of Each Disbursement this Period 160.52	
Purpose of Disbursement Printing		Category/ Type 001	Transaction ID : SB17-EX369	
Candidate Name		Memo Item Printing <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 57			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Damian, George, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016		
Mailing Address 11625 Wilder Dr # 311			FEC Identification Number C		
City Eden Prairie	State MN	Zip Code 55344	Amount of Each Disbursement this Period 1112.60		
Purpose of Disbursement Mileage Reimbursement		Category/ Type 002	Transaction ID : SB17-EX338		
Candidate Name		Memo Item Mileage Reimbursement			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Damian, George, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address 11625 Wilder Dr # 311			FEC Identification Number C		
City Eden Prairie	State MN	Zip Code 55344	Amount of Each Disbursement this Period 108.57		
Purpose of Disbursement REIMBURSEMENT: SEE BELOW		Category/ Type 004	Transaction ID : SB17-EX343		
Candidate Name		Memo Item REIMBURSEMENT: SEE BELOW			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Facebook			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016		
Mailing Address 1 Hacker Way			FEC Identification Number C		
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 108.57		
Purpose of Disbursement Online Advertising		Category/ Type 004	Transaction ID : SB17-EX344		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1221.17
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016
Mailing Address 1210 Northland Dr Ste 100		FEC Identification Number C
City Mendota Heights	State MN	Zip Code 55120
Purpose of Disbursement PAYROLL: SEE BELOW		001
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 3561.06
State: District:		Transaction ID : SB17-EX321 <input type="checkbox"/> Memo Item PAYROLL: SEE BELOW

Full Name (Last, First, Middle Initial) B. Friedlund, Kayla, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016
Mailing Address 15305 Co Rd 5		FEC Identification Number C
City Burnsville	State MN	Zip Code 55306
Purpose of Disbursement Net Salary		001
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016	Amount of Each Disbursement this Period 987.21
State: District:		Transaction ID : SB17-EX318 <input checked="" type="checkbox"/> Memo Item Net Salary

Full Name (Last, First, Middle Initial) c. Damian, George, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016
Mailing Address 11625 Wilder Dr # 311		FEC Identification Number C
City Eden Prairie	State MN	Zip Code 55344
Purpose of Disbursement Net Salary		001
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016	Amount of Each Disbursement this Period 1549.28
State: District:		Transaction ID : SB17-EX319 <input checked="" type="checkbox"/> Memo Item Net Salary

SUBTOTAL of Disbursements This Page (optional).....▶	3561.06
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Paychex			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016		
Mailing Address 1210 Northland Dr Ste 100			FEC Identification Number C		
City Mendota Heights	State MN	Zip Code 55120	Amount of Each Disbursement this Period 1024.57		
Purpose of Disbursement Withholding Taxes		Category/ Type 001	Transaction ID : SB17-EX320		
Candidate Name		Memo Item Withholding Taxes <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016				
State: District:					

Full Name (Last, First, Middle Initial) B. Paychex			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016		
Mailing Address 1210 Northland Dr Ste 100			FEC Identification Number C		
City Mendota Heights	State MN	Zip Code 55120	Amount of Each Disbursement this Period 49.70		
Purpose of Disbursement Payroll Service Fee		Category/ Type 001	Transaction ID : SB17-EX322		
Candidate Name		Memo Item Payroll Service Fee <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Paychex			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016		
Mailing Address 1210 Northland Dr Ste 100			FEC Identification Number C		
City Mendota Heights	State MN	Zip Code 55120	Amount of Each Disbursement this Period 3561.06		
Purpose of Disbursement PAYROLL: SEE BELOW		Category/ Type 001	Transaction ID : SB17-EX349		
Candidate Name		Memo Item PAYROLL: SEE BELOW <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	3610.76
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Damian, George, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016	
Mailing Address 11625 Wilder Dr # 311			FEC Identification Number C	
City Eden Prairie	State MN	Zip Code 55344	Amount of Each Disbursement this Period 1549.28	
Purpose of Disbursement Net Salary		Category/ Type 001	Transaction ID : SB17-EX346	
Candidate Name		Memo Item Net Salary <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) B. Friedlund, Kayla, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016	
Mailing Address 15305 Co Rd 5			FEC Identification Number C	
City Burnsville	State MN	Zip Code 55306	Amount of Each Disbursement this Period 987.20	
Purpose of Disbursement Net Salary		Category/ Type 001	Transaction ID : SB17-EX347	
Candidate Name		Memo Item Net Salary <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) c. Paychex			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016	
Mailing Address 1210 Northland Dr Ste 100			FEC Identification Number C	
City Mendota Heights	State MN	Zip Code 55120	Amount of Each Disbursement this Period 1024.58	
Purpose of Disbursement Withholding Taxes		Category/ Type 001	Transaction ID : SB17-EX348	
Candidate Name		Memo Item Withholding Taxes <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2016			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016
Mailing Address 1210 Northland Dr Ste 100		FEC Identification Number C
City Mendota Heights	State MN	Zip Code 55120
Purpose of Disbursement Payroll Service Fee	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 49.70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17-EX350
State: District:	<input type="checkbox"/> Memo Item Payroll Service Fee	

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address 1210 Northland Dr Ste 100		FEC Identification Number C
City Mendota Heights	State MN	Zip Code 55120
Purpose of Disbursement PAYROLL: SEE BELOW	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 3541.16
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17-EX354
State: District:	<input type="checkbox"/> Memo Item PAYROLL: SEE BELOW	

Full Name (Last, First, Middle Initial) c. Damian, George, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016
Mailing Address 11625 Wilder Dr # 311		FEC Identification Number C
City Eden Prairie	State MN	Zip Code 55344
Purpose of Disbursement Net Salary	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 1549.28
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016	Transaction ID : SB17-EX351
State: District:	<input checked="" type="checkbox"/> Memo Item Net Salary	

SUBTOTAL of Disbursements This Page (optional).....▶	3590.86
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Friedlund, Kayla, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 15305 Co Rd 5			FEC Identification Number C	
City Burnsville	State MN	Zip Code 55306	Amount of Each Disbursement this Period 987.21	
Purpose of Disbursement Net Salary		Category/ Type 001	Transaction ID : SB17-EX352	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Net Salary		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) B. Paychex			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 1210 Northland Dr Ste 100			FEC Identification Number C	
City Mendota Heights	State MN	Zip Code 55120	Amount of Each Disbursement this Period 1004.67	
Purpose of Disbursement Withholding Taxes		Category/ Type 001	Transaction ID : SB17-EX353	
Candidate Name		Memo Item <input checked="" type="checkbox"/> Withholding Taxes		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Primary 2016			
State: District:				

Full Name (Last, First, Middle Initial) c. Paychex			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 1210 Northland Dr Ste 100			FEC Identification Number C	
City Mendota Heights	State MN	Zip Code 55120	Amount of Each Disbursement this Period 49.70	
Purpose of Disbursement Payroll Service Fee		Category/ Type 001	Transaction ID : SB17-EX355	
Candidate Name		Memo Item <input type="checkbox"/> Payroll Service Fee		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	49.70
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Evolve Systems		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016
Mailing Address 2974 Rice Street		FEC Identification Number C
City Saint Paul	State MN	Zip Code 55113
Purpose of Disbursement Website Design	Category/ Type 001	Amount of Each Disbursement this Period 2750.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	Transaction ID : SB17-EX329 <input type="checkbox"/> Memo Item Website Design	

Full Name (Last, First, Middle Initial) B. Miller, Darlene, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2016
Mailing Address PO Box 13		FEC Identification Number C H6MN02198
City Jordan	State MN	Zip Code 55352
Purpose of Disbursement Mileage Reimbursement	Category/ Type 002	Amount of Each Disbursement this Period 379.74
Candidate Name Miller, Darlene, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: MN District: 02	Transaction ID : SB17-EX288 <input type="checkbox"/> Memo Item Mileage Reimbursement	

Full Name (Last, First, Middle Initial) c. Miller, Darlene, , ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016
Mailing Address PO Box 13		FEC Identification Number C H6MN02198
City Jordan	State MN	Zip Code 55352
Purpose of Disbursement Mileage Reimbursement	Category/ Type 002	Amount of Each Disbursement this Period 361.21
Candidate Name Miller, Darlene, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: MN District: 02	Transaction ID : SB17-EX339 <input type="checkbox"/> Memo Item Mileage Reimbursement	

SUBTOTAL of Disbursements This Page (optional).....▶	3490.95
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Burnsville Showroom LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016	
Mailing Address 11975 Portland Ave S # 138			FEC Identification Number C	
City Burnsville	State MN	Zip Code 55337	Amount of Each Disbursement this Period 1050.10	
Purpose of Disbursement Office Rent		Category/ Type 001	Transaction ID : SB17-EX278	
Candidate Name		Memo Item Office Rent		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Friedlund, Kayla, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016	
Mailing Address 15305 Co Rd 5			FEC Identification Number C	
City Burnsville	State MN	Zip Code 55306	Amount of Each Disbursement this Period 229.53	
Purpose of Disbursement Mileage Reimbursement		Category/ Type 002	Transaction ID : SB17-EX333	
Candidate Name		Memo Item Mileage Reimbursement		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Xcel Energy			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016	
Mailing Address PO Box 9477			FEC Identification Number C	
City Minneapolis	State MN	Zip Code 55484	Amount of Each Disbursement this Period 357.50	
Purpose of Disbursement Office Utilities		Category/ Type 001	Transaction ID : SB17-EX279	
Candidate Name		Memo Item Office Utilities		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1637.13
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 57			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Xcel Energy		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2016
Mailing Address PO Box 9477		FEC Identification Number C
City Minneapolis	State MN	Zip Code 55484
Purpose of Disbursement Office Utilities	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 310.73
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17-EX325 <input type="checkbox"/> Memo Item Office Utilities
State: District:		

Full Name (Last, First, Middle Initial) B. Xcel Energy		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2016
Mailing Address PO Box 9477		FEC Identification Number C
City Minneapolis	State MN	Zip Code 55484
Purpose of Disbursement Office Utilities	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 18.70
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17-EX326 <input type="checkbox"/> Memo Item Office Utilities
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2016
Mailing Address PO Box 25505		FEC Identification Number C
City Lehigh Valley	State PA	Zip Code 18002
Purpose of Disbursement Telephone	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 221.78
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17-EX342 <input type="checkbox"/> Memo Item Telephone
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	551.21
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 57
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. SRCP Media		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2016
Mailing Address 201 N Union St Suite 200		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media Buy	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 7500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17-EX312 <input type="checkbox"/> Memo Item Media Buy	

Full Name (Last, First, Middle Initial) B. SRCP Media		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2016
Mailing Address 201 N Union St Suite 200		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media Buy	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 7753.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17-EX313 <input type="checkbox"/> Memo Item Media Buy	

Full Name (Last, First, Middle Initial) C. SRCP Media		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2016
Mailing Address 201 N Union St Suite 200		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media Buy	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 5842.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17-EX314 <input type="checkbox"/> Memo Item Media Buy	

SUBTOTAL of Disbursements This Page (optional).....▶	21095.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 57			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. SRCP Media		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016
Mailing Address 201 N Union St Suite 200		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media Buy	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 4000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17-EX315 <input type="checkbox"/> Memo Item Media Buy	

Full Name (Last, First, Middle Initial) B. SRCP Media		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016
Mailing Address 201 N Union St Suite 200		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media Buy	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 18093.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17-EX291 <input type="checkbox"/> Memo Item Media Buy	

Full Name (Last, First, Middle Initial) C. SRCP Media		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2016
Mailing Address 201 N Union St Suite 200		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media Buy	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Transaction ID : SB17-EX316 <input type="checkbox"/> Memo Item Media Buy	

SUBTOTAL of Disbursements This Page (optional).....▶	23593.10
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2016	
Mailing Address 3800 American Blvd W Suite 500			FEC Identification Number C	
City Minneapolis	State MN	Zip Code 55431	Amount of Each Disbursement this Period 139.09	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	Transaction ID : SB17-EX323	
Candidate Name		Memo Item Credit Card Processing Fee		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016	
Mailing Address 3800 American Blvd W Suite 500			FEC Identification Number C	
City Minneapolis	State MN	Zip Code 55431	Amount of Each Disbursement this Period 341.58	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type 001	Transaction ID : SB17-EX324	
Candidate Name		Memo Item Credit Card Processing Fee		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Vanco Services			Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2016	
Mailing Address 3800 American Blvd W Suite 500			FEC Identification Number C	
City Minneapolis	State MN	Zip Code 55431	Amount of Each Disbursement this Period 71.53	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	Transaction ID : SB17-EX372	
Candidate Name		Memo Item Credit Card Service Fee		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	552.20
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Vanco Services		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016
Mailing Address 3800 American Blvd W Suite 500		FEC Identification Number C
City Minneapolis	State MN	Zip Code 55431
Purpose of Disbursement Credit Card Service Fee	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 18.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17-EX359
State: District:	<input type="checkbox"/> Memo Item Credit Card Service Fee	

Full Name (Last, First, Middle Initial) B. Conquest Communications Group		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2016
Mailing Address 2812 Emerywood Pkwy Suite 103		FEC Identification Number C
City Richmond	State VA	Zip Code 23294
Purpose of Disbursement Voter Calls	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 3052.80
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17-EX293
State: District:	<input type="checkbox"/> Memo Item Voter Calls	

Full Name (Last, First, Middle Initial) C. Comcast		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016
Mailing Address PO Box 35170		FEC Identification Number C
City Seattle	State WA	Zip Code 98124
Purpose of Disbursement Internet and Telephone	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 528.68
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17-EX328
State: District:	<input type="checkbox"/> Memo Item Internet and Telephone	

SUBTOTAL of Disbursements This Page (optional).....▶	3599.98
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 57
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

A. Advantage Direct

Full Name (Last, First, Middle Initial)
Mailing Address 2300 Clarendon Blvd Ste 303
City Arlington State VA Zip Code 22201
Purpose of Disbursement GOTV Calls
Candidate Name
Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement: 08 / 11 / 2016
FEC Identification Number: C
Amount of Each Disbursement this Period: 2193.24
Transaction ID : SB17-EX334
 Memo Item GOTV Calls

B. The Townsend Group

Full Name (Last, First, Middle Initial)
Mailing Address 1006 Pendleton St
City Alexandria State VA Zip Code 22314
Purpose of Disbursement PAYMENT: SEE BELOW
Candidate Name
Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement: 08 / 11 / 2016
FEC Identification Number: C
Amount of Each Disbursement this Period: 6936.58
Transaction ID : SB17-EX335
 Memo Item PAYMENT: SEE BELOW

c. The Townsend Group

Full Name (Last, First, Middle Initial)
Mailing Address 1006 Pendleton St
City Alexandria State VA Zip Code 22314
Purpose of Disbursement Fundraising Retainer
Candidate Name
Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼
State: District:

Date of Disbursement: 08 / 11 / 2016
FEC Identification Number: C
Amount of Each Disbursement this Period: 2500.00
Transaction ID : SB17-EX336
 Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 9129.82

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 57	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. The Townsend Group			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016	
Mailing Address 1006 Pendleton St			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 4436.58	
Purpose of Disbursement Fundraising Commission		Category/ Type 003	Transaction ID : SB17-EX337	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	142349.45

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 57			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Barry, Walter, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 2960 Gale Rd			FEC Identification Number C		
City Wayzata	State MN	Zip Code 55391	Amount of Each Disbursement this Period 1500.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR1		
Candidate Name			Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Carron, Richard, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 17555 Kodiak Ace			FEC Identification Number C		
City Lakeville	State MN	Zip Code 55044	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR13		
Candidate Name			Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Eckles, William, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 1097 Highland Dr			FEC Identification Number C		
City Blue Earth	State MN	Zip Code 56013	Amount of Each Disbursement this Period 800.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR5		
Candidate Name			Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 57			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Griffin, Kenneth, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 131 S. Dearborn St			FEC Identification Number C		
City Chicago	State IL	Zip Code 60603	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR2		
Candidate Name			Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Habe, John, , , IV			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 6936 Eagle Mills Rd			FEC Identification Number C		
City Waite Hill	State OH	Zip Code 44094	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR14		
Candidate Name			Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Habe, Lisa, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 6938 Eagle Road			FEC Identification Number C		
City Waite Hill	State OH	Zip Code 44094	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR4		
Candidate Name			Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	8100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 57			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Immelt, Jeffrey, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 705 West Rd			FEC Identification Number C		
City New Canaan	State CT	Zip Code 06840	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR11		
Candidate Name		Memo Item Refund of General Contribution			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Knuepfer, David, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 765 Park Blvd N			FEC Identification Number C		
City Glen Ellyn	State IL	Zip Code 60137	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR10		
Candidate Name		Memo Item Refund of General Contribution			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Knuepfer, Marcia, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 765 Park Blvd N			FEC Identification Number C		
City Glen Ellyn	State IL	Zip Code 60137	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR9		
Candidate Name		Memo Item Refund of General Contribution			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	8100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 57			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. McMahon, Linda, E, Ms.,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 14 Hurlingham Dr			FEC Identification Number C		
City Greenwich	State CT	Zip Code 06831	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR23		
Candidate Name		<input type="checkbox"/> Memo Item Refund of General Contribution			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Miller, Darlene, Mary, ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 3629 Crystal Bay Ln NW			FEC Identification Number C		
City Prior Lake	State MN	Zip Code 55372	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR8		
Candidate Name		<input type="checkbox"/> Memo Item Refund of General Contribution			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Myhre, Kathryn, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 9021 Ivy Ave N			FEC Identification Number C		
City Stillwater	State MN	Zip Code 55082	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR17		
Candidate Name		<input type="checkbox"/> Memo Item Refund of General Contribution			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	8100.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 57			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Myhre, Terry, , Mr.,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 9021 Ivy Ave N			FEC Identification Number C		
City Stillwater	State MN	Zip Code 55082	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR16		
Candidate Name			Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. O'Hara, Brian, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 15201 Rockaway Blvd			FEC Identification Number C		
City Jamaica	State NY	Zip Code 11434	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR12		
Candidate Name			Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Page, Gregory, R, ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 512 Harrington Rd			FEC Identification Number C		
City Wayzata	State MN	Zip Code 55391	Amount of Each Disbursement this Period 800.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR3		
Candidate Name			Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	6200.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 57			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Paulucci, Gina, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 320 Woodhill Rd			FEC Identification Number C		
City Wayzata	State MN	Zip Code 55391	Amount of Each Disbursement this Period 1300.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR7		
Candidate Name			<input type="checkbox"/> Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Stephenson, Donna, Y, Ms.,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address PO Box 43326			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30336	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR20		
Candidate Name			<input type="checkbox"/> Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Stephenson, James, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address PO Box 43326			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30336	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR21		
Candidate Name			<input type="checkbox"/> Memo Item Refund of General Contribution		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	6700.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 57			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Terwilliger, Patricia, B, Ms.,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 6020 Winterthur Dr			FEC Identification Number C		
City Atlanta	State GA	Zip Code 30328	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR22		
Candidate Name		<input type="checkbox"/> Memo Item Refund of General Contribution			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Ulrich, Robert, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 5400 Londonderry Rd			FEC Identification Number C		
City Minneapolis	State MN	Zip Code 55436	Amount of Each Disbursement this Period 2700.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR15		
Candidate Name		<input type="checkbox"/> Memo Item Refund of General Contribution			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Wine, Scott, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 18515 8th Ave N			FEC Identification Number C		
City Plymouth	State MN	Zip Code 55447	Amount of Each Disbursement this Period 2300.00		
Purpose of Disbursement Contribution Ref to Individual		Category/ Type	Transaction ID : SB20a-CR6		
Candidate Name		<input type="checkbox"/> Memo Item Refund of General Contribution			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	7700.00
TOTAL This Period (last page this line number only).....▶	49900.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 57			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input checked="" type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Darlene Miller for Congress

Full Name (Last, First, Middle Initial) A. Freedom And Security PAC			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 228 Washington St S Ste 115			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314	Amount of Each Disbursement this Period 5000.00		
Purpose of Disbursement Contribution Refund to MCPC		Category/ Type	Transaction ID : SB20c-CR19		
Candidate Name		Memo Item Refund of General Contribution			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Minn-Dak Farmers Coop Sugar Pac			Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2016		
Mailing Address 7525 Red River Rd			FEC Identification Number C		
City Wahpeton	State ND	Zip Code 58075	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement Contribution Refund to MCPC		Category/ Type	Transaction ID : SB20c-CR18		
Candidate Name		Memo Item Refund of General Contribution			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	6000.00