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**FEC FORM 6** 

(Revised 07/2011)

## 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Matt Miller for Congress 20	)14			]	
ADDRESS (number and street) 15332 Antioch S				-	
Number 529	hoor				
CITY, STATE, and ZIP CODE				-	
Pacific Palisades		CA 902			
2. NAME OF CANDIDATE Matt Miller		3. OFFICE SOUGHT (State and District) House CA 33		4. FEC IDENTIFICATION NUMBER	
		House	CA 33	C00557256	
5. IS THIS AN AMENDMENT? NO, THIS IS A	NEW FILING	YES, IT AMENDS THE	NOTICE FILED ON	/ / _	
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month, day, year)	Amount
Mark Attanasio		Milwaukee Brewers		uay, year)	
1110 Santa Manica Dhud Suita 200				05/16/2014	2600.00
1110 Santa Monica Blvd., Suite 200		Transaction ID : VNJ4ECQYDM2			
		Occupation		-	
Los Angeles	CA 90225	Owner			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month,	Amount
Zachary Druker		WME		day, year)	
				05/15/2014	1000.00
1563 N Doheny Dr					
		Transaction ID : VNJ4ECQW476 Occupation		_	
Los Angeles	CA 90069-1103	Tv Lit Agent			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month,	Amount
Mark Elliott		Self		day, year)	
				05/15/2014	1500.00
1360 Lachman Ln					
		Transaction ID : VNJ4ECQSNQ3		_	
Pacific Palisades	CA 90272-2230	Occupation VoiceOver Artist			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month,	Amount
Peter Fisher		N/A		day, year)	
				05/15/2014	1000.00
744 Brooktree Rd					
		Transaction ID : VN	J4ECQSP12		
Pacific Palisades	CA 90272-3901	Occupation Investor			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE				Date (month,	Amount
Stewart Middler, MD		Name of Employer Cedars-Sinai Medic	al Group	day, year)	
Stewart Middler, MD		Cedars-Sinar Medic		05/16/2014	1000.00
2695 Old Topanga Canyon Rd				00/10/2014	1000.00
		Transaction ID : VNJ4ECQWM04			
Topanga	CA 90290-4124	Occupation Physician			
SIGNATURE (optional)		riyololari	DATE	For further inf	ormation contact:
Shelly R Moskwa		05/17/2014		For further information contact: Federal Election Commission	
		[Electronically Filed]			Washington, DC 20463 530, Local 202-694-1100
			1	1	

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

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1. NAME OF COMMITTEE IN FULL Matt Miller for Congress 2014	]		
ADDRESS (number and street) 15332 Antioch Street Number 529	-		
CITY, STATE, and ZIP CODE			2000
Pacific Palisades	CA 90272	continuation	
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION NUMBER	
Matt Miller	House CA 33	C00557256	
5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON	/ / _	
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
Samuel Newman	Gibson Dunn	day, year)	
		05/15/2014	1000.00
215 S Valley Dr			
	Transaction ID : VNJ4ECQVZ99	_	
Manhattan Beach CA 90266-655	Occupation 52 Lourser		
	Lawyer	Date (month,	Amount
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	day, year)	Amount
Jane Rissman	Jane Rissman		
10468 Le Conte Ave		05/16/2014	1000.00
10468 Le Conte Ave	Transaction ID : VNJ4ECQXDT1		
	Occupation		
Los Angeles CA 90024-330			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
		day, year)	
	Occupation		
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
		uuy, you.,	
		_	
	Occupation		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
		day, year)	
	Occupation	-	

