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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Miller, James, Adam, ,		2. Candidate's FEC Identification Number S8MA00359	
(b) Address (number and street) 9 main st apt 1Q		<input type="checkbox"/> Check if address changed	
(c) City, State, and ZIP Code Orleans		MA	02653
4. Party Affiliation DEMOCRATIC PARTY		5. Office Sought Senate	6. State & District of Candidate MA 00
		3. Is This Statement <input checked="" type="checkbox"/> New (N) <input type="checkbox"/> OR <input type="checkbox"/> Amended (A)	

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2028 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

Miller Time

(b) Address (number and street)

9 main st

(c) City, State, and ZIP Code

Orleans

MA

02653

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State, and ZIP Code

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

Signature of Candidate Miller, James, , ,	Date 01/09/2025
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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