

FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE
04 APR 28 AM 9:52

Office Use Only

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

MIKE MILLER FOR US SENATE

ADDRESS (number and street)

PO BOX 243791

(Check if address is changed)

ANCHORAGE

AK

99524-1379

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

info@mikemiller2004.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.MikeMiller2004.com

COMMITTEE'S FAX NUMBER

907-488-1560

2. DATE 04 15 2004

3. FEC IDENTIFICATION NUMBER ▶ C

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

MICHAEL G. PAULLEY

Signature of Treasurer

Michael G Paulley

Date

04 24 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

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

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 MIKE MILLER

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

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

Name of Candidate _____

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

- (e) This committee is a separate segregated fund.

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

8. Name of Any Connected Organization or Affiliated Committee

NONE

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization:

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

Write or Type Committee Name

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 TREASURER

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number _____

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 MICHAEL G PAOLEY

Mailing Address PO BOX 370522

EAGLE RIVER AKI 99577

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

TREASURER Telephone number 907-1441-6453

Full Name of Designated Agent _____

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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.

WELLS FARGO

Mailing Address

381 SOUTH SANTA CLAUD LANE

NORTH POLE

AK

99705-1

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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UNITED STATES POSTAL SERVICE

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 Time of Mailing: 7:15 AM
 Postage: \$13.65
 Business Day Fee: \$19.07
 Total Postage: \$32.72

DELIVERY (POSTAL USE ONLY)

Delivery Address: 907 Hill - 6453
 Delivery Date: 4/27/04
 Delivery Time: 10:00 AM
 Employee Signature: [Signature]

FROM: **ADDRESSEE**
 MICHAEL TRALEY
 MIKE WEBER FOR US SENATE
 PO Box 243791
 ANCHORAGE, AK 99524-3791

TO: **ADDRESSEE**
 OFFICE OF PUBLIC RECORDS
 ATTN: SECRETARY OF THE SENATE
 PO Box 5109
 ALEXANDRIA, VA

FOR PICKUP OR TRACKING CALL 1-800-222-1811
 www.usps.com

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02/03

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