

**DEMARIS
MILLER**
U.S. CONGRESS

February 9, 1998

Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Re: C00329839

Dear Sir or Madam:

~~Please note the transcription error in listing the committee.~~

As indicated in the enclosures, the spelling is Demaris, not Damaris.
Please correct the entry and posting on the web.

Thank you very much.

Sincerely yours,



James O. Miller III,
Treasurer

Enclosures

STATEMENT OF ORGANIZATION

(State instructions side for instructions)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM PM '98

SEP 16 11 48 AM '97

1. (a) NAME OF COMMITTEE OR FUND Demaris Miller for Congress	<input type="checkbox"/> (Check if name is changed)	2. DATE 9/15/97
(b) Member and Street Address 903 Turkey Run Road	<input type="checkbox"/> (Check if address is changed)	3. FEC identification Number
(c) City, State and ZIP Code McLean, Virginia 22101		4. Is This Report As Filed? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

15 SEP 1997 11:48 AM '97

I. 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
Demaris H. Miller | Candidate Party Affiliation
Republican | Office Sought
U.S. Congress | State/Party for
VA/8th |
|---|--|---------------------------------------|---|
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee. (name of candidate)
 - (d) This committee is a _____ committee of the _____ Party. (National, State or subordinate) (Democratic, Republican, etc.)
 - (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 a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization

- Corporation Corporation with Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Contact or contacts: Identify by name, address (phone number - optional) and position of the person in possession of certified bonds and records.

Full Name	Mailing Address	Title or Position
James C. Miller III	903 Turkey Run Road; McLean, VA 22101	Treasurer

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., resident treasurer).

Full Name	Mailing Address	Title or Position
James C. Miller III	903 Turkey Run Rd; McLean, VA 22101	Treasurer

9. Bank or Other Depositor: List all banks or other depositories in which the committee deposits funds, holds accounts, or has safety deposit boxes or vaulted funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
First Union Bank	6849 Old Dominion Drive McLean, VA 22101

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


TYPE OF PRINT NAME OF TREASURER James C. Miller III	SIGNATURE OF TREASURER 	DATE 9/15/97
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NOTICE: 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.

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 2-10-98
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	2-19-98 DATE PREPARED