

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE 14 APR 15 PM 5:04

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Citizens for Joe Miller

ADDRESS (number and street) 913 College Road

Check if different than previously reported. (ACC) Fairbanks AK 99701

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE STATE DISTRICT

C00522730

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)

Election on MM/DD/YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY 01/01/2014 through 03/31/2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Bernadette Koppy

Signature of Treasurer Bernadette Koppy Date 04/15/2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Table with 10 columns for Office Use Only

14020214484

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Citizens for Joe Miller**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	101389.37	163967.96
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	101389.37	163967.96
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	37751.50	210415.96
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	50.55
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	37751.50	210365.41
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	295354.83	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..</b>	0.00	

**For further information contact:**

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

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

14020214485

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 70

Write or Type Committee Name  
**Citizens for Joe Miller**

Report Covering the Period: From: 

M	M
01	01

 / 

D	D
01	01

 / 

Y	Y	Y	Y
2014			

 To: 

M	M
03	31

 / 

D	D
31	31

 / 

Y	Y	Y	Y
2014			

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)...	69472.33	95947.33
(ii) Unitemized .....	29917.04	66020.63
(iii) TOTAL of contributions from individuals .	99389.37	161967.96
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	2000.00	2000.00
(d) The Candidate .....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	101389.37	163967.96
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..</b>	0.00	435459.57
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..</b>	0.00	50.55
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	11.12	375.71
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...</b>	101400.49	599853.79

14020214486

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	37751.50	210415.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	0.00	0.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS ...	0.00	94083.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	37751.50	304498.96

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	231705.84
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	101400.49
25. SUBTOTAL (add Line 23 and Line 24)...	333106.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	37751.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	295354.83

14020214487

**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 5 OF 70	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements 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.

NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**DEBRA BLOCK**

Mailing Address P.O. BOX 777596

City: HENDERSON State: NV Zip Code: 89077-7596

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

Name of Employer: Occupation  
INFORMATION REQUESTED PER BEST EFF. INFORMATION REQUESTED PER BEST EFF.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: MM/DD/YYYY  
02/13/2014

Transaction ID : SA11.46955

Amount of Each Receipt this Period  
CONTRIBUTION: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. NORMAN D. AMSTRUP**

Mailing Address P.O. BOX 82765

City: FAIRBANKS State: AK Zip Code: 99708-2765

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

Name of Employer: Occupation  
F.D.I. CONSTRUCTION WORKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: MM/DD/YYYY  
03/18/2014

Transaction ID : SA11.47645

Amount of Each Receipt this Period  
CONTRIBUTION: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**GREG ANDERSON**

Mailing Address PO BOX 871945

City: WASILLA State: AK Zip Code: 99687-1945

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

Name of Employer: Occupation  
ATLAS AIR INC. PILOT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 600.00

Date of Receipt: MM/DD/YYYY  
01/16/2014

Transaction ID : SA11.47019

Amount of Each Receipt this Period  
CONTRIBUTION: 100.00

**SUBTOTAL** of Receipts This Page (optional).....

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

2100.00

14020214488

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

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

FOR LINE NUMBER: PAGE 6 OF 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**GREG ANDERSON**

Mailing Address **PO BOX 871945**

City **WASILLA** State **AK** Zip Code **99687-1945**

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

Name of Employer **ATLAS AIR INC.** Occupation **PILOT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
**02 / 16 / 2014**

Transaction ID : **SA11.47021**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DAVID L. BARNES**

Mailing Address **950 S JOANNE DR.**

City **PALMER** State **AK** Zip Code **99645-8945**

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

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
**01 / 27 / 2014**

Transaction ID : **SA11.47499**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SUSAN BARNES**

Mailing Address **950 S JOANNE DR.**

City **PALMER** State **AK** Zip Code **99645-8945**

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

Name of Employer **SELF-EMPLOYED** Occupation **VETERINARIAN**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
**01 / 27 / 2014**

Transaction ID : **SA11.47500**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**5300.00**

1402021489

**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 7 OF 70
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**JO ANN BAUGHMAN**

Mailing Address P.O. BOX 1269

City: **PHILOMATH** State: **OR** Zip Code: **97370-1269**

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

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **271.00**

Date of Receipt: **03 / 29 / 2014**

Transaction ID: **SA11.47285**

Amount of Each Receipt this Period: **39.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JO ANN BAUGHMAN**

Mailing Address P.O. BOX 1269

City: **PHILOMATH** State: **OR** Zip Code: **97370-1269**

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

Name of Employer: **RETIRED** Occupation: **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **271.00**

Date of Receipt: **02 / 01 / 2014**

Transaction ID: **SA11.47438**

Amount of Each Receipt this Period: **41.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FERRIS BELLAMAK**

Mailing Address **5830 N. 42ND ST.**

City: **PHOENIX** State: **AZ** Zip Code: **85018-1113**

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

Name of Employer: **INFORMATION REQUESTED PER BEST EFF** Occupation: **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **02 / 26 / 2014**

Transaction ID: **SA11.47760**

Amount of Each Receipt this Period: **250.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**330.00**

14020214490

**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 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RONALD R. BLAKEMAN**

Mailing Address **3408 WYOMING DR.**

City **ANCHORAGE** State **AK** Zip Code **99517-2071**

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

Name of Employer **ANCHORAGE SCHOOL DISTRICT** Occupation **CARPENTER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 03 / 2014**

Transaction ID : **SA11.46543**

Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RONALD R. BLAKEMAN**

Mailing Address **3408 WYOMING DR.**

City **ANCHORAGE** State **AK** Zip Code **99517-2071**

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

Name of Employer **ANCHORAGE SCHOOL DISTRICT** Occupation **CARPENTER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2014**

Transaction ID : **SA11.47681**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FLOYD BROWN**

Mailing Address **41620 N Shadow Creek Way**

City **Anthem** State **AZ** Zip Code **85086**

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

Name of Employer **Western Journalism** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11.158566**

Amount of Each Receipt this Period  
**2600.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**3050.00**

1402021491



**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 70
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. GLORIA A. BURCELL**

Mailing Address **PO BOX 82283**

City **FAIRBANKS** State **AK** Zip Code **99708-2283**

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

Name of Employer **THE COOKIE JAR RESTAURANT** Occupation **RESTAURANT OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 12 / 2014**

Transaction ID : **SA11.47127**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SCOTT CAMPBELL**

Mailing Address **1150 S. Colony Way, Suite 3, Pmb 2**

City **Palmer** State **AK** Zip Code **99645**

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

Name of Employer **EXXONMOBIL** Occupation **SECURITY MANAGER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11.158562**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle initial)  
**SCOTT CAMPBELL**

Mailing Address **291 E BRIDGE STONE DRIVE**

City **WASILLA** State **AK** Zip Code **99654-5629**

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

Name of Employer **EXXONMOBIL** Occupation **SECURITY CONSULTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 04 / 2014**

Transaction ID : **SA11.47741**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**1250.00**

1402021492

**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 10 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**WALTER CAMPBELL**

Mailing Address **1980 N MIDTOWN DRIVE**

City **PALMER** State **AK** Zip Code **99645-9324**

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

Name of Employer **SELF-ARCTIC CHIROPRACTIC** Occupation **CHIROPRACTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 04 / 2014**

Transaction ID : **SA11.47740**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. SUE M. CANNON**

Mailing Address **6420 W. LAKERIDGE ROAD**

City **LAKEWOOD** State **CO** Zip Code **80227-3909**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11.47707**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SETH CHURCH**

Mailing Address **17 ADAK AVE**

City **FAIRBANKS** State **AK** Zip Code **99701-3203**

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

Name of Employer **C COMPANY** Occupation **OIL FIELD SERVICES**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 23 / 2014**

Transaction ID : **SA11.47224**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**2500.00**

1402021493

**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 11 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES CLARKSON**

Mailing Address **314 SAN CARLOS AVE.**

City **PIEDMONT** State **CA** Zip Code **94611-**

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

Name of Employer **SO. SAN FRANCISCO SCHOOLS** Occupation **TEACHER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11.47060**

Amount of Each Receipt this Period  
**50.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JAMES CLARKSON**

Mailing Address **314 SAN CARLOS AVE.**

City **PIEDMONT** State **CA** Zip Code **94611-**

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

Name of Employer **SO. SAN FRANCISCO SCHOOLS** Occupation **TEACHER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2014**

Transaction ID : **SA11.47324**

Amount of Each Receipt this Period  
**50.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JAMES CLARKSON**

Mailing Address **314 SAN CARLOS AVE.**

City **PIEDMONT** State **CA** Zip Code **94611-**

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

Name of Employer **SO. SAN FRANCISCO SCHOOLS** Occupation **TEACHER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 01 / 2014**

Transaction ID : **SA11.47441**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**125.00**

**CONTRIBUTION**

14020214494

**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 70  
 (check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**GAIL CRANE**

Mailing Address **4205 OREN AVENUE**

City **CORNING** State **CA** Zip Code **96021-9647**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 17 / 2014**

Transaction ID : **SA11.47000**

Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GAIL CRANE**

Mailing Address **4205 OREN AVENUE**

City **CORNING** State **CA** Zip Code **96021-9647**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 12 / 2014**

Transaction ID : **SA11.47122**

Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**Dr. DIANE M. DANGELO**

Mailing Address **1235 N GLENHURST DR**

City **BIRMINGHAM** State **MI** Zip Code **48009**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 30 / 2014**

Transaction ID : **SA11.158569**

Amount of Each Receipt this Period  
**40.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**440.00**

14020214495

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

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

FOR LINE NUMBER: PAGE 13 OF 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**PAM DAVIS**

Mailing Address **55 HACIENDA CARMEL**

City **CARMEL** State **CA** Zip Code **93923-9560**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**02 / 19 / 2014**

Transaction ID : **SA11.47023**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PAM DAVIS**

Mailing Address **55 HACIENDA CARMEL**

City **CARMEL** State **CA** Zip Code **93923-9560**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**03 / 01 / 2014**

Transaction ID : **SA11.47069**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PAM DAVIS**

Mailing Address **55 HACIENDA CARMEL**

City **CARMEL** State **CA** Zip Code **93923-9560**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**02 / 06 / 2014**

Transaction ID : **SA11.47466**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**75.00**

14020214496

**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 14 OF 70		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**PAM DAVIS**

Mailing Address **55 HACIENDA CARMEL**

City **CARMEL** State **CA** Zip Code **93923-9560**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**01 / 12 / 2014**

Transaction ID : **SA11.47527**

Amount of Each Receipt this Period  
**25.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CAROLE DESOTO**

Mailing Address **525 BRIDGEVIEW**

City **LEMOYNE** State **PA** Zip Code **17043-1380**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 17 / 2014**

Transaction ID : **SA11.47165**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RANDY DESOTO**

Mailing Address **5506 AURELIA STREET**

City **SIMI VALLEY** State **CA** Zip Code **93063**

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

Name of Employer **SELF EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2570.00**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA1948379**

Amount of Each Receipt this Period  
**2570.00**  
CONTRIBUTION

IN-KIND: TRAVEL

**SUBTOTAL** of Receipts This Page (optional).....

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

**3595.00**

1402021497

**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 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**ANDY EFAW**

Mailing Address **1837 W. 39TH AVE.**

City **DENVER** State **CO** Zip Code **80211-2228**

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

Name of Employer **WHEELER TRIGG O'DONNELL** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11.47598**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DWAYNE ENGELBRECHT**

Mailing Address **P.O. BOX 764**

City **PALMER** State **AK** Zip Code **99645-0764**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 04 / 2014**

Transaction ID : **SA11.47753**

Amount of Each Receipt this Period  
**400.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JULIE FOSTER**

Mailing Address **2390 UPLONG S.**

City **WEST BLOOMFIELD** State **MI** Zip Code **48324-1879**

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

Name of Employer **THE BOB AND BETTY FOUNDATION** Occupation **PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 23 / 2014**

Transaction ID : **SA11.47407**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**1650.00**

14020214498

**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 16 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN M. GALLAGHER**

Mailing Address **5408 S. WOODLAND AVE.**

City **WESTERN SPRINGS** State **IL** Zip Code **60558-1856**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 15 / 2014**

Transaction ID : **SA11.47412**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOHN M. GALLAGHER**

Mailing Address **5408 S. WOODLAND AVE.**

City **WESTERN SPRINGS** State **IL** Zip Code **60558-1856**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 15 / 2014**

Transaction ID : **SA11.47427**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOHN M. GALLAGHER**

Mailing Address **5408 S. WOODLAND AVE.**

City **WESTERN SPRINGS** State **IL** Zip Code **60558-1856**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 15 / 2014**

Transaction ID : **SA11.47521**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**75.00**

14020214499



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

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

FOR LINE NUMBER: PAGE 17 OF 70  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. JOYCE M. GREEN**

Mailing Address **214 BAYOU DRIVE**

City **BEAUMONT** State **TX** Zip Code **77705-8353**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt: **02 / 13 / 2014**

Transaction ID : **SA11.46953**

Amount of Each Receipt this Period  
**100.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JOYCE M. GREEN**

Mailing Address **214 BAYOU DRIVE**

City **BEAUMONT** State **TX** Zip Code **77705-8353**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt: **02 / 24 / 2014**

Transaction ID : **SA11.47046**

Amount of Each Receipt this Period  
**100.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS GRIER**

Mailing Address **3134 E. MCKELLIPS**

City **MESA** State **AZ** Zip Code **85213-3145**

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

Name of Employer **THE KEATING GROUP, INC.** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt: **02 / 25 / 2014**

Transaction ID : **SA11.47048**

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**450.00**

14020214500

**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 70	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MR. BILLY E. HALE**

Mailing Address 11823 WILCREST

City HOUSTON State TX Zip Code 77031-1919

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

Name of Employer RUBE HOLDINGS, LTD Occupation INVESTMENT BUILDER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
MM / DD / YYYY  
**01 / 29 / 2014**

Transaction ID : SA11.46906

Amount of Each Receipt this Period  
**100.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. BILLY E. HALE**

Mailing Address 11823 WILCREST

City HOUSTON State TX Zip Code 77031-1919

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

Name of Employer RUBE HOLDINGS, LTD Occupation INVESTMENT BUILDER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 07 / 2014**

Transaction ID : SA11.46914

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. BILLY E. HALE**

Mailing Address 11823 WILCREST

City HOUSTON State TX Zip Code 77031-1919

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

Name of Employer RUBE HOLDINGS, LTD Occupation INVESTMENT BUILDER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 25 / 2014**

Transaction ID : SA11.47232

Amount of Each Receipt this Period  
**500.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**850.00**

**850.00**

14020214501

**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 19 OF 70		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/>
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD HAND**

Mailing Address **18221 E. ST ANTHONY CIRCLE**

City **PALMER** State **AK** Zip Code **99645-8170**

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

Name of Employer **FEDEX** Occupation **PILOT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**02 / 20 / 2014**

Transaction ID : **SA11.47026**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. EVA M. HANSEN**

Mailing Address **3325 SPARROW COURT**

City **PALMER** State **AK** Zip Code **99645-9109**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **DENTAL ASSISTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**01 / 03 / 2014**

Transaction ID : **SA11.46545**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ANNE HARRILL**

Mailing Address **1227 WOODS HAVEN ROAD**

City **EVERGREEN** State **CO** Zip Code **80439**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **280.00**

Date of Receipt  
**03 / 30 / 2014**

Transaction ID : **SA11.158570**

Amount of Each Receipt this Period  
**15.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**1515.00**

14020214502

**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 20 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**ANNE HARRILL**

Mailing Address **1227 WOODS HAVEN RD**

City **EVERGREEN** State **CO** Zip Code **80439-4248**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **265.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 29 / 2014**

Transaction ID : **SA11.47301**

Amount of Each Receipt this Period  
**50.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ANNE HARRILL**

Mailing Address **1227 WOODS HAVEN RD**

City **EVERGREEN** State **CO** Zip Code **80439-4248**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **265.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11.47420**

Amount of Each Receipt this Period  
**15.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ANNE HARRILL**

Mailing Address **1227 WOODS HAVEN RD**

City **EVERGREEN** State **CO** Zip Code **80439-4248**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **265.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 30 / 2014**

Transaction ID : **SA11.47454**

Amount of Each Receipt this Period  
**15.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**80.00**

14020214503

**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 21 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH A. HAWES**

Mailing Address **6642 W. 83RD ST.**  
**# 502**

City **OVERLAND PARK** State **KS** Zip Code **66204-3953**

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

Name of Employer **KOCHER & BECK USA, L.P.** Occupation **ACCOUNTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 02 / 2014**

Transaction ID : **SA11.47557**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH A. HAWES**

Mailing Address **6642 W. 83RD ST.**  
**# 502**

City **OVERLAND PARK** State **KS** Zip Code **66204-3953**

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

Name of Employer **KOCHER & BECK USA, L.P.** Occupation **ACCOUNTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 28 / 2014**

Transaction ID : **SA11.47685**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES W. HESS**

Mailing Address **70 KENDALL DRIVE**

City **RINGWOOD** State **NJ** Zip Code **07456-1841**

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

Name of Employer **CB&I** Occupation **NUCLEAR ENGINEER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 15 / 2014**

Transaction ID : **SA11.47146**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**600.00**

14020214504

**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 22 OF 70
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES W. HESS**

Mailing Address **70 KENDALL DRIVE**

City **RINGWOOD** State **NJ** Zip Code **07456-1841**

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

Name of Employer **CB&I** Occupation **NUCLEAR ENGINEER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 27 / 2014**

Transaction ID : **SA11.47487**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN E. HITE**

Mailing Address **8050 SUMMERSET DRIVE**

City **ANCHORAGE** State **AK** Zip Code **99518-2924**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 29 / 2014**

Transaction ID : **SA11.46904**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WADE HOBBS**

Mailing Address **5713 MONALEE AVE**

City **SACRAMENTO** State **CA** Zip Code **95819-2523**

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

Name of Employer **U.S. DOT/FHWA** Occupation **CIVIL SERVICE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 06 / 2014**

Transaction ID : **SA11.47467**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**1350.00**

14020214505

**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 23 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**LYNN HOFFMAN**

Mailing Address **101 SHADY LANE**

City **CARLISLE** State **PA** Zip Code **17013-1636**

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

Name of Employer **SELF EMPLOYED** Occupation **SALES**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 28 / 2014**

Transaction ID : **SA11.47270**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LEE M. HOLMES**

Mailing Address **P.O. BOX AR**

City **HAGATNA** State **GU** Zip Code **96932-7564**

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

Name of Employer **SOUTHERN MEDIA, INC.** Occupation **MANAGER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 19 / 2014**

Transaction ID : **SA11.47010**

Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**EARL HOLT**

Mailing Address **1703 CLARENDON**

City **LONGVIEW** State **TX** Zip Code **75601-3529**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 06 / 2014**

Transaction ID : **SA11.47472**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**1200.00**

14020214506

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

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

FOR LINE NUMBER: PAGE 24 OF 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**VAUGHN INGRAM**

Mailing Address **630 E. ELIZABETH ST.**

City **MCPHERSON** State **KS** Zip Code **67460-4406**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**03 / 28 / 2014**

Transaction ID : **SA11.47699**

Amount of Each Receipt this Period  
**2000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT JOHN**

Mailing Address **P.O. BOX 73570**

City **FAIRBANKS** State **AK** Zip Code **99707-3570**

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

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**02 / 20 / 2014**

Transaction ID : **SA11.47028**

Amount of Each Receipt this Period  
**300.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JIM JOHNSON**

Mailing Address **P.O. BOX 1144**

City **TROY** State **MT** Zip Code **59935-1144**

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

Name of Employer **CHLOR RID** Occupation **MARKETING**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
**02 / 10 / 2014**

Transaction ID : **SA11.46917**

Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**2500.00**

14020214507



**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 25 OF 70		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**JIM JOHNSON**

Mailing Address P.O. BOX 1144

City: TROY State: MT Zip Code: 59935-1144

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

Name of Employer: CHLOR RID Occupation: MARKETING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 550.00

Date of Receipt: 03 / 28 / 2014

Transaction ID : SA11.47259

Amount of Each Receipt this Period: 300.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MATT D. JOHNSON**

Mailing Address P.O. BOX 670791

City: CHUGIAK State: AK Zip Code: 99567-0791

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

Name of Employer: SELF EMPLOYED Occupation: CONSULTANT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1100.00

Date of Receipt: 03 / 31 / 2014

Transaction ID : SA11.47715

Amount of Each Receipt this Period: 1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JAMES KEATING**

Mailing Address 4019 E SAN MIGUEL

City: Phoenix State: AZ Zip Code: 85018

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

Name of Employer: THE KEATING GROUP INC Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2599.55

Date of Receipt: 03 / 31 / 2014

Transaction ID : SA11.158567

Amount of Each Receipt this Period: 1643.00

**SUBTOTAL** of Receipts This Page (optional).....

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

2943.00

14020214508

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

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

FOR LINE NUMBER: PAGE 26 OF 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES KEATING**

Mailing Address **4019 E SAN MIGUEL**

City State Zip Code  
**PHOENIX AZ 85018**

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

Name of Employer Occupation  
**THE KEATING GROUP CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2599.55**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA545232**

Amount of Each Receipt this Period  
**956.55**  
 CONTRIBUTION

IN-KIND-EVENT SUPPLIES (EQUIPMENT/FACILITY RENTAL)

**B.** Full Name (Last, First, Middle Initial)  
**DENIS KERASOTES**

Mailing Address **31 FAIRVIEW LANE**

City State Zip Code  
**SPRINGFIELD IL 62711-9455**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
**02 / 16 / 2014**

Transaction ID : **SA11.46992**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DENIS KERASOTES**

Mailing Address **31 FAIRVIEW LANE**

City State Zip Code  
**SPRINGFIELD IL 62711-9455**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
**02 / 24 / 2014**

Transaction ID : **SA11.47045**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**1156.55**

14020214509

**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 27 OF 70
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**DENIS KERASOTES**

Mailing Address **31 FAIRVIEW LANE**

City **SPRINGFIELD** State **IL** Zip Code **62711-9455**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11.47199**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GARY KREEP**

Mailing Address **932 D STREET, SUITE 2**

City **RAMONA** State **CA** Zip Code **92065-2355**

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

Name of Employer **STATE OF CALIFORNIA** Occupation **JUDGE**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11.47599**

Amount of Each Receipt this Period  
**450.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ANNA LAROCHE**

Mailing Address **P.O. BOX 110**

City **KENAI** State **AK** Zip Code **99611-0110**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 26 / 2014**

Transaction ID : **SA11.47763**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**1550.00**

14020214510

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

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

FOR LINE NUMBER: PAGE 28 OF 70  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**DAN LEWIS**

Mailing Address **3901 PRIMA BUCA**

City **YORBA LINDA** State **CA** Zip Code **92886-2867**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **249.00**

Date of Receipt  
**MM / DD / YYYY**  
**02 / 15 / 2014**

Transaction ID : **SA11.46975**

Amount of Each Receipt this Period  
**150.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DAN LEWIS**

Mailing Address **3901 PRIMA BUCA**

City **YORBA LINDA** State **CA** Zip Code **92886-2867**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **249.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 11 / 2014**

Transaction ID : **SA11.47106**

Amount of Each Receipt this Period  
**99.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MARTIN LIND**

Mailing Address **1625 PELICAN POINT, SUITE 201**

City **WINDSOR** State **CO** Zip Code **80550-**

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

Name of Employer **SELF EMPLOYED** Occupation **LAND DEVELOPMENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 28 / 2014**

Transaction ID : **SA11.47780**

Amount of Each Receipt this Period  
**2500.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**2749.00**

14020214511

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

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

FOR LINE NUMBER: PAGE 29 OF 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**VIKI LIND**

Mailing Address **1625 PELICAN POINT, SUITE 201**

City **WINDSOR** State **CO** Zip Code **80550-**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 28 / 2014**

Transaction ID : **SA11.47779**

Amount of Each Receipt this Period  
**2500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MARGARET LOCKWOOD**

Mailing Address **602 EAST PALLADIUM DRIVE**

City **JOLIET** State **IL** Zip Code **60435-5677**

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

Name of Employer **NONE** Occupation **NONE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 30 / 2014**

Transaction ID : **SA11.47347**

Amount of Each Receipt this Period  
**300.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. GREGG C. MACDONALD JR.**

Mailing Address **P.O. BOX 61618**

City **FAIRBANKS** State **AK** Zip Code **99706-1618**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**

Transaction ID : **SA11.47644**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**3300.00**

14020214512

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

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

FOR LINE NUMBER: PAGE 30 OF 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**TERRY MARSH**

Mailing Address **63 LAZY CREEK LANE**

City **SEQUIM** State **WA** Zip Code **98382-7809**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**02 / 16 / 2014**

Transaction ID : **SA11.46989**

Amount of Each Receipt this Period  
**15.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TERRY MARSH**

Mailing Address **63 LAZY CREEK LANE**

City **SEQUIM** State **WA** Zip Code **98382-7809**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**03 / 12 / 2014**

Transaction ID : **SA11.47119**

Amount of Each Receipt this Period  
**15.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TERRY MARSH**

Mailing Address **63 LAZY CREEK LANE**

City **SEQUIM** State **WA** Zip Code **98382-7809**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**03 / 18 / 2014**

Transaction ID : **SA11.47182**

Amount of Each Receipt this Period  
**15.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**45.00**

14020214513

**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 31 OF 70	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

Any information copied from such Reports and Statements 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.

NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**TERRY MARSH**

Mailing Address **63 LAZY CREEK LANE**

City **SEQUIM** State **WA** Zip Code **98382-7809**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**03 / 30 / 2014**

Transaction ID : **SA11.47313**

Amount of Each Receipt this Period  
**15.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TERRY MARSH**

Mailing Address **63 LAZY CREEK LANE**

City **SEQUIM** State **WA** Zip Code **98382-7809**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**01 / 31 / 2014**

Transaction ID : **SA11.47448**

Amount of Each Receipt this Period  
**15.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TERRY MARSH**

Mailing Address **63 LAZY CREEK LANE**

City **SEQUIM** State **WA** Zip Code **98382-7809**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**02 / 06 / 2014**

Transaction ID : **SA11.47468**

Amount of Each Receipt this Period  
**15.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**45.00**

14020214514

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

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

FOR LINE NUMBER: PAGE 32 OF 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**TERRY MARSH**

Mailing Address **63 LAZY CREEK LANE**

City **SEQUIM** State **WA** Zip Code **98382-7809**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**01 / 09 / 2014**

Transaction ID : **SA11.47530**

Amount of Each Receipt this Period  
**15.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TERRY MARSH**

Mailing Address **63 LAZY CREEK LANE**

City **SEQUIM** State **WA** Zip Code **98382-7809**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11.47591**

Amount of Each Receipt this Period  
**20.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LOUIS MAYER**

Mailing Address **PO BOX 230689**

City **ANCHORAGE** State **AK** Zip Code **99523-**

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

Name of Employer **INDEPENDENCE PARK MEDICAL** Occupation **PHYSICIAN**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**01 / 27 / 2014**

Transaction ID : **SA11.46885**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**285.00**

14020214515



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

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

FOR LINE NUMBER: PAGE 33 OF 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. CANDUS MILLER**

Mailing Address **P.O. BOX 876854**

City **WASILLA** State **AK** Zip Code **99687-6854**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
**01 / 03 / 2014**

Transaction ID : **SA11.46539**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. CANDUS MILLER**

Mailing Address **P.O. BOX 876854**

City **WASILLA** State **AK** Zip Code **99687-6854**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
**01 / 03 / 2014**

Transaction ID : **SA11.46540**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. CANDUS MILLER**

Mailing Address **P.O. BOX 876854**

City **WASILLA** State **AK** Zip Code **99687-6854**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
**03 / 21 / 2014**

Transaction ID : **SA11.47653**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**750.00**

14020214516

**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 34 OF 70	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. CANDUS MILLER**

Mailing Address **PO BOX 876854**

City **WASILLA** State **AK** Zip Code **99687**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1270.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2014**

Transaction ID : **SA5865242**

Amount of Each Receipt this Period  
**520.00**

CONTRIBUTION

IN-KIND: TRAVEL

**B.** Full Name (Last, First, Middle Initial)  
**JOHN MILLER**

Mailing Address **P.O. BOX 876854**

City **WASILLA** State **AK** Zip Code **99687-6854**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 21 / 2014**

Transaction ID : **SA11.47668**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MARK MILLER**

Mailing Address **13582 Lake Shore Drive**

City **Clive** State **IA** Zip Code **50325**

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

Name of Employer **Self-Employed** Occupation **Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2014**

Transaction ID : **SA11.158563**

Amount of Each Receipt this Period  
**500.00**

**SUBTOTAL** of Receipts This Page (optional).....

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

**1270.00**

14020214517

**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 35 OF 70		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

Any information copied from such Reports and Statements 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.

NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**REX MILLER**

Mailing Address **3463 SCOTTIE LANE**

City **MANHATTAN** State **KS** Zip Code **66502**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **291.78**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA13938904**

Amount of Each Receipt this Period  
**291.78**

CONTRIBUTION

IN-KIND: OFFICE SUPPLIES (PAPER/PRINTING)

**B.** Full Name (Last, First, Middle Initial)  
**REX MILLER**

Mailing Address **3463 SCOTTIE LANE**

City **MANHATTAN** State **KS** Zip Code **66502**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **791.78**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA13938904555**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

IN-KIND: TRAVEL

**C.** Full Name (Last, First, Middle Initial)  
**JAMES MISCHER**

Mailing Address **16222 67TH AVENUE, NE**

City **ARLINGTON** State **WA** Zip Code **98223-7510**

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

Name of Employer **ELECTRIC MIRROR, INC.** Occupation **ENGINEER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2014**

Transaction ID : **SA11.47374**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**1291.78**

14020214518

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

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

FOR LINE NUMBER: PAGE 36 OF 70  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)  
**DIRK W. MOFFATT**

Mailing Address **7151 BEAUMONT CIRCLE**

City State Zip Code  
**ANCHORAGE AK 99502-2281**

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

Name of Employer Occupation  
**NONE NONE**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date  
**225.00**

Date of Receipt  
**01 / 16 / 2014**  
Transaction ID : **SA11.47018**

Amount of Each Receipt this Period  
**25.00**  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**DIRK W. MOFFATT**

Mailing Address **7151 BEAUMONT CIRCLE**

City State Zip Code  
**ANCHORAGE AK 99502-2281**

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

Name of Employer Occupation  
**NONE NONE**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date  
**225.00**

Date of Receipt  
**02 / 16 / 2014**  
Transaction ID : **SA11.47020**

Amount of Each Receipt this Period  
**25.00**  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MSGT. GERALD A. MORE U.S.MC. (R)**

Mailing Address **H.C. 89 BOX 620**

City State Zip Code  
**WILLOW AK 99688-9708**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date  
**300.00**

Date of Receipt  
**03 / 21 / 2014**  
Transaction ID : **SA11.47656**

Amount of Each Receipt this Period  
**100.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**150.00**

14020214519

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

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

FOR LINE NUMBER: PAGE 37 OF 70  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

A. Full Name (Last, First, Middle Initial)  
**MSGT. GERALD A. MORE U.S.MC. (R)**

Mailing Address **H.C. 89 BOX 620**

City State Zip Code  
**WILLOW AK 99688-9708**

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

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**300.00**

Date of Receipt  
**03 / 28 / 2014**  
Transaction ID : **SA11.47682**

Amount of Each Receipt this Period  
**100.00**  
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**JOHN NELSON**

Mailing Address **P.O. BOX 1517**

City State Zip Code  
**KENAI AK 99611-1517**

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

Name of Employer Occupation  
**INFORMATION REQUESTED PER BEST EFF( INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**2600.00**

Date of Receipt  
**03 / 31 / 2014**  
Transaction ID : **SA11.47725**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**JOHN R. NELSON**

Mailing Address **846 LINCOLNWOOD DRIVE**

City State Zip Code  
**NORTH POLE AK 99705-5333**

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

Name of Employer Occupation  
**FOUNTAINHEAD DEVELOPMENT, INC. CONTROLLER**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**1000.00**

Date of Receipt  
**03 / 25 / 2014**  
Transaction ID : **SA11.47663**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**3700.00**

14020214520

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

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

FOR LINE NUMBER: PAGE 38 OF 70  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MARILYN D. NIELSON**

Mailing Address P.O. BOX 3384

City State Zip Code  
TORRANCE CA 90510-3384

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1050.00

Date of Receipt  
MM / DD / YYYY  
03 / 13 / 2014

Transaction ID : SA11.47130

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MARILYN D. NIELSON**

Mailing Address P.O. BOX 3384

City State Zip Code  
TORRANCE CA 90510-3384

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1050.00

Date of Receipt  
MM / DD / YYYY  
02 / 01 / 2014

Transaction ID : SA11.47439

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. CARL OLSON**

Mailing Address P.O. BOX 6102

City State Zip Code  
WOODLAND HILLS CA 91365-6102

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

Name of Employer Occupation  
SELF-EMPLOYED BUSINESS MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11.47722

Amount of Each Receipt this Period  
100.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

600.00

14020214521

**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 39 OF 70
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROCKY A. PAVEY**

Mailing Address **428 SHANNON DRIVE**

City **FAIRBANKS** State **AK** Zip Code **99701-3291**

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

Name of Employer **SELF-EMPLOYED** Occupation **HEATING CONTRACTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 07 / 2014**

Transaction ID : **SA11.46912**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM C. PECK**

Mailing Address **2900 AUDEN COURT**

City **ABINGDON** State **MD** Zip Code **21009**

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

Name of Employer **SOFTWARE CONSORTIUM** Occupation **SOFTWARE DEVELOPER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **602.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA92929.99**

Amount of Each Receipt this Period  
**602.00**  
 CONTRIBUTION

IN-KIND: TRAVEL

**C.** Full Name (Last, First, Middle Initial)  
**JOSH PEPPERD**

Mailing Address **3400 EAST 112TH**

City **ANCHORAGE** State **AK** Zip Code **99516-1430**

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

Name of Employer **DAVIS CONSTRUCTORS** Occupation **GENERAL CONTRACTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 18 / 2014**

Transaction ID : **SA11.47660**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**4202.00**

14020214522

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

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

FOR LINE NUMBER: PAGE 40 OF 70  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**JOSH PEPPERD**

Mailing Address **3400 EAST 112TH**

City **ANCHORAGE** State **AK** Zip Code **99516-1430**

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

Name of Employer **DAVIS CONSTRUCTORS** Occupation **GENERAL CONTRACTOR**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
**03 / 18 / 2014**

Transaction ID : **SA11.47661**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LINDSAY PEPPERD**

Mailing Address **3400 EAST 112TH**

City **ANCHORAGE** State **AK** Zip Code **99516-1430**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
**03 / 18 / 2014**

Transaction ID : **SA11.47648**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LINDSAY PEPPERD**

Mailing Address **3400 EAST 112TH**

City **ANCHORAGE** State **AK** Zip Code **99516-1430**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
**03 / 18 / 2014**

Transaction ID : **SA11.47651**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**7800.00**

14020214523



**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 41 OF 70
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MS. SALLY M. POLLEN**

Mailing Address 2000 PENNY LN

City PALMER State AK Zip Code 99645-8817

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

Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
**03 / 04 / 2014**

Transaction ID : SA11.47089

Amount of Each Receipt this Period  
**500.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. SALLY M. POLLEN**

Mailing Address 2000 PENNY LN

City PALMER State AK Zip Code 99645-8817

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

Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
**01 / 27 / 2014**

Transaction ID : SA11.47501

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. SALLY M. POLLEN**

Mailing Address 2000 PENNY LN

City PALMER State AK Zip Code 99645-8817

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

Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt  
**03 / 21 / 2014**

Transaction ID : SA11.47657

Amount of Each Receipt this Period  
**100.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**850.00**

14020214524

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

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

FOR LINE NUMBER: PAGE 42 OF 70  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)  
**ELAINE K. PORTIER**

Mailing Address **15770 SW TOWHEE LN**

City State Zip Code  
**BEAVERTON OR 97007-9053**

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

Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**500.00**

Date of Receipt  
**02 / 18 / 2014**  
Transaction ID : **SA11.47004**

Amount of Each Receipt this Period  
**25.00**  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**ELAINE K. PORTIER**

Mailing Address **15770 SW TOWHEE LN**

City State Zip Code  
**BEAVERTON OR 97007-9053**

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

Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**500.00**

Date of Receipt  
**02 / 22 / 2014**  
Transaction ID : **SA11.47036**

Amount of Each Receipt this Period  
**25.00**  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**ELAINE K. PORTIER**

Mailing Address **15770 SW TOWHEE LN**

City State Zip Code  
**BEAVERTON OR 97007-9053**

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

Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**500.00**

Date of Receipt  
**03 / 16 / 2014**  
Transaction ID : **SA11.47163**

Amount of Each Receipt this Period  
**25.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**75.00**

14020214525

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

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

FOR LINE NUMBER: PAGE 43 OF 70  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**ELAINE K. PORTIER**

Mailing Address **15770 SW TOWHEE LN**

City **BEAVERTON** State **OR** Zip Code **97007-9053**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 26 / 2014**

Transaction ID : **SA11.47243**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ELAINE K. PORTIER**

Mailing Address **15770 SW TOWHEE LN**

City **BEAVERTON** State **OR** Zip Code **97007-9053**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 30 / 2014**

Transaction ID : **SA11.47338**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ELAINE K. PORTIER**

Mailing Address **15770 SW TOWHEE LN**

City **BEAVERTON** State **OR** Zip Code **97007-9053**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**01 / 13 / 2014**

Transaction ID : **SA11.47523**

Amount of Each Receipt this Period  
**25.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**75.00**

14020214526

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

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

FOR LINE NUMBER: PAGE 44 OF 70  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**STEVEN PUNKHURST**

Mailing Address **700 HIGH GRADE WAY**

City **FAIRBANKS** State **AK** Zip Code **99712-2014**

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

Name of Employer **FNSBSD** Occupation **TEACHER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 13 / 2014**

Transaction ID : **SA11.47676**

Amount of Each Receipt this Period  
**500.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. DEE R. ROSS**

Mailing Address **8628 HANNAH LANE**

City **MANHATTAN** State **KS** Zip Code **66502-8159**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**03 / 28 / 2014**

Transaction ID : **SA11.47677**

Amount of Each Receipt this Period  
**100.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GLENN SANDBERG**

Mailing Address **900 CHATFIELD ROAD**

City **NEW LENOX** State **IL** Zip Code **60451-3036**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**03 / 11 / 2014**

Transaction ID : **SA11.47109**

Amount of Each Receipt this Period  
**100.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**700.00**

14020214527

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 45 OF 70	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**GEORGE SHELTON**

Mailing Address **4124 KINGSFERRY DR**

City **ARLINGTON** State **TX** Zip Code **76016-3636**

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

Name of Employer **RETIRED** Occupation **NONE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
**02 / 23 / 2014**

Transaction ID : **SA11.47042**

Amount of Each Receipt this Period  
**200.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JAMES M. SMITH**

Mailing Address **1466 W FOSTER AVE**

City **CHICAGO** State **IL** Zip Code **60640-2106**

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

Name of Employer **IT FIRM** Occupation **IT FIRM EMPLOYEE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**02 / 25 / 2014**

Transaction ID : **SA11.47053**

Amount of Each Receipt this Period  
**150.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GREGG E. STODDARD**

Mailing Address **2220 COLONY LOOP**

City **ANCHORAGE** State **AK** Zip Code **99507-4405**

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

Name of Employer **U.A.A.** Occupation **C.F.I.**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
**01 / 29 / 2014**

Transaction ID : **SA11.46897**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**600.00**

14020214528

**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 46 OF 70	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MS. BARBARA J. STRUBLE**

Mailing Address **124 E. 3RD AVENUE**  
**APARTMENT 411**

City **ANCHORAGE** State **AK** Zip Code **99501-2537**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**01 / 29 / 2014**

Transaction ID : **SA11.46893**

Amount of Each Receipt this Period  
**20.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. BARBARA J. STRUBLE**

Mailing Address **124 E. 3RD AVENUE**  
**APARTMENT 411**

City **ANCHORAGE** State **AK** Zip Code **99501-2537**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**01 / 29 / 2014**

Transaction ID : **SA11.46899**

Amount of Each Receipt this Period  
**2490.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD J. SUNGAILA**

Mailing Address **1827 PORT STANHOPE PLACE**

City **NEWPORT BEACH** State **CA** Zip Code **92660-7120**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**01 / 03 / 2014**

Transaction ID : **SA11.46538**

Amount of Each Receipt this Period  
**50.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**2560.00**

14020214529

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

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

FOR LINE NUMBER: PAGE 47 OF 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD J. SUNGAILA**

Mailing Address **1827 PORT STANHOPE PLACE**

City **NEWPORT BEACH** State **CA** Zip Code **92660-7120**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 16 / 2014**

Transaction ID : **SA11.46997**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD J. SUNGAILA**

Mailing Address **1827 PORT STANHOPE PLACE**

City **NEWPORT BEACH** State **CA** Zip Code **92660-7120**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11.47190**

Amount of Each Receipt this Period  
**50.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD J. SUNGAILA**

Mailing Address **1827 PORT STANHOPE PLACE**

City **NEWPORT BEACH** State **CA** Zip Code **92660-7120**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2014**

Transaction ID : **SA11.47287**

Amount of Each Receipt this Period  
**50.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

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

**200.00**

14020214530

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

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

FOR LINE NUMBER: PAGE 48 OF 70  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**STEVE TWIST**

Mailing Address 13870 N. 98TH PL.

City State Zip Code  
PHOENIX AZ 85260-8853

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
MM / DD / YYYY  
02 / 26 / 2014

Transaction ID : SA11.47761

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. LUCIA UIHLEIN**

Mailing Address 715 LANDS END DRIVE

City State Zip Code  
LONGBOAT KEY FL 34228-1055

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2014

Transaction ID : SA11.47149

Amount of Each Receipt this Period  
200.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. AMY WALKER**

Mailing Address 8690 E HIGHLANDS CIRCLE

City State Zip Code  
PALMER AK 99645

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11.158564

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional).....

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

2825.00

14020214531



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

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

FOR LINE NUMBER: PAGE 49 OF 70  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. AMY WALKER**

Mailing Address **8690 E HIGHLANDS CIRCLE**

City **PALMER** State **AK** Zip Code **99645-8908**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**01 / 03 / 2014**

Transaction ID : **SA11.46541**

Amount of Each Receipt this Period  
**100.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VAN WELCH II**

Mailing Address **2207 FAIRWAY DR**

City **DUNCAN** State **OK** Zip Code **73533-3209**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 10 / 2014**

Transaction ID : **SA11.47417**

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

**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

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

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

**350.00**

**69107.33**

14020214532

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

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

FOR LINE NUMBER: PAGE 50 OF 70  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)  
**A. NATL ASSOC. FOR GUN RIGHTS INC PAC**

Mailing Address 501 MAIN ST., SUITE 500

City WINDSOR State CO Zip Code 80550-5131

FEC ID number of contributing federal political committee. **C** C00481200

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /   
 03 / 28 / 2014

Transaction ID : SA11.47687

Amount of Each Receipt this Period  
 2000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B.** 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  
 /  /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.** 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  
 /  /

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

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

2000.00

2000.00

14020214533

**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 51 OF 70			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A.** Full Name (Last, First, Middle Initial)  
**BB&T**

Mailing Address **1717 KING STREET**

City **ALEXANDRIA** State **VA** Zip Code **22314**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **348.33**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA15-1.09990**

Amount of Each Receipt this Period  
**11.12**

**INTEREST EARNED**

**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

**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

**SUBTOTAL** of Receipts This Page (optional).....

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

**11.12**

**11.12**

14020214534

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A. RANDY DESOTO**

Full Name (Last, First, Middle Initial)  
Mailing Address 5506 AURELIA ST

City SIMI VALLEY State CA Zip Code 93063

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 16 / 2014

Amount of Each Disbursement this Period: 1525.00

Transaction ID : SB17.52

Category/Type

**B. RANDY DESOTO**

Full Name (Last, First, Middle Initial)  
Mailing Address 5506 AURELIA ST

City SIMI VALLEY State CA Zip Code 93063

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 31 / 2014

Amount of Each Disbursement this Period: 1525.00

Transaction ID : SB17.53

Category/Type

**C. RANDY DESOTO**

Full Name (Last, First, Middle Initial)  
Mailing Address 5506 AURELIA ST

City SIMI VALLEY State CA Zip Code 93063

Purpose of Disbursement POLITICAL STRATEGY CONSULTING EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 01 / 2014

Amount of Each Disbursement this Period: 96.20

Transaction ID : SB17.54

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 3146.20

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

14020214535

**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)  
 17     18     19a     19b  
 20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A. RANDY DESOTO**

Full Name (Last, First, Middle Initial)  
A. RANDY DESOTO

Mailing Address 5506 AURELIA ST

City SIMI VALLEY State CA Zip Code 93063

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 17 / 2014

Amount of Each Disbursement this Period: 1525.00

Transaction ID : SB17.55

Category/Type

**B. RANDY DESOTO**

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

Mailing Address 5506 AURELIA ST

City SIMI VALLEY State CA Zip Code 93063

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 28 / 2014

Amount of Each Disbursement this Period: 1525.00

Transaction ID : SB17.56

Category/Type

**C. RANDY DESOTO**

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

Mailing Address 5506 AURELIA ST

City SIMI VALLEY State CA Zip Code 93063

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 15 / 2014

Amount of Each Disbursement this Period: 1525.00

Transaction ID : SB17.57

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 4575.00

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

14020214536

**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)

<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)  
**Citizens for Joe Miller**

**A. RANDY DESOTO**

Full Name (Last, First, Middle Initial)

Mailing Address 5506 AURELIA ST

City SIMI VALLEY State CA Zip Code 93063

Purpose of Disbursement IN-KIND: TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 15 / 2014

Amount of Each Disbursement this Period: 2570.00

Transaction ID : SB17.5766687

Category/Type

**B. ASAF EREZ**

Full Name (Last, First, Middle Initial)

Mailing Address 1365 N INDIAN HILLS CIRCLE

City WASILLA State AK Zip Code 99654

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 03 / 2014

Amount of Each Disbursement this Period: 200.00

Transaction ID : SB17.574547

Category/Type

**C. ASAF EREZ**

Full Name (Last, First, Middle Initial)

Mailing Address 1365 N INDIAN HILLS CIRCLE

City WASILLA State AK Zip Code 99654

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 30 / 2014

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SB17.574679

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... 3770.00

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

14020214537

**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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)  
**A. ASAF EREZ**

Mailing Address **1365 N INDIAN HILLS CIRCLE**

City **WASILLA** State **AK** Zip Code **99654**

Purpose of Disbursement  
**TRAVEL**

Candidate Name

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

State: District:

Date of Disbursement  
 MM / DD / YYYY  
**02 / 26 / 2014**

Amount of Each Disbursement this Period  
**98.00**

Transaction ID : **SB17.574679321**  
  
 NO SUB-VENDORS REACHED THE ITEMIZATION THRESHOLD DURING THE PERIOD

Full Name (Last, First, Middle Initial)  
**B. ASAF EREZ**

Mailing Address **1365 N INDIAN HILLS CIRCLE**

City **WASILLA** State **AK** Zip Code **99654**

Purpose of Disbursement  
**TRAVEL**

Candidate Name

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

State: District:

Date of Disbursement  
 MM / DD / YYYY  
**02 / 17 / 2014**

Amount of Each Disbursement this Period  
**94.80**

Transaction ID : **SB17.574679555**  
  
 NO SUB-VENDORS REACHED THE ITEMIZATION THRESHOLD DURING THE PERIOD

Full Name (Last, First, Middle Initial)  
**C. ASAF EREZ**

Mailing Address **1365 N INDIAN HILLS CIRCLE**

City **WASILLA** State **AK** Zip Code **99654**

Purpose of Disbursement  
**POLITICAL STRATEGY CONSULTING**

Candidate Name

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

State: District:

Date of Disbursement  
 MM / DD / YYYY  
**02 / 28 / 2014**

Amount of Each Disbursement this Period  
**1000.00**

Transaction ID : **SB17.574679578**  
  
 NO SUB-VENDORS REACHED THE ITEMIZATION THRESHOLD DURING THE PERIOD

**SUBTOTAL** of Disbursements This Page (optional) ..... **1192.80**  
**TOTAL** This Period (last page this line number only) .....

14020214538

**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)

<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)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)  
**A. MATTHEW JOHNSON**

Mailing Address **PO BOX 670791**

City **CHUGIAK** State **AK** Zip Code **99567**

Purpose of Disbursement  
**POLITICAL STRATEGY CONSULTING**

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
**03 / 14 / 2014**

Amount of Each Disbursement this Period  
**4200.00**

Transaction ID : **SB17.45**

Category/Type

Full Name (Last, First, Middle Initial)  
**B. JAMES KEATING**

Mailing Address **4019 E SAN MIGUEL**

City **PHOENIX** State **AZ** Zip Code **85018**

Purpose of Disbursement  
**IN-KIND EVENT EXPENSE (EQUIPMENT/FACILITY RENTAL)**

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
**03 / 31 / 2014**

Amount of Each Disbursement this Period  
**956.55**

Transaction ID : **SB9392929**

Category/Type

Full Name (Last, First, Middle Initial)  
**C. CANDUS MILLER**

Mailing Address **PO BOX 876854**

City **WASILLA** State **AK** Zip Code **99687**

Purpose of Disbursement  
**IN-KIND: TRAVEL**

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
**03 / 31 / 2014**

Amount of Each Disbursement this Period  
**520.00**

Transaction ID : **SB587888**

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) .....

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

**5676.55**

14020214539



**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)  
 17 20a     18 20b     19a 20c     19b 21  
 PAGE 57 OF 70

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)  
**A. REX MILLER**

Mailing Address **3463 SCOTTIE LANE**

City **MANHATTAN** State **KS** Zip Code **66502**

Purpose of Disbursement  
IN-KIND: TRAVEL

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
**03 / 31 / 2014**

Amount of Each Disbursement this Period  
**500.00**

Transaction ID : **SB1919194**

Category/Type

Full Name (Last, First, Middle Initial)  
**B. REX MILLER**

Mailing Address **3463 SCOTTIE LANE**

City **MANHATTAN** State **KS** Zip Code **66502**

Purpose of Disbursement  
IN-KIND: OFFICE SUPPLIES (PAPER/PRINTING)

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
**03 / 31 / 2014**

Amount of Each Disbursement this Period  
**291.78**

Transaction ID : **SB1919194123**

Category/Type

Full Name (Last, First, Middle Initial)  
**C. BILL PECK**

Mailing Address **2900 AUDEN COURT**

City **ABINGDON** State **MD** Zip Code **21009**

Purpose of Disbursement  
TRAVEL

Candidate Name

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

State: District:

Date of Disbursement  
MM / DD / YYYY  
**01 / 06 / 2014**

Amount of Each Disbursement this Period  
**583.38**

Transaction ID : **SB17.43000**

NO SUB-VENDORS REACHED THE ITEMIZATION THRESHOLD FOR THE PERIOD

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) .....

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

**1375.16**

14020214540

**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 58 OF 70
	<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)  
**Citizens for Joe Miller**

**A. BILL PECK**

Full Name (Last, First, Middle Initial)  
A. BILL PECK

Mailing Address 2900 AUDEN COURT

City ABINGDON State MD Zip Code 21009

Purpose of Disbursement  
IN-KIND: TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
01 / 06 / 2014

Amount of Each Disbursement this Period  
602.00

Transaction ID : SB17.430004556

Category/Type

**B. AMERICAN EXPRESS**

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

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 03 / 2014

Amount of Each Disbursement this Period  
7.95

Transaction ID : SB17.99254

Category/Type

**C. AMERICAN EXPRESS**

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

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 03 / 2014

Amount of Each Disbursement this Period  
7.95

Transaction ID : SB17.994536

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 617.90

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

14020214541

**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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN EXPRESS**

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 05 / 2014

Amount of Each Disbursement this Period: 24.64

Transaction ID : SB17.995887

Category/Type

Full Name (Last, First, Middle Initial)  
**B. AMERICAN EXPRESS**

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 05 / 2014

Amount of Each Disbursement this Period: 8.98

Transaction ID : SB17.999957

Category/Type

Full Name (Last, First, Middle Initial)  
**C. ANCHORAGE REPUBLICAN WOMENS CLUB**

Mailing Address PO BOX 240033

City ANCHORAGE State AK Zip Code 99524

Purpose of Disbursement EVENT REGISTRATION EXPENSE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 30 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.95948

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... 533.62

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

14020214542

**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)

<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)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)  
**A. BANK OF AMERICA**

Mailing Address PO BOX 851001

City DALLAS State TX Zip Code 75285

Purpose of Disbursement CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement MM / DD / YYYY  
01 / 17 / 2014

Amount of Each Disbursement this Period  
979.54

Transaction ID : SB17.956

ULTIMATE VENDORS EXCEEDING ITEMIZATION THRESHOLD DISCLOSED BELOW

Full Name (Last, First, Middle Initial)  
**B. ALASKA AIRLINES**

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement MM / DD / YYYY  
01 / 17 / 2014

Amount of Each Disbursement this Period  
103.00

Transaction ID : SB17.2

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. ALASKA AIRLINES**

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement MM / DD / YYYY  
01 / 17 / 2014

Amount of Each Disbursement this Period  
20.40

Transaction ID : SB17.23569

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ..... 979.54

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

14020214543

**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)

<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)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)  
**A. ALASKA AIRLINES**

Mailing Address **PO BOX 68900**

City **SEATTLE** State **WA** Zip Code **98168**

Purpose of Disbursement **TRAVEL**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: **01 / 17 / 2014**

Amount of Each Disbursement this Period: **218.50**

Transaction ID: **SB17.278785**

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**B. CAMPAIGN TREASURER LLC**

Mailing Address **6148 LEE HIGHWAY**

City **CHATTANOOGA** State **TN** Zip Code **37421**

Purpose of Disbursement **FUNDRAISING CONSULTING**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: **01 / 17 / 2014**

Amount of Each Disbursement this Period: **297.00**

Transaction ID: **SB17.251254**

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**C. GODADDY.COM**

Mailing Address **14455 N HAYDEN RD**

City **SCOTTSDALE** State **AZ** Zip Code **85260**

Purpose of Disbursement **WEB SERVICE**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: **01 / 17 / 2014**

Amount of Each Disbursement this Period: **226.86**

Transaction ID: **SB17.202120**

**[MEMO ITEM]**

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

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

14020214544

**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)

<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)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)  
**A. BANK OF AMERICA**

Date of Disbursement

M M / D D / Y Y Y Y
02 / 01 / 2014

Mailing Address PO BOX 851001

City State Zip Code  
DALLAS TX 75285

Amount of Each Disbursement this Period

1036.95
---------

Purpose of Disbursement  
CREDIT CARD PAYMENT

--

Transaction ID : SB17.957

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

ULTIMATE VENDORS EXCEEDING ITEMIZATION  
THRESHOLD DISCLOSED BELOW

State: District:

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

Date of Disbursement

M M / D D / Y Y Y Y
02 / 01 / 2014

Mailing Address 2211 N FIRST ST

City State Zip Code  
SAN JOSE CA 95131

Amount of Each Disbursement this Period

997.00
--------

Purpose of Disbursement  
PAYMENT SYSTEMS EXPENSE

--

Transaction ID : SB17.246986

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

[MEMO ITEM]

State: District:

Full Name (Last, First, Middle Initial)  
**C. BANK OF AMERICA**

Date of Disbursement

M M / D D / Y Y Y Y
02 / 08 / 2014

Mailing Address PO BOX 851001

City State Zip Code  
DALLAS TX 75285

Amount of Each Disbursement this Period

1519.86
---------

Purpose of Disbursement  
CREDIT CARD PAYMENT

--

Transaction ID : SB17.958653

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

ULTIMATE VENDORS EXCEEDING ITEMIZATION  
THRESHOLD DISCLOSED BELOW

State: District:

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

2556.81
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TOTAL This Period (last page this line number only).....

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14020214545

**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)

<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)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)  
**A. ALASKA AIRLINES**

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 08 / 2014

Amount of Each Disbursement this Period: 240.00

Transaction ID : SB17.958657

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. ALASKA AIRLINES**

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 08 / 2014

Amount of Each Disbursement this Period: 238.50

Transaction ID : SB17.958662

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**C. ALASKA AIRLINES**

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 08 / 2014

Amount of Each Disbursement this Period: 220.00

Transaction ID : SB17.958663

[MEMO ITEM]

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

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

14020214546

**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)  
 17     18     19a     19b  
 20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A. ALASKA AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY (02/08/2014)

Amount of Each Disbursement this Period: 218.50

Transaction ID : SB17.958664

[MEMO ITEM]

**B. ALASKA AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY (02/08/2014)

Amount of Each Disbursement this Period: 218.50

Transaction ID : SB17.958665

[MEMO ITEM]

**C. BANK OF AMERICA**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 851001

City DALLAS State TX Zip Code 75285

Purpose of Disbursement ANNUAL FEE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM/DD/YYYY (02/08/2014)

Amount of Each Disbursement this Period: 75.00

Transaction ID : SB17.958654

[MEMO ITEM]

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

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

14020214547



**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)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)

**A. MAIL CHIMP**

Mailing Address 512 MEANS ST  
STE 404

City ATLANTA State GA Zip Code 30318

Purpose of Disbursement  
WEB SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2014

Amount of Each Disbursement this Period

240.00

Transaction ID : SB17.958666

[MEMO ITEM]

**B. BANK OF AMERICA**

Mailing Address PO BOX 851001

City DALLAS State TX Zip Code 75285

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

2885.85

Transaction ID : SB17.959

ULTIMATE VENDORS EXCEEDING ITEMIZATION  
THRESHOLD DISCLOSED BELOW

**C. ALASKA AIRLINES**

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

591.50

Transaction ID : SB17.960

[MEMO ITEM]

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

2885.85

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

14020214548

**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)

<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)  
**Citizens for Joe Miller**

**A. ALASKA AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period: 1230.40

Transaction ID : SB17.961

[MEMO ITEM]

**B. ALASKA AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period: 20.00

Transaction ID : SB17.962

[MEMO ITEM]

**C. ALASKA AIRLINES**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 68900

City SEATTLE State WA Zip Code 98168

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period: 438.50

Transaction ID : SB17.963

[MEMO ITEM]

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

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

14020214549

**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)  
 17     18     19a     19b  
 20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

**A. ALASKA AIRLINES**

Full Name (Last, First, Middle Initial)  
ALASKA AIRLINES

Mailing Address PO BOX 68900

City SEATTLE      State WA      Zip Code 98168

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General  
 Other (specify)

State:      District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
14.90

Transaction ID : SB17.964

[MEMO ITEM]

**B. CMDI**

Full Name (Last, First, Middle Initial)  
CMDI

Mailing Address 1593 SPRING HILL ROAD  
STE 400

City TYSONS CORNER      State VA      Zip Code 22182

Purpose of Disbursement CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General  
 Other (specify)

State:      District:

Date of Disbursement  
MM / DD / YYYY  
Q1 / 28 / 2014

Amount of Each Disbursement this Period  
6.75

Transaction ID : SB17.100

**C. CMDI**

Full Name (Last, First, Middle Initial)  
CMDI

Mailing Address 1593 SPRING HILL ROAD  
STE 400

City TYSONS CORNER      State VA      Zip Code 22182

Purpose of Disbursement CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General  
 Other (specify)

State:      District:

Date of Disbursement  
MM / DD / YYYY  
Q2 / 25 / 2014

Amount of Each Disbursement this Period  
153.27

Transaction ID : SB17.1003556

**SUBTOTAL** of Disbursements This Page (optional) ..... 160.02

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

14020214550

**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 68 OF 70			
	<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)  
**Citizens for Joe Miller**

**A. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD  
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATA MANAGEMENT SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 01 / 2014

Amount of Each Disbursement this Period: 3760.00

Transaction ID : SB17.12

**B. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD  
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATA MANAGEMENT SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 15 / 2014

Amount of Each Disbursement this Period: 350.00

Transaction ID : SB17.13

**C. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 SPRING HILL ROAD  
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATA MANAGEMENT SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 15 / 2014

Amount of Each Disbursement this Period: 174.00

Transaction ID : SB17.1355

**SUBTOTAL** of Disbursements This Page (optional)..... 4284.00

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

14020214551

**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 69 OF 70			
	<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)  
**Citizens for Joe Miller**

**A. CMDI**

Full Name (Last, First, Middle Initial)  
Mailing Address 1593 SPRING HILL ROAD  
STE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement DATA MANAGEMENT SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 24 / 2014

Amount of Each Disbursement this Period: 3777.50

Transaction ID : SB17.138563

Category/Type

**B. COMPLIANCE CONSULTING LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 365

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 14 / 2014

Amount of Each Disbursement this Period: 1300.00

Transaction ID : SB17.13559856

Category/Type

**C. MERCHANT SOLUTIONS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 6995

City PORTLAND State OR Zip Code 97228

Purpose of Disbursement CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
Q1 / 03 / 2014

Amount of Each Disbursement this Period: 119.55

Transaction ID : SB17.101

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 5197.05

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

14020214552

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Citizens for Joe Miller**

Full Name (Last, First, Middle Initial)

**A. MERCHANT SOLUTIONS**

Mailing Address PO BOX 6995

City PORTLAND State OR Zip Code 97228

Purpose of Disbursement  
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2014

Amount of Each Disbursement this Period

64.65

Transaction ID : SB17.105

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. MERCHANT SOLUTIONS**

Mailing Address PO BOX 6995

City PORTLAND State OR Zip Code 97228

Purpose of Disbursement  
CREDIT CARD MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 03 / 2014

Amount of Each Disbursement this Period

252.55

Transaction ID : SB17.108

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. TOP RIVAL GRAPHICS**

Mailing Address 1016 OAK HOLLOW LANE

City ANNA State TX Zip Code 75409

Purpose of Disbursement  
GRAPHIC DESIGN SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 26 / 2014

Amount of Each Disbursement this Period

225.00

Transaction ID : SB17.393930

Category/  
Type

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

542.20

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

37492.70

14020214553

NANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT

HARVARD OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-771  
PHONE (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_

**4-15-14**  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_

Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_

Postmark

USPS PRIORITY MAIL \_\_\_\_\_

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_

Postmark

### OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

UPS \_\_\_\_\_

DEL \_\_\_\_\_

AIRBORNE EXPRESS \_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

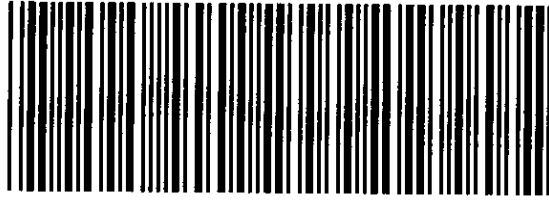
PREPARER

**DH**

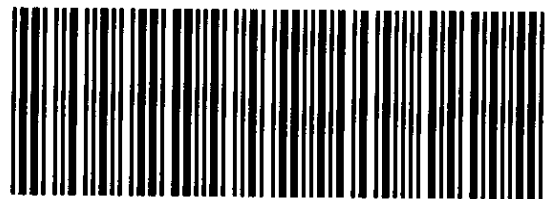
DATE PREPARED

**4-15-14**

14020214554



SEN PATCH



SEN PATCH

14020214555