

12 JUL 12 AM 11:01

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

Office Use Only

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

CRAIG MILLER FOR U.S. SENATE INC

ADDRESS (number and street) P.O. BOX 12177

(Check if address is changed) DAYTONA BEACH FL 32120

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed) info@miller2012.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) www.miller2012.com

2. DATE 07 / 09 / 2012

3. FEC IDENTIFICATION NUMBER C 00498899

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

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

Type or Print Name of Treasurer John Ryser

Signature of Treasurer *John Ryser* Date 07 / 09 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

12020433098

5. TYPE OF COMMITTEE

**Candidate Committee:**

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

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

Name of Candidate CRAIG S. MILLER

Candidate Party Affiliation REP Office Sought:  House  Senate  President State FL District

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

Name of Candidate \_\_\_\_\_

**Party Committee:**

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

**Political Action Committee (PAC):**

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

- Corporation  Corporation w/o Capital Stock  Labor Organization
- Membership Organization  Trade Association  Cooperative

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

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

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

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

**Joint Fundraising Representative:**

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

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

**Committees Participating in Joint Fundraiser**

1. \_\_\_\_\_ FEC ID number C

2. \_\_\_\_\_ FEC ID number C

3. \_\_\_\_\_ FEC ID number C

4. \_\_\_\_\_ FEC ID number C

12020433099

Write or Type Committee Name

CRAIG MILLER FOR U.S. SENATE INC

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

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

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

Full Name JONATHAN W. MILLER

Mailing Address P.O. BOX 12177

DAYTONA BEACH FL 32120

Title or Position

CITY

STATE

ZIP CODE

ASSISTANT TREASURER

Telephone number [Empty]

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

Full Name of Treasurer JOHN RYSER

Mailing Address P.O. BOX 12177

DAYTONA BEACH FL 32120

Title or Position

CITY

STATE

ZIP CODE

TREASURUER

Telephone number 407-227-2951

12020433100

Full Name of Designated Agent

JONATHAN W. MILLER

Mailing Address

P.O. BOX 122177

DAYTONA BEACH

CITY

FL

STATE

32120

ZIP CODE

Title or Position

ASSISTANT TREASURER

Telephone number

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

Name of Bank, Depository, etc.

NEW TRADITIONS NATIONAL BANK

Mailing Address

600 WILKINSON STREET

SUITE 100

ORLANDO

CITY

FL

STATE

32803

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

12020453101

AD ST

UNITED STATES

Align top of red line

earth smart

FedEx cart  
envelope

From: (386) 285-7346  
Darise Rysor  
Craig Miller for US Congress  
P.O. Box 12177  
DAYTONA BEACH, FL 32120

Origin ID: DABA

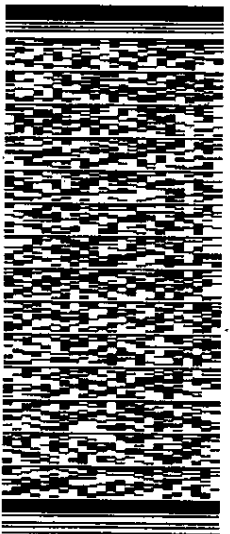


SHIP TO: (202) 224-0758

BILL CREDIT CARD

J12201205300265

Office of Public Records  
Secretary of the Senate  
232 HART SENATE OFFICE BLDG  
WASHINGTON, DC 20510



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Ship Date: 08 JUL 12  
ActWgt: 1.0 LB  
CAD: 30860009/NET3300

Delivery Address Bar Code



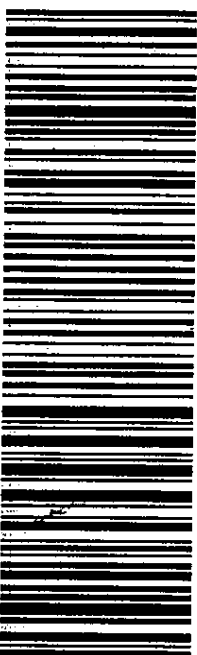
Ref # Change of Treasurer  
Invoice #  
PO #  
Dept #

TRK# 7985 9598 5613  
0201

TUE - 10 JUL A2  
STANDARD OVERNIGHT

XC YKNA

20510  
DC-US  
DCA



51591/REG2/AM44

https:

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U.S. SENATE  
TRACKING NUMBER

20153492021

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark  
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	07-09-12	<input checked="" type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

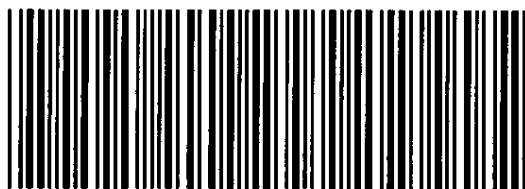
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 07-12-12

12020433103



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