



**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

Candice Miller for Congress

Report Covering the Period:

From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	69698.00	788818.28
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	50.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	69698.00	788768.28
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	22330.79	569619.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2000.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	22330.79	567619.81
8. Cash on Hand at Close of Reporting Period (from Line 27).....	994854.86	
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	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**POST-ELECTION DETAILED  
SUMMARY PAGE**

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Candice Miller for Congress

Report Covering the Period: From:    To:

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> <input type="text" value="04"/> <input type="text" value="2008"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> <input type="text" value="05"/> <input type="text" value="2008"/> (date after general election)  through <input type="text" value="11"/> <input type="text" value="24"/> <input type="text" value="2008"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (Use Schedule A)		
<input type="text" value="52650.00"/>	<input type="text" value="308779.43"/>	<input type="text" value="1350.00"/>
(ii) Unitemized		
<input type="text" value="1385.00"/>	<input type="text" value="58786.00"/>	<input type="text" value="125.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="54035.00"/>	<input type="text" value="366090.43"/>	<input type="text" value="1475.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="15663.00"/>	<input type="text" value="422727.85"/>	<input type="text" value="1500.00"/>

**POST-ELECTION DETAILED  
SUMMARY PAGE  
Report of Receipts and Disbursements**

<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general Election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
69698.00	788818.28	2975.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	2000.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
0.00	56302.17	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
69698.00	847120.45	2975.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

Candice Miller for Congress

Report the covering period

From:

MM 10

DD 16

YYYY 2008

To:

MM 11

DD 24

YYYY 2008

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
<b>17. OPERATING EXPENDITURES</b>		
22330.79	569619.81	7871.99
<b>18. TRANSFER TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN PAYMENTS</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b) )		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
0.00	50.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST ELECTION DETAILED SUMMARY PAGE**

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Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
-------------------------------	---------------------------------------------------------------------------------------------------	--------------------------	--------------------------------------------------------------------------------------------------------

(c) Other political committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c) )

0.00	50.00	0.00
------	-------	------

21. OTHER DISBURSEMENTS

4000.00	197320.00	0.00
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22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

26330.79	766989.81	7871.99
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

69698.00	788768.28	2975.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

22330.79	567619.81	7871.99
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD .....	951487.65
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	69698.00
25. SUBTOTAL(add Line 23 and Line 24) .....	1021185.65
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	26330.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	994854.86

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    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)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Rinaldo Acciavatti  
Mailing Address 6321 Gratiot

City State Zip Code  
Saint Clair MI 48079

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Pamar Enterprise Construction

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

**Transaction ID:** 81022.C17737  
 Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Peter Ajluni  
Mailing Address 1080 Dowling

City State Zip Code  
Bloomfield Hills MI 48304

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self-employed Physician

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

**Transaction ID:** 81022.C17709  
 Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Paul Alandt  
Mailing Address 635 Lakeshore Rd.

City State Zip Code  
Grosse Pointe MI 48236

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Eastview Holdings Auto Dealer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	2	/	2	0	0	8

**Transaction ID:** 81022.C17699  
 Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1700.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Gary Alessandro	Date of Receipt MM / DD / YYYY 10 / 22 / 2008
	Mailing Address 28135 Groesbeck Hwy	<b>Transaction ID:</b> 81022.C17712
	City State Zip Code Roseville MI 48066-2344	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Lanzo Construction Occupation President Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2450.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) George Atsalakis	Date of Receipt MM / DD / YYYY 10 / 22 / 2008
	Mailing Address 9801 Front Street	<b>Transaction ID:</b> 81022.C17680
	City State Zip Code Pinckney MI 48169-2100	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Atsalis Brothers Painting Co. Occupation Project Manager Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Frank Baiardi	Date of Receipt MM / DD / YYYY 10 / 22 / 2008
	Mailing Address 1877 Vianne	<b>Transaction ID:</b> 81022.C17693
	City State Zip Code Rochester MI 48309	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Superior Excavating Occupation Underground Subcontractor Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Peter Beauregard, Sr.  
Mailing Address 2444 St. Clair River Drive Drive  
City Algonac State MI Zip Code 48001  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Colony Marine Occupation President  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 650.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8  
**Transaction ID:** 81022.C17740  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Jeffrey Bohm  
Mailing Address 613 Jay St.  
City Saint Clair State MI Zip Code 48079  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Viking Fitness Center Occupation Owner  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 200.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8  
**Transaction ID:** 81028.C17757  
Amount of Each Receipt this Period 100.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
John Bologna  
Mailing Address 19135 Saxon Dr.  
City Beverly Hills State MI Zip Code 48025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Bologna Properties & Assc. Occupation President  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8  
**Transaction ID:** 81022.C17716  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1200.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Susan Bryson

Mailing Address 105 Hazel  
P.O. Box 28006

City Harsens Island State MI Zip Code 48028

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

Name of Employer Tashmoo Marina Inc. Occupation Owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008

Date of Receipt 10 / 28 / 2008  
**Transaction ID: 81028.C17785**  
 Amount of Each Receipt this Period 200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Willis Bullard Jr.

Mailing Address 1849 Lakeview

City Highland State MI Zip Code 48357

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008

Date of Receipt 10 / 22 / 2008  
**Transaction ID: 81022.C17708**  
 Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Willis Bullard Jr.

Mailing Address 1849 Lakeview

City Highland State MI Zip Code 48357

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

Name of Employer Self-employed Occupation Attorney

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008

Date of Receipt 10 / 28 / 2008  
**Transaction ID: 81028.C17777**  
 Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Harold Burns

Mailing Address 1460 Kinney Rd.

City State Zip Code  
Memphis MI 48041

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

Name of Employer Occupation  
UHY Advisors Cpa

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 300.00

Transaction ID: 81022.C17747

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Amount of Each Receipt this Period: 1650.00

**B.** Full Name (Last, First, Middle Initial)  
Brian Busch

Mailing Address 50762 Seaun Dr.

City State Zip Code  
Chesterfield Twp. MI 48047

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

Name of Employer Occupation  
ETNA Supply Co. Sales

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: 81022.C17715

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Vincent Cataldo

Mailing Address 6775 Serenity Lane

City State Zip Code  
Saint Clair MI 48079

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

Name of Employer Occupation  
Infuz, Ltd Architect

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 200.00

Transaction ID: 81022.C17734

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
John Catenacci  
 Mailing Address 45000 River Ridge Dr., Suite 200  
 City State Zip Code  
 Clinton Township MI 48038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Carlo Companies Ceo  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3800.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 2 / 2 0 0 8  
**Transaction ID:** 81022.C17689  
 Amount of Each Receipt this Period  
 2000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Joseph Catenacci  
 Mailing Address 45000 River Ridge Dr. STE 200  
 City State Zip Code  
 Clinton Township MI 48038  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 John Carlo, Inc. Chief Operating Officer  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 1 / 1 0 / 2 0 0 8  
**Transaction ID:** 81202.C17821  
 Amount of Each Receipt this Period  
 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Michael Catenacci  
 Mailing Address 4727 Fawn Hill Ct.  
 City State Zip Code  
 Rochester MI 48306  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 John Carlo, Inc. President  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 0 / 2 2 / 2 0 0 8  
**Transaction ID:** 81022.C17688  
 Amount of Each Receipt this Period  
 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
William Chope

Mailing Address 39 Waverly

City State Zip Code  
Grosse Pointe MI 48236

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Crest Automotive President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

**Transaction ID:** 81022.C17698

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

1300.00

**B.** Full Name (Last, First, Middle Initial)  
Julius Cicchini

Mailing Address 29623 N. Seawat Ct

City State Zip Code  
Harrison Township MI 48045-2773

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

**Transaction ID:** 81022.C17682

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Gloria Combe

Mailing Address 21671 Welch Rd.

City State Zip Code  
Northville MI 48167-2101

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Canadian National Director

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

**Transaction ID:** 81028.C17781

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2100.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 59  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Marga Coughlin

Mailing Address 39 Golfside

City State Zip Code  
Saint Clair MI 48079

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

Name of Employer Occupation  
American Diamond Importers Secretary

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81028.C17772

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Richard Cummings

Mailing Address 8128 Holly Rd.

City State Zip Code  
Avoca MI 48006

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

Name of Employer Occupation  
United Way of St. Clair City Executive

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81028.C17756

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Eugene DAgostini

Mailing Address 4635 Lockwood

City State Zip Code  
Washington MI 48094

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

Name of Employer Occupation  
Dagostini & Ruggeri Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C17695

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1300.00**

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

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

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

FOR LINE NUMBER: PAGE 15 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Robert DAgostini  
Mailing Address 2281 Pond Vallee Dr.  
City Oakland State MI Zip Code 48363  
FEC ID number of contributing federal political committee. **C**  
Name of Employer L. D Agostini & Sons inc. Occupation Contractor  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 10 / 22 / 2008  
Transaction ID: 81022.C17697  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
John Deaver  
Mailing Address 1820 Ash Dr.  
City Saint Clair State MI Zip Code 48079  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Unity Mold, Inc. Occupation Owner  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: 81028.C17760  
Amount of Each Receipt this Period 200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Linda Dresner  
Mailing Address 711 S. Bates Street  
City Birmingham State MI Zip Code 48009  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self-employed Occupation Retail Merchant  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1000.00  
Date of Receipt 10 / 22 / 2008  
Transaction ID: 81022.C17683  
Amount of Each Receipt this Period 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2200.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
William Dunlop

Mailing Address 9058 Ridgefield

City Brighton State MI Zip Code 48114

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 10 / 28 / 2008  
**Transaction ID:** 81028.C17770  
 Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Wally Evans

Mailing Address 10431 Dixie Hwy.

City Fair Haven State MI Zip Code 48023

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

Name of Employer North Pointe Shores, LLC Occupation Owner

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt 11 / 03 / 2008  
**Transaction ID:** 81202.C17813  
 Amount of Each Receipt this Period 200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Shulamit Glaubach

Mailing Address 2000 California St. Apt 104

City San Francisco State CA Zip Code 94109-4301

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

Name of Employer Self-employed Occupation Psychologist

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 22 / 2008  
**Transaction ID:** 81022.C17714  
 Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 59  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Thomas Guastello

Mailing Address 300 Park St STE 410

City Birmingham State MI Zip Code 48009-3429

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

Name of Employer Center Management Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1150.00

Date of Receipt 10 / 22 / 2008

Transaction ID: 81022.C17710

Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Michael Haddon

Mailing Address 2055 N. River Road

City Saint Clair State MI Zip Code 48079

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

Name of Employer American Vehicle Auto Auction Occupation Ceo

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt 10 / 24 / 2008

Transaction ID: 81024.C17753

Amount of Each Receipt this Period 200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Mary Jane Hay

Mailing Address 1661 Oakland St.

City Saint Clair State MI Zip Code 48079

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

Name of Employer Seaway Mobile Home Ranch Inc. Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt 10 / 28 / 2008

Transaction ID: 81028.C17769

Amount of Each Receipt this Period 100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Nigar Hussain  
Mailing Address 4070 Gratiot Ave.  
City State Zip Code  
Fort Gratiot MI 48059  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Self-employed Physician  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8  
Transaction ID: 81028.C17755  
Amount of Each Receipt this Period  
200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Donald Itzkoff  
Mailing Address 6815 Selkirk Dr.  
City State Zip Code  
Bethesda MD 20817  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
OConnor&Hannan,LLP Attorney  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 150.00  
Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 2 0 / 2 0 0 8  
Transaction ID: 81202.C17827  
Amount of Each Receipt this Period  
150.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Adam Janusch  
Mailing Address 34014 Lotties  
City State Zip Code  
Chesterfield Twp. MI 48047  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Precision Landscape Owner  
Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 200.00  
Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8  
Transaction ID: 81022.C17746  
Amount of Each Receipt this Period  
200.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 550.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 59  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Janet Johnson

Mailing Address 4163 S. River Rd.

City State Zip Code  
East China MI 48054

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

Name of Employer Occupation  
Bruce G. Johnson DO PC Medical-Administrator

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C17748

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Melad Joseph Jr.

Mailing Address 22556 Gratiot

City State Zip Code  
Eastpointe MI 48021-2312

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

Name of Employer Occupation  
KEM-TEC Land Surveyors General Manager

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8

Transaction ID: 81202.C17799

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Dennis Kearns

Mailing Address 614 Holland Ave

City State Zip Code  
Port Huron MI 48060-1507

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

Name of Employer Occupation  
Kearns Agency, Inc. Real Estate Broker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81028.C17776

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1700.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 59

(check only one)

<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)  
Candice Miller for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Robert Kehrig

Mailing Address 100 Lockhaven Ln.

City State Zip Code  
Algonac MI 48001

FEC ID number of contributing federal political committee. C

Name of Employer: Structural Steel Inc. Occupation: Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt: MM / DD / YYYY  
10 / 28 / 2008

**Transaction ID:** 81028.C17773

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
John Kendrick

Mailing Address 1745 Minnesota

City State Zip Code  
Marysville MI 48040

FEC ID number of contributing federal political committee. C

Name of Employer: Pollock-Randall Funeral Home Occupation: Funeral Director

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt: MM / DD / YYYY  
10 / 28 / 2008

**Transaction ID:** 81028.C17782

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Robert Kirk

Mailing Address 19500 Hall Road STE 100

City State Zip Code  
Clinton Township MI 48038

FEC ID number of contributing federal political committee. C

Name of Employer: Kirk & Huth, Pc Occupation: Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY  
10 / 22 / 2008

**Transaction ID:** 81022.C17704

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1400.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 59  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Roy Klecha

Mailing Address 1960 Jackson

City State Zip Code  
Saint Clair MI 48079

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

Name of Employer Occupation  
Seaway Community Bank President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

**Transaction ID:** 81028.C17771

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Cynthia Lane

Mailing Address 4673 Lakeshore Rd

City State Zip Code  
Fort Gratiot MI 48059-3530

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

Name of Employer Occupation  
Self-employed Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

**Transaction ID:** 81028.C17784

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Raymond Lope

Mailing Address 8459 Hall Rd.

City State Zip Code  
Utica MI 48317

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

Name of Employer Occupation  
Wm Sullivan & Son Funeral Home Funeral Director

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

**Transaction ID:** 81022.C17694

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1200.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<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)  
Candice Miller for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Timothy Lukas		Date of Receipt MM / DD / YYYY 10 / 22 / 2008
	Mailing Address 1170 S River Pointe Ln		<b>Transaction ID:</b> 81022.C17735
	City Saint Clair	State MI	Zip Code 48079-3549
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Advanced Orthopedics	Occupation Physician	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) David Marsh		Date of Receipt MM / DD / YYYY 10 / 22 / 2008
	Mailing Address 5203 N. Bancroft Rd.		<b>Transaction ID:</b> 81022.C17700
	City Durand	State MI	Zip Code 48429
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Premarc Corp.	Occupation Bus Owner	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Gerry Mason		Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 300 S. Riverside Suite E		<b>Transaction ID:</b> 81028.C17778
	City Saint Clair	State MI	Zip Code 48079
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Self-employed	Occupation Attorney	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 950.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

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

Mailing Address 910 N. Riverside Ave.

City State Zip Code  
Saint Clair MI 48079

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

Name of Employer Occupation  
McDonald MD Secretary

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Amount of Each Receipt this Period: 1100.00

**B.** Full Name (Last, First, Middle Initial)  
Anne Mervenne

Mailing Address 1316 S. Main St.

City State Zip Code  
Royal Oak MI 48067

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

Name of Employer Occupation  
Mervenne & Co. Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 250.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
Louis Mollicone

Mailing Address 37130 Willow Lane

City State Zip Code  
Clinton Township MI 48036

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

Name of Employer Occupation  
State Barricades Self-employed

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1450.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 25 / 59</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<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)  
Candice Miller for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Paul Muxlow</p> <p>Mailing Address 6756 St. Marys Street P.O. Box 70</p> <p>City State Zip Code Brown City MI 48416-0070</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Red Carpet Keim Muxlow, Inc. Real Estate Broker</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">225.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 8</p> <p><b>Transaction ID:</b> 81028.C17763</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Bryan Neiman</p> <p>Mailing Address 933 N. Riverside Dr.</p> <p>City State Zip Code Saint Clair MI 48079</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation Neimans Family Market Director</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">200.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 8</p> <p><b>Transaction ID:</b> 81028.C17787</p> <p>Amount of Each Receipt this Period 200.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Deloris Newell</p> <p>Mailing Address 2736 Hogan Way</p> <p>City State Zip Code Canton MI 48188</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer Occupation ASG Consultant</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 8</p> <p><b>Transaction ID:</b> 81022.C17707</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Deloris Newell	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 2736 Hogan Way	<b>Transaction ID:</b> 81028.C17779
	City State Zip Code Canton MI 48188	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer ASG	Occupation Consultant	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1100.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Joseph Palm	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address P.O. Box 296	<b>Transaction ID:</b> 81028.C17764
	City State Zip Code Imlay City MI 48444	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Phillip Pavlov	Date of Receipt MM / DD / YYYY 10 / 22 / 2008
	Mailing Address 1577 S. Allen Rd.	<b>Transaction ID:</b> 81022.C17736
	City State Zip Code Saint Clair MI 48079	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer State Of Michigan	Occupation State Representative	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 59  
(check only one)

<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)  
Candice Miller for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Karen Phillips

Mailing Address 2705 Farm Rd.

City State Zip Code  
Alexandria VA 22302

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

Name of Employer Canadian National Occupation Vice President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 100.00

Date of Receipt  
MM / DD / YYYY  
11 / 10 / 2008

**Transaction ID:** 81202.C17820

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Jeffrey Rancilio

Mailing Address 408 Linkside Ct.

City State Zip Code  
Saint Clair MI 48079

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

Name of Employer Oppenheimer Co. Occupation Financial Advisor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2008

**Transaction ID:** 81028.C17766

Amount of Each Receipt this Period  
200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Jim Riehl

Mailing Address 49446 Goolette Pt.

City State Zip Code  
New Baltimore MI 48047

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

Name of Employer Jim Riehl Automotive Group Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
10 / 22 / 2008

**Transaction ID:** 81022.C17706

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1300.00**

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

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

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

FOR LINE NUMBER: PAGE 28 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Gaetano Rizzo

Mailing Address 44899 Centre Ct. STE 101

City State Zip Code  
Clinton Township MI 48038

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

Name of Employer Occupation  
Columbia Homes Builder

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

**Transaction ID:** 81022.C17711

Amount of Each Receipt this Period  
500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Christopher Robbins

Mailing Address 848 N. Carney

City State Zip Code  
Saint Clair MI 48079

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

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

**Transaction ID:** 81028.C17758

Amount of Each Receipt this Period  
100.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jack Robson

Mailing Address 829 Riverview Lane

City State Zip Code  
Marysville MI 48040

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

Name of Employer Occupation  
Carlo Companies Finance Executive

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 4 / 2 0 0 8

**Transaction ID:** 81024.C17754

Amount of Each Receipt this Period  
300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **900.00**

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

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

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

FOR LINE NUMBER: PAGE 29 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Gary Roncelli  
 Mailing Address 69900 Hicks Rd.  
 City Armada State MI Zip Code 48005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Roncelli Inc. Occupation Contractor  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Gary Sakwa  
 Mailing Address 28470 Thirteen Mile Rd., Ste 220  
 City Farmington State MI Zip Code 48334  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Grand/Sakwa Properties, LLC Occupation President  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Michael Santi  
 Mailing Address 4936 Deepwood  
 City Troy State MI Zip Code 48098-4198  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Nagle Paving Co. Occupation Owner  
 Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **3000.00**  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 30 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Shelley Schudlich

Mailing Address 3301 St. Andrews

City State Zip Code  
Port Huron MI 48060

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008

Date of Receipt: 10 / 28 / 2008  
**Transaction ID:** 81028.C17762  
 Amount of Each Receipt this Period: 200.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Roy Sera

Mailing Address 13760 Glenrio Drive

City State Zip Code  
Sterling Heights MI 48313

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

Name of Employer Self-employed Occupation Contractor/Developer

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008

Date of Receipt: 10 / 22 / 2008  
**Transaction ID:** 81022.C17692  
 Amount of Each Receipt this Period: 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mickey Shapiro

Mailing Address 31550 Northwestern Hwy. S 200

City State Zip Code  
Farmington MI 48334

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

Name of Employer Self-employed Occupation Real Estate Investor

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008

Date of Receipt: 10 / 22 / 2008  
**Transaction ID:** 81022.C17679  
 Amount of Each Receipt this Period: 2300.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 59  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Christopher Shea

Mailing Address 1835 Banbury St.

City Birmingham State MI Zip Code 48009

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

Name of Employer PK Contracting, Inc. Occupation Contractor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 22 / 2008  
**Transaction ID:** 81022.C17687

Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Ray Skwiers

Mailing Address 211 Michigan / PO Box 159

City Marine City State MI Zip Code 48039

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

Name of Employer East Detroit Public Schools Occupation Teacher

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2008  
**Transaction ID:** 81028.C17780

Amount of Each Receipt this Period 150.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Anthony Soave

Mailing Address 3400 E. Lafayette

City Detroit State MI Zip Code 48207

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

Name of Employer Soave Enterprises Occupation President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 22 / 2008  
**Transaction ID:** 81022.C17690

Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2150.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 59
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Kevin Soucie		Date of Receipt
	Mailing Address 630 N 4th St Unit 170		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 0 / 2 0 0 8
	City	State	Zip Code
	Milwaukee	WI	53203-2812
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81202.C17826
Name of Employer Soucie Assoc.		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 100.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) Louis Stramaglia		Date of Receipt
	Mailing Address 1630 Baron Ct.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 0 8
	City	State	Zip Code
	Rochester	MI	48307
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81022.C17691
Name of Employer Self-employed		Occupation Developer	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) William Theile		Date of Receipt
	Mailing Address 23053 Brookforest		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 0 8
	City	State	Zip Code
	Novi	MI	48375
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: 81022.C17686
Name of Employer Wolverine Tractor & Equipment		Occupation Sales Representative	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			Receipt
<input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2100.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 33 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Peter Treboldi  
Mailing Address 755 W. Big Beaver Road STE 2300  
City State Zip Code  
Troy MI 48084  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Doeren Mayhew Occupation Cpa  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt: 10 / 22 / 2008  
Transaction ID: 81022.C17684  
Amount of Each Receipt this Period: 1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
James Vandenberghe  
Mailing Address 543 Lakeshore Rd.  
City State Zip Code  
Grosse Pointe MI 48236  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Lear Corporation Occupation Executive  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt: 10 / 24 / 2008  
Transaction ID: 81024.C17749  
Amount of Each Receipt this Period: 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Thomas Vertin  
Mailing Address 6535 Green Dr  
City State Zip Code  
Harsens Is MI 48028-9642  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2008 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼  
Date of Receipt: 10 / 28 / 2008  
Transaction ID: 81028.C17774  
Amount of Each Receipt this Period: 400.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1900.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Peter Walocko Jr.  
Mailing Address 26506 Hendrie

City State Zip Code  
Huntington Woods MI 48070-1343

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

Name of Employer Signature Associates Occupation Executive

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 200.00

Transaction ID: 81022.C17685

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
John Weaver  
Mailing Address 48121 Liberty Dr

City State Zip Code  
Shelby Twp. MI 48315-4061

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

Name of Employer Booz Allen Hamilton Occupation Consultant

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 400.00

Transaction ID: 81024.C17752

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Brian Williams  
Mailing Address 1120 Ridley Rd

City State Zip Code  
Palms MI 48465-9798

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

Name of Employer Brian Williams Farm Occupation Farmer

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period: 250.00

Transaction ID: 81028.C17767

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **600.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 59  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Eugene Zapczynski

Mailing Address 615 Appoline Ct.

City State Zip Code  
Rochester MI 48307

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

Name of Employer Occupation  
Riteway Self-employed

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C17702

Amount of Each Receipt this Period  
2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Ken Zapczynski

Mailing Address 50500 Design Ln.

City State Zip Code  
Shelby Twp. MI 48315

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

Name of Employer Occupation  
Riteway Self-employed

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 2 / 2 0 0 8

Transaction ID: 81022.C17703

Amount of Each Receipt this Period  
1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

**TOTAL** This Period (last page this line number only) ..... ► **52650.00**

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 59  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Alticor PAC (ALTIPAC)  
Mailing Address 7575 E. Fulton St.  
City State Zip Code  
Ada MI 49355  
FEC ID number of contributing federal political committee. **C** C00034884  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 0 / 2 0 0 8  
**Transaction ID:** 81202.C17824  
Amount of Each Receipt this Period  
500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
American Hospital Assoc. PAC  
Mailing Address 325 Seventh St. NW Ste. 700  
City State Zip Code  
Washington DC 20004  
FEC ID number of contributing federal political committee. **C** C00106146  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8  
**Transaction ID:** 81028.C17791  
Amount of Each Receipt this Period  
500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Bricklayers & Allied Craftworkers BACPAC  
Mailing Address 620 F St NW  
City State Zip Code  
Washington DC 20004-1618  
FEC ID number of contributing federal political committee. **C** C00003632  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8  
**Transaction ID:** 81030.C17798  
Amount of Each Receipt this Period  
1500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 59  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Building & Construction Trades Dept. PEF

Mailing Address 815 16th Street, NW  
Suite 600

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 11 / 03 / 2008  
**Transaction ID: 81202.C17811**  
Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
CMS Energy Employees for Better Govt-FED

Mailing Address One Energy Plaza  
EP8-267

City Jackson State MI Zip Code 49201

FEC ID number of contributing federal political committee. **C** C00075473

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6500.00

Date of Receipt 11 / 03 / 2008  
**Transaction ID: 81202.C17810**  
Amount of Each Receipt this Period 500.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Comcast Corporation PAC

Mailing Address 1701 JFK Blvd.

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 10 / 30 / 2008  
**Transaction ID: 81030.C17797**  
Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 59

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Dairy Farmers Of America, Inc. (DEPAC)  
Mailing Address 10220 North Ambassador Drive  
City State Zip Code  
Kansas City MO 64153  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 0 / 2 0 0 8  
Transaction ID: 81202.C17825  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Dominos Pizza LLC PAC  
Mailing Address 30 Frank Lloyd Wright Drive  
City State Zip Code  
Ann Arbor MI 48106  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2113.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8  
Transaction ID: 81028.C17793  
Amount of Each Receipt this Period  
2113.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ford Motor Company Civic Action Fund  
Mailing Address The American Road  
City State Zip Code  
Dearborn MI 48121  
FEC ID number of contributing federal political committee. **C** C00046474  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 8  
Transaction ID: 81028.C17790  
Amount of Each Receipt this Period  
1000.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

4113.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 59  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
International Brotherhood of Boilermaker

Mailing Address 753 State Avenue  
STE 555

City Kansas City State KS Zip Code 66101-2511

FEC ID number of contributing federal political committee. **C** C00005157

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt 10 / 28 / 2008  
**Transaction ID:** 81028.C17792

Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
ITC Holdings Corp. PAC

Mailing Address 201 Townsend Street, Suite 900

City Lansing State MI Zip Code 48933

FEC ID number of contributing federal political committee. **C** C00388462

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt 10 / 22 / 2008  
**Transaction ID:** 81022.C17722

Amount of Each Receipt this Period 2000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Solutions America PAC

Mailing Address 676A 9th Avenue #320

City New York State NY Zip Code 10018

FEC ID number of contributing federal political committee. **C** C00335448

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 28 / 2008  
**Transaction ID:** 81028.C17794

Amount of Each Receipt this Period 1000.00

Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 59  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
The Polyone Corporation PAC  
Mailing Address 33587 Walker Rd.  
City Avon Lake State OH Zip Code 44012  
FEC ID number of contributing federal political committee. **C** C00288712  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: 81024.C17751  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
United Parcel Service Inc PAC (UPSPAC)  
Mailing Address 55 Glenlake Parkway NE  
City Atlanta State GA Zip Code 30328  
FEC ID number of contributing federal political committee. **C** C00064766  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 9500.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: 81028.C17789  
Amount of Each Receipt this Period 500.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
VFW - PAC, Inc.  
Mailing Address 200 Maryland Ave. N.E.  
City Washington State DC Zip Code 20002  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1300.00  
Date of Receipt 10 / 22 / 2008  
Transaction ID: 81022.C17723  
Amount of Each Receipt this Period 1300.00  
Receipt  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2300.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 41 / 59	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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) Candice Miller for Congress
------------------------------------------------------------

A.

Full Name (Last, First, Middle Initial) White Castle PAC		Date of Receipt MM / DD / YYYY 10 / 22 / 2008
Mailing Address 555 W. Goodale St. P.O. Box 1498		Transaction ID: 81022.C17721
City Columbus	State OH	Zip Code 43215
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	15663.00

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
Candice Miller for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) A&F Mini Mart - Citgo Gas Station Mailing Address 46555 Van Dyke City Shelby Twp. State MI Zip Code 48315- Purpose of Disbursement Gas-Vehicle Fuel Expense 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) ▼	Transaction ID: 81022.E3994 Date of Disbursement 10 / 21 / 2008 Amount of Each Disbursement this Period 38.69 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>GAS-VEHICLE FUEL EXPENSE</b>	
<b>B.</b>	Full Name (Last, First, Middle Initial) A&F Mini Mart - Citgo Gas Station Mailing Address 46555 Van Dyke City Shelby Twp. State MI Zip Code 48315- Purpose of Disbursement Gas-Vehicle Fuel Expense 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) ▼	Transaction ID: 81022.E4001 Date of Disbursement 10 / 21 / 2008 Amount of Each Disbursement this Period 25.29 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>GAS-VEHICLE FUEL EXPENSE</b>	
<b>C.</b>	Full Name (Last, First, Middle Initial) A&F Mini Mart - Citgo Gas Station Mailing Address 46555 Van Dyke City Shelby Twp. State MI Zip Code 48315- Purpose of Disbursement Gas-Vehicle Fuel Expense 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) ▼	Transaction ID: 81022.E3995 Date of Disbursement 10 / 21 / 2008 Amount of Each Disbursement this Period 49.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>GAS-VEHICLE FUEL EXPENSE</b>	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>113.08</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) A&F Mini Mart - Citgo Gas Station <hr/> Mailing Address 46555 Van Dyke <hr/> City Shelby Twp. State MI Zip Code 48315- <hr/> Purpose of Disbursement Gas-Vehicle Fuel Expense Candidate Name <hr/> 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>Transaction ID:</b> 81022.E3993 Date of Disbursement 10 / 21 / 2008	Amount of Each Disbursement this Period 31.79 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>GAS-VEHICLE FUEL EXPENSE</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) A&F Mini Mart - Citgo Gas Station <hr/> Mailing Address 46555 Van Dyke <hr/> City Shelby Twp. State MI Zip Code 48315- <hr/> Purpose of Disbursement Gas-Vehicle Fuel Expense Candidate Name <hr/> 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>Transaction ID:</b> 81028.E4023 Date of Disbursement 10 / 28 / 2008	Amount of Each Disbursement this Period 35.01 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>GAS-VEHICLE FUEL EXPENSE</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) A&F Mini Mart - Citgo Gas Station <hr/> Mailing Address 46555 Van Dyke <hr/> City Shelby Twp. State MI Zip Code 48315- <hr/> Purpose of Disbursement Gas-Vehicle Fuel Expense Candidate Name <hr/> 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>Transaction ID:</b> 81028.E4024 Date of Disbursement 10 / 28 / 2008	Amount of Each Disbursement this Period 23.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>GAS-VEHICLE FUEL EXPENSE</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>89.80</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

A.

Full Name (Last, First, Middle Initial)  
A.C.E. Catering

Mailing Address 350 W. Sutton Rd.

City State Zip Code  
Metamora MI 48455-

Purpose of Disbursement  
Lapeer Event Food Catering Expense

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81024.E4012  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	0	8

Amount of Each Disbursement this Period

375.00
--------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

LAPEER EVENT FOOD CATERING EXPENSE

B.

Full Name (Last, First, Middle Initial)  
AT&T Mobility

Mailing Address P.O. Box 6463

City State Zip Code  
Carol Stream IL 60197-6463

Purpose of Disbursement  
Cell Phone & Blackberry Fee

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81202.E4034  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	0	8

Amount of Each Disbursement this Period

332.11
--------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

CELL PHONE & BLACKBERRY FEE

C.

Full Name (Last, First, Middle Initial)  
Elavon Banc Card of America

Mailing Address 7301 Chapman Highway

City State Zip Code  
Knoxville TN 37920-

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 81202.E4057  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	0	8

Amount of Each Disbursement this Period

367.51
--------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

CREDIT CARD PROCESSING FEE

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

1074.62
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TOTAL This Period (last page this line number only) .....

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**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)  
Candice Miller for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Big Time, Inc. Party Rentals  Mailing Address 54332 Oconee Drive  City Macomb State MI Zip Code 48042-  Purpose of Disbursement Tables & Linens 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) ▼	Transaction ID: 81022.E3984 Date of Disbursement 10 / 21 / 2008  Amount of Each Disbursement this Period 349.25  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>TABLES &amp; LINENS</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Campaign Solutions/The Donatelli Grp  Mailing Address 118 North Saint Asaph St  City Alexandria State VA Zip Code 22314-  Purpose of Disbursement Website Updates & Hosting Fee 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) ▼	Transaction ID: 81202.E4031 Date of Disbursement 11 / 03 / 2008  Amount of Each Disbursement this Period 275.00  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>WEBSITE UPDATES &amp; HOSTING FEE</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Capitol Hill Club  Mailing Address 300 First St., SE  City Washington State DC Zip Code 20003-  Purpose of Disbursement Dinner Expenses & Fundraiser Event 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) ▼	Transaction ID: 81022.E3988 Date of Disbursement 10 / 21 / 2008  Amount of Each Disbursement this Period 1363.22  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>DINNER EXPENSES &amp; FUNDRAISER EVENT</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1987.47</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Cavalier Telephone Mailing Address PO Box 9001111 City Louisville State NE Zip Code 40290-1111 Purpose of Disbursement Local & Long Distance Phone Srvc. 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) ▼	Transaction ID: 81022.E3986 Date of Disbursement 10 / 21 / 2008 Amount of Each Disbursement this Period 224.71 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 LOCAL & LONG DISTANCE PHONE SRVC.	
<b>B.</b>	Full Name (Last, First, Middle Initial) M.J. Chirco Professional Building Mailing Address 48635 Van Dyke City Shelby State MI Zip Code 48317- Purpose of Disbursement Nov. Rent & Security Deposit 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) ▼	Transaction ID: 81202.E4065 Date of Disbursement 11 / 13 / 2008 Amount of Each Disbursement this Period 600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 NOV. RENT & SECURITY DEPOSIT	
<b>C.</b>	Full Name (Last, First, Middle Initial) Citizens State Bank Mailing Address 51066 Washington Street City New Baltimore State MI Zip Code 48047-2157 Purpose of Disbursement Wire Transfer Fee 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) ▼	Transaction ID: 81024.E4014 Date of Disbursement 10 / 24 / 2008 Amount of Each Disbursement this Period 30.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 WIRE TRANSFER FEE	

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

**854.71**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) CLEAR Reg Traveler</p> <p>Mailing Address P.O. Box 421639</p> <p>City Palm Coast State FL Zip Code 32142-1639</p> <p>Purpose of Disbursement 2 Year Membership Renewal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81202.E4039 <b>Date of Disbursement</b> 11 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 318.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>2 YEAR MEMBERSHIP RENEWAL</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Edonation.com</p> <p>Mailing Address 118 N. Saint Asaph St. Ste. 240</p> <p>City Alexandria State VA Zip Code 22314-</p> <p>Purpose of Disbursement Internet Donation Svc. Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81202.E4033 <b>Date of Disbursement</b> 11 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 34.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>INTERNET DONATION SVC. FEE</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car</p> <p>Mailing Address 40742 Van Dyke Ave</p> <p>City Sterling Heights State MI Zip Code 48313-3741</p> <p>Purpose of Disbursement Van Rental for Sign Drops</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81022.E3990 <b>Date of Disbursement</b> 10 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1939.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>VAN RENTAL FOR SIGN DROPS</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2292.25</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car Mailing Address 40742 Van Dyke Ave City Sterling Heights State MI Zip Code 48313-3741 Purpose of Disbursement Van Rental for Sign Pickup 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>Transaction ID:</b> 81202.E4042 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 8	Amount of Each Disbursement this Period 293.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>VAN RENTAL FOR SIGN PICKUP</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car Mailing Address 40742 Van Dyke Ave City Sterling Heights State MI Zip Code 48313-3741 Purpose of Disbursement Van Rental for Sign Pickup 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>Transaction ID:</b> 81202.E4040 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 8	Amount of Each Disbursement this Period 293.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>VAN RENTAL FOR SIGN PICKUP</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car Mailing Address 40742 Van Dyke Ave City Sterling Heights State MI Zip Code 48313-3741 Purpose of Disbursement Van Rental for Sign Pickup 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>Transaction ID:</b> 81202.E4041 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 8	Amount of Each Disbursement this Period 195.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>VAN RENTAL FOR SIGN PICKUP</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>782.48</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

A.	Full Name (Last, First, Middle Initial) Enterprise Rent-A-Car	Transaction ID: 81202.E4056 Date of Disbursement 11 / 13 / 2008
	Mailing Address 40742 Van Dyke Ave	Amount of Each Disbursement this Period 125.37
	City Sterling Heights State MI Zip Code 48313-3741	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Van Rental for Sign Pickup	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) ▼
		VAN RENTAL FOR SIGN PICKUP

B.	Full Name (Last, First, Middle Initial) FedEx Kinkos	Transaction ID: 81022.E4003 Date of Disbursement 10 / 21 / 2008
	Mailing Address 4050 Rochester Road	Amount of Each Disbursement this Period 42.39
	City Troy State MI Zip Code 48085-4923	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraiser Host Cmte. Board	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) ▼
		FUNDRAISER HOST CMTE. BOARD

C.	Full Name (Last, First, Middle Initial) FedEx Kinkos	Transaction ID: 81028.E4020 Date of Disbursement 10 / 28 / 2008
	Mailing Address 4050 Rochester Road	Amount of Each Disbursement this Period 95.39
	City Troy State MI Zip Code 48085-4923	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Fundraiser Host Cmte. Board	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) ▼
		FUNDRAISER HOST CMTE. BOARD

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	263.15
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

A.

Full Name (Last, First, Middle Initial)  
Interfaith Center for Racial Justice

Transaction ID: 81202.E4038

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	0	8

Mailing Address Tyson House  
84 Beyne Street

Amount of Each Disbursement this Period

100.00
--------

City State Zip Code  
Mount Clemens MI 48043-

Purpose of Disbursement  
Full Page AD MLK Jr. Dinner

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

FULL PAGE AD MLK JR. DINNER

State: District:

B.

Full Name (Last, First, Middle Initial)  
Anthony Lewis

Transaction ID: 81022.E4004

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

Mailing Address 8160 Constitution Blvd Apt 3

Amount of Each Disbursement this Period

181.86
--------

City State Zip Code  
Sterling Heights MI 48313-3855

Purpose of Disbursement  
Salary Two Weeks Ending 10/15

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

SALARY TWO WEEKS ENDING 10/15

State: District:

C.

Full Name (Last, First, Middle Initial)  
Anthony Lewis

Transaction ID: 81028.E4018

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

Mailing Address 8160 Constitution Blvd Apt 3

Amount of Each Disbursement this Period

181.86
--------

City State Zip Code  
Sterling Heights MI 48313-3855

Purpose of Disbursement  
Salary Two Weeks Ending 10/29

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

SALARY TWO WEEKS ENDING 10/29

State: District:

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

463.72
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TOTAL This Period (last page this line number only) ..... ▶

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**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)  
Candice Miller for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Anthony Lewis</p> <p>Mailing Address 8160 Constitution Blvd Apt 3</p> <p>City Sterling Heights State MI Zip Code 48313-3855</p> <p>Purpose of Disbursement Salary Two Weeks Ending 11/12</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81202.E4060</p> <p>Date of Disbursement 11 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 181.86</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>SALARY TWO WEEKS ENDING 11/12</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Anthony Lewis</p> <p>Mailing Address 8160 Constitution Blvd Apt 3</p> <p>City Sterling Heights State MI Zip Code 48313-3855</p> <p>Purpose of Disbursement Reimbursement-Gas Mileage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81202.E4062</p> <p>Date of Disbursement 11 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 225.23</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>REIMBURSEMENT-GAS MILEAGE</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Anthony Lewis</p> <p>Mailing Address 8160 Constitution Blvd Apt 3</p> <p>City Sterling Heights State MI Zip Code 48313-3855</p> <p>Purpose of Disbursement Reimbursement-StampsFood&amp;Signs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81202.E4061</p> <p>Date of Disbursement 11 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 162.69</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>REIMBURSEMENT-STAMPSFOOD&amp;-SIGNS</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>569.78</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

A.	Full Name (Last, First, Middle Initial) Harbor Restaurant Corp.-Mac & Rays	Transaction ID: 81202.E4043
	Mailing Address 42000 Sea Ray Blvd.	Date of Disbursement 11 / 10 / 2008
	City Harrison Township State MI Zip Code 48045-	Amount of Each Disbursement this Period 457.24
	Purpose of Disbursement Staff Dinner Expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	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) ▼
		STAFF DINNER EXPENSE

B.	Full Name (Last, First, Middle Initial) Macomb County Republican Committee	Transaction ID: 81202.E4068
	Mailing Address 48711 Van Dyke	Date of Disbursement 11 / 19 / 2008
	City Shelby State MI Zip Code 48317-	Amount of Each Disbursement this Period 697.50
	Purpose of Disbursement November Rent & Comcast Internet	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	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) ▼
		NOVEMBER RENT & COMCAST INTERNET

C.	Full Name (Last, First, Middle Initial) March Of Dimes	Transaction ID: 81202.E4025
	Mailing Address 27600 Northwestern Hwy. #150	Date of Disbursement 10 / 25 / 2008
	City Southfield State MI Zip Code 48034-	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement Charitable Donation	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	Category/Type
	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) ▼
		CHARITABLE DONATION

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

1354.74

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Marketing Resource Group, Inc.</p> <p>Mailing Address 225 S. Washington Square P.O. Box 20064</p> <p>City Lansing State MI Zip Code 48933-</p> <p>Purpose of Disbursement Freight &amp; Studio Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81022.E3987</p> <p>Date of Disbursement 10 / 21 / 2008</p> <p>Amount of Each Disbursement this Period 1262.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>FREIGHT &amp; STUDIO EXPENSE</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Marketing Resource Group, Inc.</p> <p>Mailing Address 225 S. Washington Square P.O. Box 20064</p> <p>City Lansing State MI Zip Code 48933-</p> <p>Purpose of Disbursement Radio Advertisement Buy</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81024.E4013</p> <p>Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 1706.82</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>RADIO ADVERTISEMENT BUY</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Marketing Resource Group, Inc.</p> <p>Mailing Address 225 S. Washington Square P.O. Box 20064</p> <p>City Lansing State MI Zip Code 48933-</p> <p>Purpose of Disbursement Loyal Studios Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 81202.E4032</p> <p>Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 711.77</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>LOYEL STUDIOS FEE</b></p>

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

3680.97

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

A.

Full Name (Last, First, Middle Initial)  
Marketing Resource Group, Inc.

Transaction ID: 81202.E4036  
Date of Disbursement

Mailing Address 225 S. Washington Square  
P.O. Box 20064

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	0	8

City Lansing State MI Zip Code 48933-

Amount of Each Disbursement this Period

255.15
--------

Purpose of Disbursement  
UPS Charges & Studio Fee

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

--

UPS CHARGES & STUDIO FEE

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Office Depot

Transaction ID: 81028.E4021  
Date of Disbursement

Mailing Address 44835 Schoenherr Rd.

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	8		2	0	0	8

City Sterling Heights State MI Zip Code 48313-

Amount of Each Disbursement this Period

38.15
-------

Purpose of Disbursement  
Name Badges

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

--

NAME BADGES

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Paychex

Transaction ID: 81022.E4006  
Date of Disbursement

Mailing Address Office 50  
29065 Cabot Dr.

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	1		2	0	0	8

City Novi State MI Zip Code 48377-

Amount of Each Disbursement this Period

96.55
-------

Purpose of Disbursement  
Employee Taxes

--

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

--

EMPLOYEE TAXES

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

389.85
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TOTAL This Period (last page this line number only) .....

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**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)  
Candice Miller for Congress

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: 81028.E4019 Date of Disbursement 10 / 29 / 2008
	Mailing Address Office 50 29065 Cabot Dr.	Amount of Each Disbursement this Period 96.55
	City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Employee Taxes	EMPLOYEE TAXES
	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) Paychex	Transaction ID: 81202.E4035 Date of Disbursement 11 / 10 / 2008
	Mailing Address Office 50 29065 Cabot Dr.	Amount of Each Disbursement this Period 194.79
	City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary Service Fee	SALARY SERVICE FEE
	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) Paychex	Transaction ID: 81202.E4058 Date of Disbursement 11 / 12 / 2008
	Mailing Address Office 50 29065 Cabot Dr.	Amount of Each Disbursement this Period 96.55
	City Novi State MI Zip Code 48377-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Employee Taxes	EMPLOYEE TAXES
	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>387.89</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Racheles On the Go <hr/> Mailing Address 152 South Water Street <hr/> City State Zip Code Marine City MI 48039- <hr/> Purpose of Disbursement Food Catering Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81202.E4066 Date of Disbursement 11 / 19 / 2008	Amount of Each Disbursement this Period 1996.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>FOOD CATERING SERVICES</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Adam Stachecki <hr/> Mailing Address 4114 Foxhill <hr/> City State Zip Code Sterling Heights MI 48310- <hr/> Purpose of Disbursement Salary Two Weeks Ending 10/15 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81022.E4005 Date of Disbursement 10 / 21 / 2008	Amount of Each Disbursement this Period 166.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>SALARY TWO WEEKS ENDING 10/15</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Adam Stachecki <hr/> Mailing Address 4114 Foxhill <hr/> City State Zip Code Sterling Heights MI 48310- <hr/> Purpose of Disbursement Salary Two Weeks Ending 10/29 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81028.E4017 Date of Disbursement 10 / 29 / 2008	Amount of Each Disbursement this Period 166.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>SALARY TWO WEEKS ENDING 10/29</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2328.89</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Candice Miller for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Adam Stachecki <hr/> Mailing Address 4114 Foxhill <hr/> City Sterling Heights State MI Zip Code 48310- <hr/> Purpose of Disbursement Salary Two Weeks Ending 11/12 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>Transaction ID:</b> 81202.E4059 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 166.19 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  SALARY TWO WEEKS ENDING 11/12
<b>B.</b>	Full Name (Last, First, Middle Initial) Adam Stachecki <hr/> Mailing Address 4114 Foxhill <hr/> City Sterling Heights State MI Zip Code 48310- <hr/> Purpose of Disbursement Reimbursement-Gas Expenses 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>Transaction ID:</b> 81202.E4063 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 1 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 25.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  REIMBURSEMENT-GAS EXPENSES
<b>C.</b>	Full Name (Last, First, Middle Initial) The Theodore Company <hr/> Mailing Address P.O. Box 320412 <hr/> City Alexandria State VA Zip Code 22320- <hr/> Purpose of Disbursement Fundraising & Consulting Services 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>Transaction ID:</b> 81022.E3989 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 3980.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  FUNDRAISING & CONSULTING SERVICES

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4171.19
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
Candice Miller for Congress

A.	Full Name (Last, First, Middle Initial) U.S. House of Representatives Gift Shop	Transaction ID: 81202.E4028 Date of Disbursement 11 / 03 / 2008
	Mailing Address B-218 Longworth HOB	Amount of Each Disbursement this Period 45.00
	City Washington State DC Zip Code 20515-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Retirement Gift	Category/Type
	Candidate Name	RETIREMENT GIFT
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Norman Valli	Transaction ID: 81202.E4026 Date of Disbursement 10 / 31 / 2008
	Mailing Address 57867 Emerald Ct.	Amount of Each Disbursement this Period 113.23
	City Washington State MI Zip Code 48094-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement-Parade Float Supplies	Category/Type
	Candidate Name	REIMBURSEMENT-PARADE FLOAT SUPPLIES
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Viviano Flower Shop, Inc.	Transaction ID: 81202.E4037 Date of Disbursement 11 / 10 / 2008
	Mailing Address 47593 Van Dyke Ave.	Amount of Each Disbursement this Period 189.52
	City Shelby Twp. State MI Zip Code 48315-	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Flowers-Illness	Category/Type
	Candidate Name	FLOWERS-ILLNESS
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>347.75</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>21152.34</b>

**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 59 / 59

<input 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Candice Miller for Congress

**A.** Full Name (Last, First, Middle Initial)  
Mario Diaz-Balart for Congress

Mailing Address 95 Merrick Way Ste 250

City Miami State FL Zip Code 33134-5314

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name  
MARIO DIAZ-BALART

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: FL District: 25

Transaction ID: 81024.E4008

Date of Disbursement

10 / 23 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
Knollenberg for Congress Committee

Mailing Address 31000 Telegraph Rd Ste 110

City Bingham Farms State MI Zip Code 48025-4321

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name  
JOSEPH K KNOLLENBERG

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MI District: 09

Transaction ID: 81022.E3983

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
Lee Terry for Congress

Mailing Address P.O. Box 540098

City Omaha State NE Zip Code 68154-

Purpose of Disbursement  
CAMPAIGN CONTRIBUTION

Candidate Name  
LEE TERRY

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NE District: 02

Transaction ID: 81024.E4009

Date of Disbursement

10 / 23 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

4000.00

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

4000.00