FEC FORM 2
STATEMENT OF CANDIDACY

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

16 SEP 20 AM 9:15

1. (a) Name of Candidate (in full)
Joseph Miller ("Joe Miller")

(b) Address (number and street) ☐ Check if address changed
250 Cushman Street, Suite 2A

2. FEC Candidate Identification Number
S0AK00121

(c) City, State, and ZIP Code
Fairbanks, AK 99701

3. Is This Statement ☐ New (N) OR ☒ Amended (A)

4. Party Affiliation
Alaska Libertarian

5. Office Sought
US Senate

6. State & District of Candidate
Alaska

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election) election(s).

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)
Citizens for Joe Miller, Inc.

(b) Address (number and street)
250 Cushman Street, Suite 2A

(c) City, State, and ZIP Code
Fairbanks, AK 99701

DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

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

Signature of Candidate

Date
9/16/16

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 52 U.S.C. §30109.

201609200203735507

MELY URGENT *Please Rush To Addressee*

Schedule package pickup right from your home or office at usps.com/pickup

Print postage online - Go to usps.com/po

U.S. POSTAGE
$22.95
PME 2-DAY
99709 0007
Date of sale
09/16/16
06 2S00
08259879
SSK

Scheduled Delivery
09/19/2016
3:00PM

PLEASE PRESS FIRMLY

PLE

EXPRESS® MAIL
STATES POSTAL SERVICE

Flat Rate Mailing Envelope

For Domestic and International Use

EMS

When used internationally affix customs declarations (PS Form 2976, or 2976A).

SCREENED BY THE SENATE POST OFFICE

EL522644037US

EL522644037US

CUSTOMER USE ONLY

FROM: (PLEASE PRINT) PHONE ( )

Miller
PO Box 83440
Fairbanks, AK 99708

PAYMENT BY ACCOUNT (If applicable)

DELIVERY OPTIONS (Customer Use Only)

☐ SIGNATURE REQUIRED *Note:* The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

Delivery Options
- ☐ No Saturday Delivery (delivered next business day)
- ☐ Sunday/Holiday Delivery Required (additional fee, where available*)
- ☐ 10:30 AM Delivery Required (additional fee, where available*)

*Refer to USPS.com® or local Post Office™ for availability.

TO: (PLEASE PRINT) PHONE ( )

OFFICE OF PUBLIC Records
PO Box 77578
WASHINGTON, DC

ZIP + 4® (U.S. ADDRESSES ONLY)
20013-7578

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
- $100.00 insurance included.

UNITED STATES POSTAL SERVICE® | PRIORITY ★ MAIL ★ EXPRESS™

ORIGIN (POSTAL SERVICE USE ONLY)

☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO

PO ZIP Code	Scheduled Delivery Date (MM/DD/YY)	Postage $	
Date Accepted (MM/DD/YY)	Scheduled Delivery Time ☐ 10:30 AM ☐ 3:00 PM ☐ 12 NOON	Insurance Fee $	COD Fee $
Time Accepted ☐ AM ☐ PM	10:30 AM Delivery Fee $	Return Receipt Fee $	Live Animal Transportation Fe $
Weight ☐ Flat Rate ozs.	Sunday/Holiday Premium Fee $ / Acceptance Employee Initials	Total Postage & Fees $	

DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YY)	Time ☐ AM ☐ PM	Employee Signature
Delivery Attempt (MM/DD/YY) 9-19-16	Time 9:00 ☐ AM ☐ PM	Employee Signature

LABEL 11-B, SEPTEMBER 2015 PSN 7690-02-000-9996 3-ADDRESSEE COPY

Del

USPS packaging products have been awarded Cradle to Cradle Certification℠ for their ecologically-intelligent design. For more information go to mbdc.com/usps

Cradle to Cradle Certified™ is a certification mark of MBDC.

Please recycle.

This packaging is the property of the U.S. Postal Service® and is provided solely for use in sending Express Mail® shipments. Misuse may be a violation of federal law. This packaging is not for resale. EP13F © U.S. Postal Service; Oct. 2008; All rights res

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS
16 SEP 20 AM 9:16

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Citizens for Joe Miller, Inc.

ADDRESS (number and street) ☐ ◀ (Check if address is changed)

250 Cushman Street, Suite 2A

Fairbanks — CITY ▲ | AK — STATE ▲ | 99701 - — ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒ ◀ (Check if address is changed)

2016@joemiller.us

Optional Second E-Mail Address
libertyfirstalaska@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ ◀ (Check if address is changed)

www.joeforliberty.com

2. DATE MM 09 / DD 16 / YYYY 2016

3. FEC IDENTIFICATION NUMBER ▶ C 00522730

4. IS THIS STATEMENT ☐ NEW (N) OR ☒ AMENDED (A)

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

Type or Print Name of Treasurer Thomas John Nelson

Signature of Treasurer _____ Date MM 09 / DD 16 / YYYY 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

2016092002037350 9

Office Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

5. TYPE OF COMMITTEE

Candidate Committee:

(a) [X] This committee is a principal campaign committee. (Complete the candidate information below.)

(b) [ ] This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate: Joe Miller

Candidate Party Affiliation: ALP

Office Sought: House [X] Senate President

State: AK

District:

(c) [ ] This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate:

Party Committee:

(d) [ ] This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation | Corporation w/o Capital Stock | Labor Organization

Membership Organization | Trade Association | Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

(f) [ ] This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. FEC ID number C
2. FEC ID number C
3. FEC ID number C
4. FEC ID number C

2016092002003735510

Write or Type Committee Name

Citizens for Joe Miller, Inc.

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY STATE ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name: Thomas John Nelson

Mailing Address: PO Box 670123

Chugiak | AK | 99567 - 0123

CITY STATE ZIP CODE

Title or Position: Treasurer

Telephone number: 907 - 360 - 1572

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer: Thomas John Nelson

Mailing Address: PO Box 670123

Chugiak | AK | 99567 - 0123

CITY STATE ZIP CODE

Title or Position: Treasurer

Telephone number: 907 - 360 - 1572

2016092002003735511

Full Name of Designated Agent: Naomi Sweetman

Mailing Address: 6450 O'Malley Road

Anchorage (CITY) AK (STATE) 99507 - (ZIP CODE)

Title or Position: Assistant Treasurer

Telephone number: 907 - 830 - 7296

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.: Branch Banking & Trust Co. (BB&T)

Mailing Address: 2200 Wilson Blvd Suite 100

Arlington (CITY) VA (STATE) 22201 - (ZIP CODE)

Name of Bank, Depository, etc.: First National Bank Alaska (FNBA)

Mailing Address: 431 Merhar Ave

Fairbanks (CITY) AK (STATE) 99701 - (ZIP CODE)

2016092002003735 12

2016092002003735 13

PRESS FIRMLY TO SEAL

PRESS FIRMLY TO SEAL

UNITED STATES POSTAL SERVICE

1007

20013

U.S. POSTAGE
PAID
ANCHORAGE, AK
99517
SEP 16, 16
AMOUNT
$22.95
R2304M116207-08

PRIORITY ★ MAIL ★ EXPRESS™

OUR FASTEST SERVICE IN THE U.S.

DH

WHEN USED INTERNATIONALLY, A CUSTOMS DECLARATION LABEL MAY BE REQUIRED.

EMS

EP13F July 2013 OD: 12.5 x 9.5

PS10001000006

WRITE FIRMLY WITH BALL POINT PEN ON HARD SURFACE TO MAKE ALL COPIES LEGIBLE.

CUSTOMER USE ONLY

FROM: (PLEASE PRINT) PHONE (907) 30[illegible]

City of Juneau
[illegible] AK 99[illegible]

PAYMENT BY ACCOUNT (if applicable)

DELIVERY OPTIONS (Customer Use Only)

☐ SIGNATURE REQUIRED *Note:* The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

Delivery Options
- ☐ No Saturday Delivery (delivered next business day)
- ☐ Sunday/Holiday Delivery Required (additional fee, where available*)
- ☐ 10:30 AM Delivery Required (additional fee, where available*)

*Refer to USPS.com® or local Post Office™ for availability.

TO: (PLEASE PRINT) PHONE ( )

Office of Public Records
P.O. Box 47548
Washington, DC

ZIP + 4® (U.S. ADDRESSES ONLY)
20013-7548

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
- $100.00 insurance included.

EL375898452US

BY THE SENATE
POST OFFICE

UNITED STATES POSTAL SERVICE | PRIORITY ★ MAIL ★ EXPRESS™

ORIGIN (POSTAL SERVICE USE ONLY)

☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO

PO ZIP Code	Scheduled Delivery Date (MM/DD/YY)	Postage
99509	9/19/16	$ 22.95
Date Accepted (MM/DD/YY) 9/16/16	Scheduled Delivery Time ☐ 10:30 AM ☐ 3:00 PM ☐ 12 NOON	Insurance Fee $ / COD Fee $
Time Accepted 15:[illegible] ☐ AM ☐ PM	10:30 AM Delivery Fee $	Return Receipt Fee $ / Live Animal Transportation Fee $
Weight ☐ Flat Rate lbs. 2 ozs.	Sunday/Holiday Premium Fee $ / Acceptance Employee Initials	Total Postage & Fees $ 22.95

DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YY)	Time ☐ AM ☐ PM	Employee Signature
Delivery Attempt (MM/DD/YY) 9-16-16	Time 9:[illegible]	Employee Signature

LABEL 11-B, SEPTEMBER 2015 PSN 7690-02-000-9996 3-ADDRESSEE COPY

† Money Back Guarantee for U.S. destinations only.

VISIT US AT USPS.COM®
ORDER FREE SUPPLIES ONLINE

UNITED STATES POSTAL SERVICE

JULIE E. ADAMS
SECRETARY

DANA K. MACCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232

WASHINGTON, DC 20510-7116

PHONE(202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____ _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL 9-16-19
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☒

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS		☐
UPS		☐
DHL		☐
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 9-20-16

4/04/16

2016092002003735 14

SEN PATCH

SEN PATCH

2016092002003735 15