

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

ADDRESS (number and street) 655 15TH STREET NW  
SUITE 900  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20005

2. **FEC IDENTIFICATION NUMBER** C00255216  
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 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2008 through 06 30 2008

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 Marc J. Gerson

Signature of Treasurer Electronically Filed by Marc J. Gerson Date 07 09 2008

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		31238.39
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	35649.35									
(c) Total Receipts (from Line 19) .....	12214.08	21671.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	47863.43	52910.31								
7. Total Disbursements (from Line 31) .....	16545.19	21592.07								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	31318.24	31318.24								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	12164.08	19885.88
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	50.00	1786.04
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	12214.08	21671.92
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	12214.08	21671.92
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	12214.08	21671.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12214.08	21671.92

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16500.00	21500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	45.19	92.07
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	16545.19	21592.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16545.19	21592.07

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	12214.08	21671.92
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12214.08	21671.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 26  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

**A.**

Full Name (Last, First, Middle Initial) Mr. James Altman		Date of Receipt MM / DD / YYYY 04 / 30 / 2008
Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900		Transaction ID: SA11AI.5319
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Miller & Chevalier Chartered	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**B.**

Full Name (Last, First, Middle Initial) Mr. James Altman		Date of Receipt MM / DD / YYYY 05 / 31 / 2008
Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900		Transaction ID: SA11AI.5344
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Miller & Chevalier Chartered	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**C.**

Full Name (Last, First, Middle Initial) Mr. James Altman		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900		Transaction ID: SA11AI.5368
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Miller & Chevalier Chartered	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 26  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

**A.**

Full Name (Last, First, Middle Initial) Ms Pamela Bernstein		Date of Receipt MM / DD / YYYY 05 / 31 / 2008
Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900		Transaction ID: SA11AI.5345
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Miller & Chevalier Chartered	Occupation Executive Director	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**B.**

Full Name (Last, First, Middle Initial) Ms Pamela Bernstein		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900		Transaction ID: SA11AI.5369
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Miller & Chevalier Chartered	Occupation Executive Director	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

**C.**

Full Name (Last, First, Middle Initial) Leonard Bickwit		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address Miller & Chevalier Chartered 655 Fifteenth Street, NW		Transaction ID: SA11AI.5387
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 3000.00
Name of Employer Miller & Chevalier Chartered	Occupation Attorney	Cash contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC')

<b>A.</b>	Full Name (Last, First, Middle Initial) Marianna Dyson	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address Miller & Chevalier 655-15th St NW Ste 900	<b>Transaction ID:</b> SA11AI.5321
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 296.88
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1187.52	

<b>B.</b>	Full Name (Last, First, Middle Initial) Marianna Dyson	Date of Receipt MM / DD / YYYY 05 / 31 / 2008
	Mailing Address Miller & Chevalier 655-15th St NW Ste 900	<b>Transaction ID:</b> SA11AI.5346
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 296.88
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1484.40	

<b>C.</b>	Full Name (Last, First, Middle Initial) Marianna Dyson	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address Miller & Chevalier 655-15th St NW Ste 900	<b>Transaction ID:</b> SA11AI.5370
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 296.88
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1781.28	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>890.64</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC')

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Rocco Femia	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900	<b>Transaction ID:</b> SA11AI.5322
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Rocco Femia	Date of Receipt MM / DD / YYYY 05 / 31 / 2008
	Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900	<b>Transaction ID:</b> SA11AI.5347
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 625.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Rocco Femia	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900	<b>Transaction ID:</b> SA11AI.5371
	City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 26  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	
							<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. F. David Foster		Date of Receipt MM / DD / YYYY 04 / 30 / 2008		
	Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900		<b>Transaction ID:</b> SA11AI.5323		
	City Washington	State DC	Zip Code 20005	Amount of Each Receipt this Period 416.66	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer Miller & Chevalier Chartered		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1666.64			

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. F. David Foster		Date of Receipt MM / DD / YYYY 05 / 31 / 2008		
	Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900		<b>Transaction ID:</b> SA11AI.5348		
	City Washington	State DC	Zip Code 20005	Amount of Each Receipt this Period 416.66	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer Miller & Chevalier Chartered		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2083.30			

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. F. David Foster		Date of Receipt MM / DD / YYYY 06 / 30 / 2008		
	Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900		<b>Transaction ID:</b> SA11AI.5372		
	City Washington	State DC	Zip Code 20005	Amount of Each Receipt this Period 416.66	
	FEC ID number of contributing federal political committee. C		Payroll Deduction		
	Name of Employer Miller & Chevalier Chartered		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2499.96			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1249.98
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 26  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

**A.**

Full Name (Last, First, Middle Initial) Mr. Lawrence B Gibbs		Date of Receipt MM / DD / YYYY 04 / 30 / 2008
Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900		Transaction ID: SA11AI.5324
City Washington State DC Zip Code 20005	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 406.25
Name of Employer Miller & Chevalier Chartered Occupation Attorney	Aggregate Year-to-Date 1625.00	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**B.**

Full Name (Last, First, Middle Initial) Mr. Lawrence B Gibbs		Date of Receipt MM / DD / YYYY 05 / 31 / 2008
Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900		Transaction ID: SA11AI.5349
City Washington State DC Zip Code 20005	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 406.25
Name of Employer Miller & Chevalier Chartered Occupation Attorney	Aggregate Year-to-Date 2031.25	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**C.**

Full Name (Last, First, Middle Initial) Mr. Lawrence B Gibbs		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900		Transaction ID: SA11AI.5373
City Washington State DC Zip Code 20005	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 406.25
Name of Employer Miller & Chevalier Chartered Occupation Attorney	Aggregate Year-to-Date 2437.50	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1218.75</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 26  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC')

**A.**

Full Name (Last, First, Middle Initial) Maria Jones		Date of Receipt MM / DD / YYYY 04 / 30 / 2008
Mailing Address Miller & Chevalier Chartered 655-15th St NW Ste 900		Transaction ID: SA11AI.5325
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 171.88
Name of Employer Miller & Chevalier Chartered	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 687.52	

**B.**

Full Name (Last, First, Middle Initial) Maria Jones		Date of Receipt MM / DD / YYYY 05 / 31 / 2008
Mailing Address Miller & Chevalier Chartered 655-15th St NW Ste 900		Transaction ID: SA11AI.5350
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 171.88
Name of Employer Miller & Chevalier Chartered	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 859.40	

**C.**

Full Name (Last, First, Middle Initial) Maria Jones		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address Miller & Chevalier Chartered 655-15th St NW Ste 900		Transaction ID: SA11AI.5374
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 171.88
Name of Employer Miller & Chevalier Chartered	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1031.28	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>515.64</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 13 / 26  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC')

**A.** Full Name (Last, First, Middle Initial)  
Mr. Daniel Luchsinger

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt MM / DD / YYYY  
04 / 30 / 2008

**Transaction ID:** SA11AI.5326

Amount of Each Receipt this Period 187.50

Payroll Deduction

**B.** Full Name (Last, First, Middle Initial)  
Mr. Daniel Luchsinger

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 937.50

Date of Receipt MM / DD / YYYY  
05 / 31 / 2008

**Transaction ID:** SA11AI.5351

Amount of Each Receipt this Period 187.50

Payroll Deduction

**C.** Full Name (Last, First, Middle Initial)  
Mr. Daniel Luchsinger

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** SA11AI.5375

Amount of Each Receipt this Period 187.50

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► 562.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC')

<b>A.</b>	Full Name (Last, First, Middle Initial) mr Samuel Maruca	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900	<b>Transaction ID:</b> SA11AI.5327
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 164.06
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 656.24	

<b>B.</b>	Full Name (Last, First, Middle Initial) mr Samuel Maruca	Date of Receipt MM / DD / YYYY 05 / 31 / 2008
	Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900	<b>Transaction ID:</b> SA11AI.5352
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 164.06
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 820.30	

<b>C.</b>	Full Name (Last, First, Middle Initial) mr Samuel Maruca	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address Miller & Chevalier Chartered 655 15th St NW Suite 900	<b>Transaction ID:</b> SA11AI.5376
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 164.06
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 984.36	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>492.18</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 15 / 26  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC')

**A.** Full Name (Last, First, Middle Initial)  
Mr. C Frederick Oliphant, III

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 04 / 30 / 2008  
Transaction ID: SA11AI.5328  
Amount of Each Receipt this Period: 187.50  
Payroll Deduction

**B.** Full Name (Last, First, Middle Initial)  
Mr. C Frederick Oliphant, III

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 937.50

Date of Receipt: 05 / 31 / 2008  
Transaction ID: SA11AI.5353  
Amount of Each Receipt this Period: 187.50  
Payroll Deduction

**C.** Full Name (Last, First, Middle Initial)  
Mr. C Frederick Oliphant, III

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt: 06 / 30 / 2008  
Transaction ID: SA11AI.5377  
Amount of Each Receipt this Period: 187.50  
Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► 562.50

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC')

<b>A.</b>	Full Name (Last, First, Middle Initial) Gary Quintiere			Date of Receipt MM / DD / YYYY 04 / 30 / 2008		
	Mailing Address Miller & Chevalier 655 15th St NW Ste 900			<b>Transaction ID:</b> SA11AI.5329		
	City Washington		State DC	Zip Code 20005		
	FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 187.50		
	Name of Employer Miller & Chevalier Chartered		Occupation Attorney			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Gary Quintiere			Date of Receipt MM / DD / YYYY 05 / 31 / 2008		
	Mailing Address Miller & Chevalier 655 15th St NW Ste 900			<b>Transaction ID:</b> SA11AI.5354		
	City Washington		State DC	Zip Code 20005		
	FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 187.50		
	Name of Employer Miller & Chevalier Chartered		Occupation Attorney			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 937.50			

<b>C.</b>	Full Name (Last, First, Middle Initial) Gary Quintiere			Date of Receipt MM / DD / YYYY 06 / 30 / 2008		
	Mailing Address Miller & Chevalier 655 15th St NW Ste 900			<b>Transaction ID:</b> SA11AI.5378		
	City Washington		State DC	Zip Code 20005		
	FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 187.50		
	Name of Employer Miller & Chevalier Chartered		Occupation Attorney			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1125.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	562.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 26  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC')

**A.**

Full Name (Last, First, Middle Initial) Mr. Mark Rochon		Date of Receipt MM / DD / YYYY 04 / 30 / 2008
Mailing Address Miller & Chevalier 655-15th St NW Ste 900		Transaction ID: SA11AI.5330
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 218.75
Name of Employer Miller & Chevalier Chartered	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	

**B.**

Full Name (Last, First, Middle Initial) Mr. Mark Rochon		Date of Receipt MM / DD / YYYY 05 / 31 / 2008
Mailing Address Miller & Chevalier 655-15th St NW Ste 900		Transaction ID: SA11AI.5355
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 218.75
Name of Employer Miller & Chevalier Chartered	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1093.75	

**C.**

Full Name (Last, First, Middle Initial) Mr. Mark Rochon		Date of Receipt MM / DD / YYYY 06 / 30 / 2008
Mailing Address Miller & Chevalier 655-15th St NW Ste 900		Transaction ID: SA11AI.5379
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 218.75
Name of Employer Miller & Chevalier Chartered	Occupation Attorney	Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1312.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>656.25</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 26
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Lou Soller	Date of Receipt MM / DD / YYYY 04 / 30 / 2008
	Mailing Address Miller & Chevalier 655-15th St NW Ste 900	<b>Transaction ID:</b> SA11AI.5331
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 116.67
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 466.68	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mary Lou Soller	Date of Receipt MM / DD / YYYY 05 / 31 / 2008
	Mailing Address Miller & Chevalier 655-15th St NW Ste 900	<b>Transaction ID:</b> SA11AI.5356
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 116.67
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 583.35	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Lou Soller	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address Miller & Chevalier 655-15th St NW Ste 900	<b>Transaction ID:</b> SA11AI.5380
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 116.67
	FEC ID number of contributing federal political committee. <b>C</b>	Payroll Deduction
	Name of Employer Miller & Chevalier Chartered Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.02	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>350.01</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 19 / 26  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

**A.** Full Name (Last, First, Middle Initial)  
Ms Patricia Sweeney

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 937.52

Date of Receipt MM / DD / YYYY  
04 / 30 / 2008

**Transaction ID:** SA11AI.5332

Amount of Each Receipt this Period 234.38

Payroll Deduction

**B.** Full Name (Last, First, Middle Initial)  
Ms Patricia Sweeney

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1171.90

Date of Receipt MM / DD / YYYY  
05 / 31 / 2008

**Transaction ID:** SA11AI.5357

Amount of Each Receipt this Period 234.38

Payroll Deduction

**C.** Full Name (Last, First, Middle Initial)  
Ms Patricia Sweeney

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1406.28

Date of Receipt MM / DD / YYYY  
06 / 30 / 2008

**Transaction ID:** SA11AI.5381

Amount of Each Receipt this Period 234.38

Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ► 703.14

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 26  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

**A.**

Full Name (Last, First, Middle Initial)  
Mr Anthony J Trenga

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 833.32

Date of Receipt: 04 / 30 / 2008  
Transaction ID: SA11AI.5333  
Amount of Each Receipt this Period: 208.33  
Payroll Deduction

**B.**

Full Name (Last, First, Middle Initial)  
Mr Anthony J Trenga

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1041.65

Date of Receipt: 05 / 31 / 2008  
Transaction ID: SA11AI.5358  
Amount of Each Receipt this Period: 208.33  
Payroll Deduction

**C.**

Full Name (Last, First, Middle Initial)  
Mr Anthony J Trenga

Mailing Address Miller & Chevalier Chartered  
655 15th St NW Suite 900

City Washington State DC Zip Code 20005

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

Name of Employer Miller & Chevalier Chartered Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1249.98

Date of Receipt: 06 / 30 / 2008  
Transaction ID: SA11AI.5382  
Amount of Each Receipt this Period: 208.33  
Payroll Deduction

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **624.99**

**TOTAL** This Period (last page this line number only) ..... ▶ **12164.08**

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)

MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

**A.** Full Name (Last, First, Middle Initial)  
**BATTLE BORN POLITICAL ACTION COMMITTEE**

Mailing Address P.O. Box 370386  
Suite 300

City Las Vegas State NV Zip Code 89137

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23.5359

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
**CANTOR FOR CONGRESS**

Mailing Address P. O. Box 17813

City Richmond State VA Zip Code 23226

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23.5338

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
**COMMITTEE TO RE-ELECT LINDA SANCHEZ**

Mailing Address 1212 S. Victory Blvd  
SUITE 211

City BURBANK State CA Zip Code 91502

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

**Transaction ID:** SB23.5363

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

A.	Full Name (Last, First, Middle Initial) DAKPAC	Transaction ID: SB23.5361 Date of Disbursement 06 / 09 / 2008
	Mailing Address 607 14th Street NW Suite 800	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS 2008	Transaction ID: SB23.5317 Date of Disbursement 04 / 29 / 2008
	Mailing Address 5915 EASTMAN AVE. SUITE 100 5915 EASTMAN AVE. SUITE 100	Amount of Each Disbursement this Period 1000.00
	City MIDLAND State MI Zip Code 48640	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER	Transaction ID: SB23.5313 Date of Disbursement 04 / 22 / 2008
	Mailing Address PO BOX 641751	Amount of Each Disbursement this Period 1000.00
	City LOS ANGELES State CA Zip Code 90064	
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JAY ROCKEFELLER

Mailing Address PO BOX 1909

City CHARLESTON State WV Zip Code 25327

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23.5341

Date of Disbursement

05 / 19 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JIM INHOFE COMMITTEE

Mailing Address PO BOX 13300

City OKLAHOMA CITY State OK Zip Code 73113

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23.5334

Date of Disbursement

05 / 01 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF KENT CONRAD

Mailing Address PO BOX 812

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23.5311

Date of Disbursement

04 / 15 / 2008

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

A.	Full Name (Last, First, Middle Initial) FRIENDS OF MAX BAUCUS	Transaction ID: SB23.5309 Date of Disbursement
	Mailing Address PO BOX 586	<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City HELENA State MT Zip Code 59624	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) KELLER FOR CONGRESS	Transaction ID: SB23.5383 Date of Disbursement
	Mailing Address P.O. Box 1453	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Orlando State FL Zip Code 32802	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) KENDRICK MEEK CAMPAIGN FOR CONGRESS	Transaction ID: SB23.5315 Date of Disbursement
	Mailing Address 111 NW 183rd Street Suite 325	<input type="text" value="04"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City Miami State FL Zip Code 33169	Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC-')

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>LAUTENBERG FOR SENATE</b>	<b>Transaction ID:</b> SB23.5336 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 8	
	Mailing Address <b>RIVERFRONT PLAZA STATION PO BOX 200596</b>		
	City <b>NEWARK</b> State <b>NJ</b> Zip Code <b>07102</b>	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>LOFGREN FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.5366 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 8	
	Mailing Address <b>P.O. Box 8180 Suite 350</b>		
	City <b>San Jose</b> State <b>CA</b> Zip Code <b>95155</b>	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MIKE THOMPSON FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.5385 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 8	
	Mailing Address <b>5429 Madison Avenue</b>		
	City <b>Sacramento</b> State <b>CA</b> Zip Code <b>95841</b>	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Contribution Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

3000.00

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

16500.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC')

A.	Full Name (Last, First, Middle Initial) MILLER & CHEVALIER CHARTERED POLITICAL ACTION COMMITTEE ('MILLER & CHEVALIER PAC')	Transaction ID: SB29.5365
	Mailing Address 655 15TH STREET NW SUITE 900	Date of Disbursement MM / DD / YYYY 05 / 20 / 2008
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period 15.66
	Purpose of Disbursement Account Analysis Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SunTrust Bank	Transaction ID: SB29.5340
	Mailing Address P.O. Box 622227	Date of Disbursement MM / DD / YYYY 04 / 18 / 2008
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period 12.65
	Purpose of Disbursement Account Analysis Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SunTrust Bank	Transaction ID: SB29.5388
	Mailing Address P.O. Box 622227	Date of Disbursement MM / DD / YYYY 06 / 19 / 2008
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period 16.88
	Purpose of Disbursement Account Analysis Fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>45.19</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>45.19</b>