

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Pat Miles for Congress

ADDRESS (number and street) PO Box 2331

Check if different than previously reported. (ACC) Grand Rapids MI 49501

2. **FEC IDENTIFICATION NUMBER** C00479733 **CITY** **STATE** MI **ZIP CODE** MI 03 **STATE DISTRICT**

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on 08 03 2010 in the State of MI

(c) 30-Day **POST**-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on in the State of

5. Covering Period 07 01 2010 through 07 14 2010

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

Type or Print Name of Treasurer Mr. William Shefferly

Signature of Treasurer Electronically Filed by Mr. William Shefferly Date 07 21 2010

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

Office Use Only								
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**FEC FORM 3**  
(Revised 02/2003)

**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Pat Miles for Congress

Report Covering the Period:

From:

To:

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	7413.12	202839.09
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	490.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	7413.12	202349.09
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	40916.80	91155.97
(b) Total Offsets to Operating Expenditures (from Line 14).....	150.00	150.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	40766.80	91005.97
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>226605.37</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>115000.00</b>	

**For further information contact:**

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Pat Miles for Congress

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	7

D	D
1	4

Y	Y	Y	Y
2	0	1	0

<b>I. RECEIPTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	4680.12	172291.08
(i) Itemized (use Schedule A).....	2733.00	2733.00
(ii) Unitemized.....	7413.12	201339.09
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	0.00	1500.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	7413.12	202839.09
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	115000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	115000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	150.00	150.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	262.25
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	7563.12	318251.34

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

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<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	40916.80	91155.97
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	490.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	490.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	<b>40916.80</b>	<b>91645.97</b>

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	259959.05
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	7563.12
25. SUBTOTAL (add Line 23 and Line 24).....	267522.17
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	40916.80
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	226605.37

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 23  
(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)  
Pat Miles for Congress

**A.** Full Name (Last, First, Middle Initial)  
Jim Aidala

Mailing Address 6840 Sunrise Ct SE

City State Zip Code  
Grand Rapids MI 49546-6644

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Bergson & Campbell Enviromental Consultant

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 07 / 2010

**Transaction ID:** C4848038

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Michael Fayette

Mailing Address 15875 Beach Dr

City State Zip Code  
Spring Lake MI 49456-1867

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Pinsky, Smith, Fayette & Kennedy Lawyer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 14 / 2010

**Transaction ID:** C4853357

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Timothy H. Howlett

Mailing Address 26025 Felicity Lndg

City State Zip Code  
Harrison Township MI 48045-6401

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Dickinson Wright Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 09 / 2010

**Transaction ID:** C4848451

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1000.00

**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 6 / 23</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

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NAME OF COMMITTEE (In Full)  
Pat Miles for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) David Mulenberg	Date of Receipt MM / DD / YYYY 07 / 12 / 2010
	Mailing Address 971 Spaulding Ave SE	<b>Transaction ID:</b> C4851912
	City State Zip Code Ada MI 49301-3704	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Occupation Financial Advisor Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Resnick	Date of Receipt MM / DD / YYYY 07 / 01 / 2010
	Mailing Address 1818 N Fremont St	<b>Transaction ID:</b> C4844082
	City State Zip Code Chicago IL 60614-5005	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer William Harris Investors Occupation Financial Advisor Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MaLinda P. Sapp	Date of Receipt MM / DD / YYYY 07 / 10 / 2010
	Mailing Address 2200 Hearthside Dr SE	<b>Transaction ID:</b> C4853151
	City State Zip Code Ada MI 49301-8383	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Praise Place Ministry Occupation Pastor Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 7 / 23
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NAME OF COMMITTEE (In Full)  
Pat Miles for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Marvin Sapp	Date of Receipt MM / DD / YYYY 07 / 10 / 2010
	Mailing Address 2200 Hearthside Dr SE	<b>Transaction ID:</b> C4853152
	City State Zip Code Ada MI 49301-8383	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Praise Place Ministry Pastor Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Diane Ward	Date of Receipt MM / DD / YYYY 07 / 01 / 2010
	Mailing Address 1220 Philadelphia Ave SE	<b>Transaction ID:</b> C4843934
	City State Zip Code Grand Rapids MI 49506-3927	Amount of Each Receipt this Period 103.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation N/A N/A Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 988.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jim Williams	Date of Receipt MM / DD / YYYY 07 / 12 / 2010
	Mailing Address 3706 Buttrick Ave SE	<b>Transaction ID:</b> C4851958
	City State Zip Code Ada MI 49301-9221	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation williams distributing mgt Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1803.00
<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: <span style="float: right;">PAGE 8 / 23</span>
	(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)  
Pat Miles for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Williams		Date of Receipt
	Mailing Address 338 Auburn Ave SE		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Grand Rapids	MI	49506-1626
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Retired		Occupation Retired
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="415.68"/>	<b>Transaction ID:</b> C4854914
			Amount of Each Receipt this Period <input type="text" value="52.12"/>
			* In-Kind: Materials for 4th of July Parade

<b>B.</b>	Full Name (Last, First, Middle Initial) Jesse A. Witten		Date of Receipt
	Mailing Address 4508 Dalton Rd		<input type="text" value="07"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Chevy Chase	MD	20815-3733
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Drinker Biddle		Occupation Attorney
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text" value="275.00"/>	<b>Transaction ID:</b> C4851137
			Amount of Each Receipt this Period <input type="text" value="125.00"/>
			* In-Kind: Room rental for fundraiser

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="177.12"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="4680.12"/>



# 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)  
Pat Miles for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Adolfo Rosado</p> <p>Mailing Address 1680 Springbrook Drive</p> <p>City Jenison State MI Zip Code 49428</p> <p>Purpose of Disbursement Campaign buttons</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D347930</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>Category/Type: <input type="text" value="004"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Angeline Lee</p> <p>Mailing Address Microsoft Company Store 817 22nd Avenue</p> <p>City Seattle State WA Zip Code 98122</p> <p>Purpose of Disbursement software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D347820</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="67.53"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address PO Box 8100</p> <p>City Aurora State IL Zip Code 60507-8100</p> <p>Purpose of Disbursement Phones/internet</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> D347816</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="364.10"/></p> <p>Category/Type: <input type="text"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="481.63"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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)  
Pat Miles for Congress

A.	Full Name (Last, First, Middle Initial) Best Buy  Mailing Address 2650 E. Beltline, SE  City Grand Rapids State MI Zip Code 49546  Purpose of Disbursement office supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347927 Date of Disbursement 07 / 13 / 2010  Amount of Each Disbursement this Period 137.79  Category/Type
B.	Full Name (Last, First, Middle Initial) Democratic Gain  Mailing Address PO Box 15007  City Washington State DC Zip Code 20003  Purpose of Disbursement Campaign networking Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347928 Date of Disbursement 07 / 06 / 2010  Amount of Each Disbursement this Period 35.00  001 Category/Type
C.	Full Name (Last, First, Middle Initial) Democratic Gain  Mailing Address PO Box 15007  City Washington State DC Zip Code 20003  Purpose of Disbursement Campaign networking Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347929 Date of Disbursement 07 / 13 / 2010  Amount of Each Disbursement this Period 100.00  001 Category/Type

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

272.79

**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)  
Pat Miles for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Department of the Treasury <hr/> Mailing Address Internal Revenue Service Center <hr/> City Cincinnati State OH Zip Code 45999 <hr/> Purpose of Disbursement Employer social security and medicare tax Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D347446 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 420.76
	001 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Department of the Treasury <hr/> Mailing Address Internal Revenue Service Center <hr/> City Cincinnati State OH Zip Code 45999 <hr/> Purpose of Disbursement Unemployment taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D347447 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 16.00
	001 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Will Eberle <hr/> Mailing Address 1454 Robinson Rd SE <hr/> City Grand Rapids State MI Zip Code 49506-1723 <hr/> Purpose of Disbursement Field Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D347455 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 1250.00
	001 Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1686.76

**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)

PAGE 12 / 23

<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)  
Pat Miles for Congress

A.	Full Name (Last, First, Middle Initial) Will Eberle  Mailing Address 1454 Robinson Rd SE  City Grand Rapids State MI Zip Code 49506-1723  Purpose of Disbursement Office supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347926 Date of Disbursement 07 / 13 / 2010  Amount of Each Disbursement this Period 74.95  001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Will Eberle  Mailing Address 1454 Robinson Rd SE  City Grand Rapids State MI Zip Code 49506-1723  Purpose of Disbursement Travel reimbursement Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347809 Date of Disbursement 07 / 05 / 2010  Amount of Each Disbursement this Period 102.58  002 Category/ Type
C.	Full Name (Last, First, Middle Initial) First Data Merchant Services  Mailing Address 1307 Walt Whitman Road  City Melville State NY Zip Code 11747  Purpose of Disbursement Online contribution processing Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347469 Date of Disbursement 07 / 06 / 2010  Amount of Each Disbursement this Period 40.70  003 Category/ Type

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

**218.23**

**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)  
Pat Miles for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) First Data Merchant Services <hr/> Mailing Address 1307 Walt Whitman Road <hr/> City Melville State NY Zip Code 11747 <hr/> Purpose of Disbursement Online contribution processing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D347470 Date of Disbursement 07 / 06 / 2010 <hr/> Amount of Each Disbursement this Period 520.34 <hr/> Category/Type 003
<b>B.</b>	Full Name (Last, First, Middle Initial) First Data Merchant Services <hr/> Mailing Address 1307 Walt Whitman Road <hr/> City Melville State NY Zip Code 11747 <hr/> Purpose of Disbursement Online contribution processing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D347471 Date of Disbursement 07 / 06 / 2010 <hr/> Amount of Each Disbursement this Period 596.18 <hr/> Category/Type 003
<b>C.</b>	Full Name (Last, First, Middle Initial) Terry M. Horton <hr/> Mailing Address 1640 Lyon St NE <hr/> City Grand Rapids State MI Zip Code 49503-3782 <hr/> Purpose of Disbursement Office supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D347807 Date of Disbursement 07 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 682.36 <hr/> Category/Type 001

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

1798.88

**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)  
Pat Miles for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) ISG  Mailing Address 10720 Adams St  City Holland State MI Zip Code 49423-9153  Purpose of Disbursement Web site development Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347931 Date of Disbursement 07 / 06 / 2010  Amount of Each Disbursement this Period 1445.00  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) ISG  Mailing Address 10720 Adams St  City Holland State MI Zip Code 49423-9153  Purpose of Disbursement Email sign up link development Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347932 Date of Disbursement 07 / 06 / 2010  Amount of Each Disbursement this Period 400.00  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) ISG  Mailing Address 10720 Adams St  City Holland State MI Zip Code 49423-9153  Purpose of Disbursement web hosting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347933 Date of Disbursement 07 / 06 / 2010  Amount of Each Disbursement this Period 60.00  001 Category/ Type

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

1905.00

**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)

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<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)  
Pat Miles for Congress

A.	Full Name (Last, First, Middle Initial) Johannah Jelks <hr/> Mailing Address 1112 W Chippewa Dr SE <hr/> City Grand Rapids State MI Zip Code 49506-6551 <hr/> Purpose of Disbursement Office support salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347454 Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 750.00
B.	Full Name (Last, First, Middle Initial) Marogil Family, LLC <hr/> Mailing Address 2151 Robinson Rd SE <hr/> City Grand Rapids State MI Zip Code 49506-1876 <hr/> Purpose of Disbursement Rent - July Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347462 Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 700.00
C.	Full Name (Last, First, Middle Initial) Mercantile Bank of Michigan <hr/> Mailing Address 5610 Byron Center Ave, SW <hr/> City Wyoming State MI Zip Code 49519 <hr/> Purpose of Disbursement Payroll processing fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347448 Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2010 <hr/> Amount of Each Disbursement this Period 30.00

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

1480.00

**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)  
Pat Miles for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Christopher James Mills</p> <p>Mailing Address PO Box 2331</p> <p>City Grand Rapids State MI Zip Code 49501-2331</p> <p>Purpose of Disbursement Finance Director salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D347452 <b>Date of Disbursement</b> 07 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Christopher James Mills</p> <p>Mailing Address PO Box 2331</p> <p>City Grand Rapids State MI Zip Code 49501-2331</p> <p>Purpose of Disbursement Fundraising expenses Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D347810 <b>Date of Disbursement</b> 07 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 279.72</p> <p>003 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) NGP Software, Inc.</p> <p>Mailing Address 1225 Eye Street, NW Suite 1225</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Campaign software Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D347456 <b>Date of Disbursement</b> 07 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 2700.00</p> <p>001 Category/ Type</p>

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

5479.72

**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)

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<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)  
Pat Miles for Congress

A.	Full Name (Last, First, Middle Initial) OfficeMax Mailing Address 4160 28th Street, SE City Grand Rapids State MI Zip Code 49512 Purpose of Disbursement Paper shreader Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347808 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 1 0 Amount of Each Disbursement this Period 74.19 Category/Type 001
B.	Full Name (Last, First, Middle Initial) Patel & Co. Mailing Address 1801 18th St, NW City Washington State DC Zip Code 20009 Purpose of Disbursement Direct mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347924 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0 Amount of Each Disbursement this Period 11343.57 Category/Type 006
C.	Full Name (Last, First, Middle Initial) Patel & Co. Mailing Address 1801 18th St, NW City Washington State DC Zip Code 20009 Purpose of Disbursement Postage for direct mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347925 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 1 0 Amount of Each Disbursement this Period 89.91 Category/Type 006

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

11507.67

**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)  
Pat Miles for Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Rabin Strasberg Media <hr/> Mailing Address 1824 Swann St NW <hr/> City Washington State DC Zip Code 20009 <hr/> Purpose of Disbursement Media consulting services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D347457 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 10000.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Bill Shefferly <hr/> Mailing Address 215 Maryland Ave NE <hr/> City Grand Rapids State MI Zip Code 49503-3937 <hr/> Purpose of Disbursement Treasurer services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D347466 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) State of Michigan <hr/> Mailing Address Unemployment Insurance Agency PO Box 33598 <hr/> City Detroit State MI Zip Code 48232 <hr/> Purpose of Disbursement unemployment tax Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> D347450 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 54.00
	Category/ Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

10554.00

**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)  
Pat Miles for Congress

A.	Full Name (Last, First, Middle Initial) Swift Printing & Communications  Mailing Address 404 Bridge Street, NW  City Grand Rapids State MI Zip Code 49504  Purpose of Disbursement Letterhead, envelopes Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347577 Date of Disbursement 07 / 02 / 2010  Amount of Each Disbursement this Period 2687.63  Category/Type
B.	Full Name (Last, First, Middle Initial) Swift Printing & Communications  Mailing Address 404 Bridge Street, NW  City Grand Rapids State MI Zip Code 49504  Purpose of Disbursement Remittance envelopes Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347583 Date of Disbursement 07 / 02 / 2010  Amount of Each Disbursement this Period 1043.04  003 Category/Type
C.	Full Name (Last, First, Middle Initial) Swift Printing & Communications  Mailing Address 404 Bridge Street, NW  City Grand Rapids State MI Zip Code 49504  Purpose of Disbursement Business cards, walking postcards Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347586 Date of Disbursement 07 / 02 / 2010  Amount of Each Disbursement this Period 1004.35  001 Category/Type

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

4735.02

**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)  
Pat Miles for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) USPS Mailing Address 225 Michigan St, NW City Grand Rapids State MI Zip Code 49501-9958 Purpose of Disbursement Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347811 Date of Disbursement 07 / 06 / 2010 Amount of Each Disbursement this Period 220.00 003 Category/ Type	
<b>B.</b>	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 553 City Warrendale State PA Zip Code 15086-0553 Purpose of Disbursement Cell phone charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347923 Date of Disbursement 07 / 06 / 2010 Amount of Each Disbursement this Period 399.98 001 Category/ Type	
<b>C.</b>	Full Name (Last, First, Middle Initial) Michael Williams Mailing Address 338 Auburn Ave SE City Grand Rapids State MI Zip Code 49506-1626 Purpose of Disbursement Materials for 4th of July Parade Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D347825 Date of Disbursement 07 / 02 / 2010 Amount of Each Disbursement this Period 52.12 * In-Kind Received	

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

**672.10**

**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)

PAGE 21 / 23

<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)  
Pat Miles for Congress

A.

Full Name (Last, First, Middle Initial)  
Jesse A. Witten

Mailing Address 4508 Dalton Rd

City State Zip Code  
Chevy Chase MD 20815-3733

Purpose of Disbursement  
Room rental for fundraiser

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: D345930

Date of Disbursement

07 / 11 / 2010

Amount of Each Disbursement this Period

125.00

\* In-Kind Received

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

125.00

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

40916.80

# SCHEDULE C (FEC Form 3)

## LOANS

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

FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full)  
Pat Miles for Congress

Transaction ID: L648

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Patrick A. Miles, Jr., PERS FUNDS - [PERSONAL FUNDS]

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address 1317 Rosewood Ave SE

City Grand Rapids State MI ZIP Code 49506-3930

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

### TERMS

Date Incurred: M M 03 D D 31 Y Y Y Y 2010  
 Date Due: None  
 Interest Rate: 2.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	50000.00
<b>TOTALS</b> This Period (last page in this line only) .....	▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**

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

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FOR LINE NUMBER: (check only one)  13a  13b

**LOANS**

NAME OF COMMITTEE (In Full)  
Pat Miles for Congress

**Transaction ID: L754**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Patrick A. Miles, Jr., PERS FUNDS - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1317 Rosewood Ave SE	
City Grand Rapids State MI ZIP Code 49506-3930	

Original Amount of Loan 65000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 65000.00
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**TERMS**

Date Incurred MM DD YY 06 30 2010	Date Due no due date	Interest Rate 2.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="65000.00"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input style="width: 100%;" type="text" value="115000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.