

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
Gary Miller for Congress

ADDRESS (number and street) 721 S Brea Canyon Rd Ste 7
 Check if different than previously reported. (ACC)
Diamond Bar CA 91789

2. **FEC IDENTIFICATION NUMBER** C00331496
CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**
3. **IS THIS REPORT** **NEW (N)** **OR** **AMENDED (A)**
CA 42

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 06 08 2010 in the State of CA
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 04 01 2010 through 05 19 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 Cathleen Miller

Signature of Treasurer Electronically Filed by Cathleen Miller Date 05 26 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.

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Gary Miller for Congress

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	5

D	D
1	9

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	23854.95	393757.84
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	23854.95	393757.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	128491.16	334842.94
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3666.11
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	128491.16	331176.83
8. Cash on Hand at Close of Reporting Period (from Line 27).....	948141.16	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	21737.97	

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
Gary Miller for Congress

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	5

D	D
1	9

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	14500.00	0.00
(i) Itemized (use Schedule A).....	354.95	0.00
(ii) Unitemized.....	14854.95	199225.05
(iii) TOTAL of contributions from individuals..... ▶	0.00	32.79
(b) Political Party Committees.....	9000.00	194500.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	23854.95	393757.84
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	3666.11
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	1393.83	32770.97
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	25248.78	430194.92

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	128491.16	334842.94
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	0.00
(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	0.00
21. OTHER DISBURSEMENTS.....	2000.00	27850.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	130491.16	362692.94

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1053383.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	25248.78
25. SUBTOTAL (add Line 23 and Line 24).....	1078632.32
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	130491.16
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	948141.16

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 40
(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)
Gary Miller for Congress

<p>A. Full Name (Last, First, Middle Initial) Danny Brock</p> <p>Mailing Address 4725 Wedgefield Dr</p> <p>City State Zip Code Wilmington NC 28409</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Century 21 Realtor</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 1 0</p> <p>Transaction ID: 11AI-5208</p> <p>Amount of Each Receipt this Period 500.00</p>
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<p>B. Full Name (Last, First, Middle Initial) William Brown</p> <p>Mailing Address 5353 College Ave</p> <p>City State Zip Code Oakland CA 94618</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation William H. Brown Realtor</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 0</p> <p>Transaction ID: 11AI-5203</p> <p>Amount of Each Receipt this Period 500.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Scott Caballero</p> <p>Mailing Address 1222 Feredericksburg Rd</p> <p>City State Zip Code San Antonio TX 78201</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self-Employed Realtor</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 1 0</p> <p>Transaction ID: 11AI-5216</p> <p>Amount of Each Receipt this Period 500.00</p>
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SUBTOTAL of Receipts This Page (optional)	1500.00
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: PAGE 6 / 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gary Miller for Congress

A. Full Name (Last, First, Middle Initial)
Steven A Cinelli

Mailing Address 24605 Heather Heights Rd

City State Zip Code
Saratoga CA 95070

FEC ID number of contributing federal political committee. **C**

Name of Employer Primary Occupation
CEO

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 1 0

Transaction ID: 11AI-5205

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Adam D Cockey

Mailing Address 10531 Willow Vista Way

City State Zip Code
Cockeysville Hunt MD 21030

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation
Realtor

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 9 / 2 0 1 0

Transaction ID: 11AI-5202

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
John Connelley

Mailing Address 94-1076 Puelo St

City State Zip Code
Waipahu HI 96797

FEC ID number of contributing federal political committee. **C**

Name of Employer Coldwell Banker Occupation
Realtor

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 2 / 2 0 1 0

Transaction ID: 11AI-5189

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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: PAGE 7 / 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gary Miller for Congress

A. Full Name (Last, First, Middle Initial)
Diane Gantt

Mailing Address 123 E Brookdale PI

City Fullerton State CA Zip Code 92832

FEC ID number of contributing federal political committee. C

Name of Employer Century 21 Superstars Occupation Realtor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
0 4 / 2 8 / 2 0 1 0

Transaction ID: 11AI-5211

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
James E Henwood

Mailing Address 215 Morning Canyon Rd

City Corona Del Mar State CA Zip Code 92625

FEC ID number of contributing federal political committee. C

Name of Employer Fairplex Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 0

Transaction ID: 11AI-5210

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Joyce Leonard

Mailing Address 24328 Knoll Court

City Diamond Bar State CA Zip Code 91765

FEC ID number of contributing federal political committee. C

Name of Employer Joyce Leonard & Associates Occupation Realtor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 1 0

Transaction ID: 11AI-5209

Amount of Each Receipt this Period 2000.00

SUBTOTAL of Receipts This Page (optional) 2750.00

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: (check only one)	PAGE 8 / 40
	<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"/> 15

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NAME OF COMMITTEE (In Full)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) William N May		Date of Receipt
	Mailing Address 9209 Colima Rd Ste 2000		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Whittier	CA	90605
	FEC ID number of contributing federal political committee.		Transaction ID: 11AI-5195
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Self		Occupation	<input type="text"/>
Ophthalmologist		1000.00	
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		1000.00	

B.	Full Name (Last, First, Middle Initial) Heather Ozur		Date of Receipt
	Mailing Address 43385 Taqllle Espada		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	La Quinta	CA	92253
	FEC ID number of contributing federal political committee.		Transaction ID: 11AI-5193
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Ozur Group		Occupation	<input type="text"/>
Realtor		500.00	
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		500.00	

C.	Full Name (Last, First, Middle Initial) Craig Ragg		Date of Receipt
	Mailing Address 20980 Redwood Rd # 210		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Castro Valley	CA	94546
	FEC ID number of contributing federal political committee.		Transaction ID: 11AI-5197
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Self Employed		Occupation	<input type="text"/>
Realtor		500.00	
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		500.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gary Miller for Congress

<p>A. Full Name (Last, First, Middle Initial) Peter M Rooney</p> <p>Mailing Address 18802 Bardeen Avenue</p> <p>City State Zip Code Irvine CA 92612-1521</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Sares Regis Group Occupation Pres. Commercial Investmnt Div</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 3500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 1 0</p> <p>Transaction ID: 11AI-5200</p> <p>Amount of Each Receipt this Period 1400.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Peter M Rooney</p> <p>Mailing Address 18802 Bardeen Avenue</p> <p>City State Zip Code Irvine CA 92612-1521</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Sares Regis Group Occupation Pres. Commercial Investmnt Div</p> <p>Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 3500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 1 0</p> <p>Transaction ID: 11AI-5201</p> <p>Amount of Each Receipt this Period 1100.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Eric Sapirstein</p> <p>Mailing Address 3305 Wessynton Way</p> <p>City State Zip Code Alexandria VA 22309</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer ENS Resources Occupation Lobbyist</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">Election Cycle-to-Date ▼ 1250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 0</p> <p>Transaction ID: 11AI-5221</p> <p>Amount of Each Receipt this Period 750.00</p>
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SUBTOTAL of Receipts This Page (optional)	3250.00
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: (check only one)	PAGE 10 / 40
	<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"/> 15

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NAME OF COMMITTEE (In Full)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Joel Singer		Date of Receipt
	Mailing Address 5929 Julian Ln		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 26 / 2010
	City	State	Zip Code
	Tarzana	CA	91356
	FEC ID number of contributing federal political committee. C		Transaction ID: 11AI-5207
Name of Employer Calornia Association of Realtors		Occupation CEO	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) Jean Tietgen		Date of Receipt
	Mailing Address 274 Bowling Green Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 05 / 2010
	City	State	Zip Code
	Costa Mesa	CA	92626
	FEC ID number of contributing federal political committee. C		Transaction ID: 11AI-5215
Name of Employer Star Real Estate		Occupation Realtor	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) Laurie Urbigkit		Date of Receipt
	Mailing Address PO Box 1493		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 12 / 2010
	City	State	Zip Code
	Riverton	WY	82501
	FEC ID number of contributing federal political committee. C		Transaction ID: 11AI-5194
Name of Employer Self Employed		Occupation Realtor	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 40
	(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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Irma Rodriguez Vargas		Date of Receipt
	Mailing Address 2319 Pier Ave.		<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Santa Monica	CA	90405
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Real Estate Broker	Transaction ID: 11AI-5199
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="14500.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gary Miller for Congress

A. Full Name (Last, First, Middle Initial)
Associated Builders & Contractors PAC
Mailing Address 4250 N Fairfax Dr 9th floor

City State Zip Code
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	0	/	2	0	1	0

Transaction ID: 11C-5219

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
DealElecActComNatIAutoDealAssoc
Mailing Address 8400 Westpark Dr.

City State Zip Code
McLean VA 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	2	/	2	0	1	0

Transaction ID: 11C-5196

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
Eureka PAC
Mailing Address 7315 Wisconsin Ave

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00390161

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	0	/	2	0	1	0

Transaction ID: 11C-5222

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional) ►

6000.00

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

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**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 40
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)
Gary Miller for Congress

A.

Full Name (Last, First, Middle Initial) GlaxoSmithKline PAC		Date of Receipt MM / DD / YYYY 05 / 17 / 2010
Mailing Address Five Moore Drive		Transaction ID: 11C-5226
City	State	Zip Code
Rsrh.Triangle Pk	NC	27709
FEC ID number of contributing federal political committee.	C C00199703	
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	
		Amount of Each Receipt this Period 2000.00

B.

Full Name (Last, First, Middle Initial) NSSGA ROCKPAC aka Nat'l Stone Sand & Gravel Assn		Date of Receipt MM / DD / YYYY 05 / 10 / 2010
Mailing Address 1605 King Street		Transaction ID: 11C-5218
City	State	Zip Code
Alexandria	VA	22314
FEC ID number of contributing federal political committee.	C C00089458	
Name of Employer	Occupation	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
		Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	9000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gary Miller for Congress

A. Full Name (Last, First, Middle Initial)
CHASE BANK

Mailing Address 1100 S Diamond Bar Blvd.

City State Zip Code
Diamond Bar CA 91765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Election Cycle-to-Date ▼ 4273.12

Date of Receipt: 04 / 19 / 2010
Transaction ID: 15-5638-D
Amount of Each Receipt this Period: 110.76
Interest from Passbook Account

B. Full Name (Last, First, Middle Initial)
CHASE BANK

Mailing Address 1100 S Diamond Bar Blvd.

City State Zip Code
Diamond Bar CA 91765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Election Cycle-to-Date ▼ 4273.12

Date of Receipt: 05 / 19 / 2010
Transaction ID: 15-5662-D
Amount of Each Receipt this Period: 100.73
Interest from Passbook Account

C. Full Name (Last, First, Middle Initial)
Capital Source Bank formerly Fremont

Mailing Address 975 E. Birch Street

City State Zip Code
Brea CA 92821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Election Cycle-to-Date ▼ 10121.99

Date of Receipt: 04 / 30 / 2010
Transaction ID: 15-5645-D
Amount of Each Receipt this Period: 356.29
Interest from Passbook Account

SUBTOTAL of Receipts This Page (optional) ▶ **567.78**

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: PAGE 15 / 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gary Miller for Congress

A. Full Name (Last, First, Middle Initial)
Commercial Bank

Mailing Address 695 Town Center Dr., Ste 100

City State Zip Code
Costa Mesa CA 92626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Election Cycle-to-Date ▼ 2010.55

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 0 / 2 0 1 0

Transaction ID: 15-5636-D

Amount of Each Receipt this Period
257.98

Interest from Passbook Account

B. Full Name (Last, First, Middle Initial)
One West Bank

Mailing Address 225 North Barranca Street

City State Zip Code
West Covina CA 91791

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Election Cycle-to-Date ▼ 8004.22

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: 15-5644-D

Amount of Each Receipt this Period
490.91

Interest from Passbook Account

C. Full Name (Last, First, Middle Initial)
US BANK

Mailing Address 1175 S Grand Ave

City State Zip Code
Diamond Bar CA 91765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Election Cycle-to-Date ▼ 901.33

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 1 0

Transaction ID: 15-5646-D

Amount of Each Receipt this Period
77.16

Interest from Passbook Account

SUBTOTAL of Receipts This Page (optional) ► **826.05**

TOTAL This Period (last page this line number only) ► **1393.83**

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 16 / 40

<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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) CA Law Enforcement Voter Guide <hr/> Mailing Address 555 S. Flower St., #4210 <hr/> City Los Angeles State CA Zip Code 90071 <hr/> Purpose of Disbursement Slate Mailers Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4074 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1760.00
B.	Full Name (Last, First, Middle Initial) California Voter Guide <hr/> Mailing Address 1954 W. Carson Street, Suite B <hr/> City Torrance State CA Zip Code 90501 <hr/> Purpose of Disbursement Slate Mailers Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4070 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 5225.00
C.	Full Name (Last, First, Middle Initial) California Voter Guide <hr/> Mailing Address 1954 W. Carson Street, Suite B <hr/> City Torrance State CA Zip Code 90501 <hr/> Purpose of Disbursement Slate Mailers Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4120 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	7985.00
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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address PO BOX 9159 <hr/> City Uniondale State NY Zip Code 11555-9159 <hr/> Purpose of Disbursement Annual Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4065 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 0	Amount of Each Disbursement this Period 375.00
B.	Full Name (Last, First, Middle Initial) Capitol Hill Club <hr/> Mailing Address PO BOX 9159 <hr/> City Uniondale State NY Zip Code 11555-9159 <hr/> Purpose of Disbursement Food & Beverages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4154 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 0	Amount of Each Disbursement this Period 168.75
C.	Full Name (Last, First, Middle Initial) Citizens for Good Government <hr/> Mailing Address 728 W. Edna Place <hr/> City Covina State CA Zip Code 91722 <hr/> Purpose of Disbursement State Mailers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4069 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 0	Amount of Each Disbursement this Period 3120.00

SUBTOTAL of Disbursements This Page (optional) ▶

3663.75

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 18 / 40

<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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Citizens for Representative Government <hr/> Mailing Address 9000 Sunset Blvd Ste 707 <hr/> City Los Angeles State CA Zip Code 90069 <hr/> Purpose of Disbursement State Mailers Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4068 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1880.00
B.	Full Name (Last, First, Middle Initial) City of Chino Hills <hr/> Mailing Address 2001 Grand Avenue <hr/> City Chino Hills State CA Zip Code 91709-4869 <hr/> Purpose of Disbursement Sign Permit Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4108 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Colby Poster Printing Inc. <hr/> Mailing Address 1332 W 12th Place <hr/> City Los Angeles State CA Zip Code 90015-2089 <hr/> Purpose of Disbursement Posters-Signs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4094 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1308.22

SUBTOTAL of Disbursements This Page (optional) ▶	3438.22
TOTAL This Period (last page this line number only) ▶	(Empty box)

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 19 / 40

<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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Colby Poster Printing Inc. <hr/> Mailing Address 1332 W 12th Place <hr/> City Los Angeles State CA Zip Code 90015-2089 <hr/> Purpose of Disbursement Posters-Signs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4095 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	2	7	/	2	0	1	0	Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">2309.14</td> </tr> </table>	2309.14
M	M	/	D	D	/	Y	Y	Y	Y															
0	4	/	2	7	/	2	0	1	0															
2309.14																								
B.	Full Name (Last, First, Middle Initial) Colby Poster Printing Inc. <hr/> Mailing Address 1332 W 12th Place <hr/> City Los Angeles State CA Zip Code 90015-2089 <hr/> Purpose of Disbursement Signs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4142 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	1	8	/	2	0	1	0	Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1628.69</td> </tr> </table>	1628.69
M	M	/	D	D	/	Y	Y	Y	Y															
0	5	/	1	8	/	2	0	1	0															
1628.69																								
C.	Full Name (Last, First, Middle Initial) Continuing the Republican Revolution <hr/> Mailing Address 1300 Bristol Street North, Ste 100 <hr/> City Newport Beach State CA Zip Code 92660-0936 <hr/> Purpose of Disbursement State Mailers Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4096 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	2	8	/	2	0	1	0	Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table>	1000.00
M	M	/	D	D	/	Y	Y	Y	Y															
0	4	/	2	8	/	2	0	1	0															
1000.00																								

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td style="font-weight: bold;">4937.83</td> </tr> </table>	4937.83
4937.83		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="height: 20px;"> </td> </tr> </table>	

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 20 / 40

<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)
Gary Miller for Congress

A.

Full Name (Last, First, Middle Initial)
Cops Voter Guide

Mailing Address 705-2 E. Bidwell Street, #370

City Folsom State CA Zip Code 95630

Purpose of Disbursement
State Mailers

Candidate Name

004
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 17-4071

Date of Disbursement

04 / 12 / 2010

Amount of Each Disbursement this Period

2056.00

B.

Full Name (Last, First, Middle Initial)
Cosmos Business System

Mailing Address 727 S Brea Canyon Rd Ste 7

City Walnut State CA Zip Code 91789

Purpose of Disbursement
Computer Shop Charge

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 17-4122

Date of Disbursement

05 / 12 / 2010

Amount of Each Disbursement this Period

142.50

C.

Full Name (Last, First, Middle Initial)
Daily Bulletin

Mailing Address 2041 E 4th St

City Ontario State CA Zip Code 91764

Purpose of Disbursement
Subscription

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 17-4102

Date of Disbursement

05 / 03 / 2010

Amount of Each Disbursement this Period

58.50

SUBTOTAL of Disbursements This Page (optional) ▶

2257.00

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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Diamond Bar Republican Federated Women	Transaction ID: 17-4064 Date of Disbursement
	Mailing Address 1906 Samara Drive	<input type="text" value="04"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City Rowland Heights State CA Zip Code 91748	Amount of Each Disbursement this Period
	Purpose of Disbursement Meeting Candidate Name	<input type="text" value="25.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Diamond Bar Republican Federated Women	Transaction ID: 17-4109 Date of Disbursement
	Mailing Address 1906 Samara Drive	<input type="text" value="05"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City Rowland Heights State CA Zip Code 91748	Amount of Each Disbursement this Period
	Purpose of Disbursement Meeting Candidate Name	<input type="text" value="25.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Kim Edens	Transaction ID: 17-4100 Date of Disbursement
	Mailing Address 7438 Bungalow Way	<input type="text" value="05"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City Rancho Cucamonga State CA Zip Code 91739	Amount of Each Disbursement this Period
	Purpose of Disbursement Misc.Office Exp./Mileage Candidate Name	<input type="text" value="34.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="84.00"/>
TOTAL 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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Kim Edens <hr/> Mailing Address 7438 Bungalow Way <hr/> City Rancho Cucamonga State CA Zip Code 91739 <hr/> Purpose of Disbursement Petty Cash Candidate Name 001 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 17-4112 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">500.00</div>
B.	Full Name (Last, First, Middle Initial) Matt Edens <hr/> Mailing Address 7438 Bungalow Way <hr/> City Rancho Cucamonga State CA Zip Code 91739 <hr/> Purpose of Disbursement Yard Signs Candidate Name 006 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 17-4080 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">505.00</div>
C.	Full Name (Last, First, Middle Initial) Matt Edens <hr/> Mailing Address 7438 Bungalow Way <hr/> City Rancho Cucamonga State CA Zip Code 91739 <hr/> Purpose of Disbursement Yard Signs Candidate Name 006 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 17-4124 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; text-align: center; padding: 5px;">528.50</div>

SUBTOTAL of Disbursements This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px; font-weight: bold;">1533.50</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

**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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Enviro Clean	Transaction ID: 17-4067 Date of Disbursement 04 / 09 / 2010
	Mailing Address 5420 W. Mission Avenue	Amount of Each Disbursement this Period 93.00
	City Ontario State CA Zip Code 91762	
	Purpose of Disbursement Office Clean Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Enviro Clean	Transaction ID: 17-4098 Date of Disbursement 05 / 03 / 2010
	Mailing Address 5420 W. Mission Avenue	Amount of Each Disbursement this Period 62.00
	City Ontario State CA Zip Code 91762	
	Purpose of Disbursement Office Clean Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: 17-4078 Date of Disbursement 04 / 19 / 2010
	Mailing Address PO Box 1140	Amount of Each Disbursement this Period 14.67
	City Memphis State TN Zip Code 38101-1140	
	Purpose of Disbursement Shipping Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	169.67
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)

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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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) FedEx Mailing Address PO Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4131 Date of Disbursement 05 / 17 / 2010 Amount of Each Disbursement this Period 15.95 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Hang-M-Hi Mailing Address 10822 Woodward Ave. City Sunland State CA Zip Code 91040 Purpose of Disbursement Posters-Signs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4107 Date of Disbursement 05 / 07 / 2010 Amount of Each Disbursement this Period 5250.00 006 Category/ Type
C.	Full Name (Last, First, Middle Initial) Independent Voters League Mailing Address 2912 Old Bennett Ridge Rd City Santa Rosa State CA Zip Code 95404 Purpose of Disbursement State Mailers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4073 Date of Disbursement 04 / 12 / 2010 Amount of Each Disbursement this Period 560.00 004 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5825.95

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)
Gary Miller for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) KWVE Radio</p> <p>Mailing Address 3000 W. MacArthur Blvd., Suite 500</p> <p>City Santa Ana State CA Zip Code 92704</p> <p>Purpose of Disbursement Airtime Radio</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4093</p> <p>Date of Disbursement 04 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 3200.00</p> <p>004 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) KWVE Radio</p> <p>Mailing Address 3000 W. MacArthur Blvd., Suite 500</p> <p>City Santa Ana State CA Zip Code 92704</p> <p>Purpose of Disbursement Airtime Radio</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4128</p> <p>Date of Disbursement 05 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>004 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) MCI</p> <p>Mailing Address PO Box 371838</p> <p>City Pittsburg State PA Zip Code 15250-7838</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4079</p> <p>Date of Disbursement 04 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 26.51</p> <p>003 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4226.51

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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) MCI Mailing Address PO Box 371838 City Pittsburg State PA Zip Code 15250-7838 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4130 Date of Disbursement 05 / 17 / 2010 Amount of Each Disbursement this Period 26.26 003 Category/ Type	
B.	Full Name (Last, First, Middle Initial) NAGATA DESIGN Mailing Address 2400 W. Carson Street, Suite 110 City Torrance State CA Zip Code 90501 Purpose of Disbursement Graphic Design Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4155 Date of Disbursement 05 / 19 / 2010 Amount of Each Disbursement this Period 4571.09 004 Category/ Type	
C.	Full Name (Last, First, Middle Initial) ONPVGC Mailing Address 5701 Lonetree Blvd., #301 City Rocklin State CA Zip Code 95765 Purpose of Disbursement Slate Mailer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4075 Date of Disbursement 04 / 12 / 2010 Amount of Each Disbursement this Period 1000.00 004 Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶	5597.35
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)
Gary Miller for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Political Data Inc.</p> <p>Mailing Address P.O. Box 1706</p> <p>City Burbank State CA Zip Code 91507</p> <p>Purpose of Disbursement Data File</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 17-4151</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1129.13"/></p> <p>Category/Type: <input type="text" value="004"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Robert Rodriquez</p> <p>Mailing Address 1814 Bell Street</p> <p>City La Verne State CA Zip Code 91750</p> <p>Purpose of Disbursement Production Costs Video</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 17-4152</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1600.00"/></p> <p>Category/Type: <input type="text" value="004"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Shea Properties</p> <p>Mailing Address 26840 Aliso Viejo Parkway</p> <p>City Aliso Viejo State CA Zip Code 92656-2624</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: 17-4099</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1241.00"/></p> <p>Category/Type: <input type="text" value="001"/></p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)
Gary Miller for Congress

<p>A. Full Name (Last, First, Middle Initial) Statecraft, Inc.</p> <p>Mailing Address 8618 Nottingham Place</p> <p>City La Jolla State CA Zip Code 92037-2126</p> <p>Purpose of Disbursement Software Renewal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4111</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <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="2750.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) Team California</p> <p>Mailing Address 400 Capitol Mall Ste 1560</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement State Mailers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4072</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <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="2000.00"/></p> <p>Category/Type: <input type="text" value="004"/></p>
<p>C. Full Name (Last, First, Middle Initial) Time Warner Media Sales</p> <p>Mailing Address 6021 Katella Ave., Suite 100</p> <p>City Cypress State CA Zip Code 90630</p> <p>Purpose of Disbursement Airtime</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4103</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <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="10557.80"/></p> <p>Category/Type: <input type="text" value="004"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) US BANK <hr/> Mailing Address 1175 S Grand Ave <hr/> City Diamond Bar State CA Zip Code 91765 <hr/> Purpose of Disbursement AMEX CC Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4114 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 0	Amount of Each Disbursement this Period 4.95
B.	Full Name (Last, First, Middle Initial) US BANK <hr/> Mailing Address 1175 S Grand Ave <hr/> City Diamond Bar State CA Zip Code 91765 <hr/> Purpose of Disbursement CC Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4060 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 0	Amount of Each Disbursement this Period 65.00
C.	Full Name (Last, First, Middle Initial) US BANK <hr/> Mailing Address 1175 S Grand Ave <hr/> City Diamond Bar State CA Zip Code 91765 <hr/> Purpose of Disbursement CC Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4066 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 0	Amount of Each Disbursement this Period 258.71

SUBTOTAL of Disbursements This Page (optional) ▶

328.66

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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) US BANK <hr/> Mailing Address 1175 S Grand Ave <hr/> City Diamond Bar State CA Zip Code 91765 <hr/> Purpose of Disbursement CC Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4116 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 0.40 <hr/> Category/Type 001
B.	Full Name (Last, First, Middle Initial) US BANK <hr/> Mailing Address 1175 S Grand Ave <hr/> City Diamond Bar State CA Zip Code 91765 <hr/> Purpose of Disbursement Bank Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4117 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 0.47 <hr/> Category/Type 001
C.	Full Name (Last, First, Middle Initial) US BANK <hr/> Mailing Address 1175 S Grand Ave <hr/> City Diamond Bar State CA Zip Code 91765 <hr/> Purpose of Disbursement CC Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4115 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 150.60 <hr/> Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶

151.47

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)
Gary Miller for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) US BANK</p> <p>Mailing Address 1175 S Grand Ave</p> <p>City Diamond Bar State CA Zip Code 91765</p> <p>Purpose of Disbursement AMEX CC FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4105</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <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="81.25"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) US BANK</p> <p>Mailing Address 1175 S Grand Ave</p> <p>City Diamond Bar State CA Zip Code 91765</p> <p>Purpose of Disbursement CC Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4113</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <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="145.21"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) US BANK</p> <p>Mailing Address 1175 S Grand Ave</p> <p>City Diamond Bar State CA Zip Code 91765</p> <p>Purpose of Disbursement CC Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4121</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <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="5.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Whittier Republican Women Federated <hr/> Mailing Address POBox 16 <hr/> City Whittier State CA Zip Code 90605-1448 <hr/> Purpose of Disbursement Meeting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4061 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 0	Amount of Each Disbursement this Period 20.00
B.	Full Name (Last, First, Middle Initial) Whittier Republican Women Federated <hr/> Mailing Address POBox 16 <hr/> City Whittier State CA Zip Code 90605-1448 <hr/> Purpose of Disbursement Meeting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4097 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 1 0	Amount of Each Disbursement this Period 20.00
C.	Full Name (Last, First, Middle Initial) World Marketing Inc. <hr/> Mailing Address 14407 Alondra Boulevard <hr/> City La Mirada State CA Zip Code 90638 <hr/> Purpose of Disbursement Mass Mailings Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 17-4104 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 1 0	Amount of Each Disbursement this Period 7200.00

SUBTOTAL of Disbursements This Page (optional)	7240.00
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)
Gary Miller for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) World Marketing Inc.</p> <p>Mailing Address 14407 Alondra Boulevard</p> <p>City La Mirada State CA Zip Code 90638</p> <p>Purpose of Disbursement Mass Mailings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4106</p> <p>Date of Disbursement 05 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 7200.00</p> <p>004 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) World Marketing Inc.</p> <p>Mailing Address 14407 Alondra Boulevard</p> <p>City La Mirada State CA Zip Code 90638</p> <p>Purpose of Disbursement Mass Mailings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4119</p> <p>Date of Disbursement 05 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 7230.94</p> <p>004 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) World Marketing Inc.</p> <p>Mailing Address 14407 Alondra Boulevard</p> <p>City La Mirada State CA Zip Code 90638</p> <p>Purpose of Disbursement Postage Mass Mailings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 17-4129</p> <p>Date of Disbursement 05 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 22100.00</p> <p>004 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

36530.94

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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Chase Card Services	Transaction ID: 17-3207-W
	Mailing Address PO Box 94014	Date of Disbursement MM / DD / YYYY 04 / 21 / 2010
	City Palatine State IL Zip Code 60094-4014	Amount of Each Disbursement this Period 79.88
	Purpose of Disbursement Credit Card Payment	Expenditure purpose details appear in Credit Card Payees reaching disclosure threshold.
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Chase Card Services	Transaction ID: 17-3257-W
	Mailing Address PO Box 94014	Date of Disbursement MM / DD / YYYY 05 / 18 / 2010
	City Palatine State IL Zip Code 60094-4014	Amount of Each Disbursement this Period 10154.98
	Purpose of Disbursement Credit Card Payment	Expenditure purpose details appear in Credit Card Payees reaching disclosure threshold.
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) KFSH-SALEM COMMUNICATIONS	Transaction ID: 17-4145-P
	Mailing Address 701 N. Brand Avenue, Suite 550	Date of Disbursement MM / DD / YYYY 04 / 27 / 2010
	City Glendale State CA Zip Code 91203	Amount of Each Disbursement this Period 3750.00
	Purpose of Disbursement Airtime Radio	[MEMO ITEM] credit card payee
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	10234.86
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)
Gary Miller for Congress

A. KKLA SALEM COMMUNICATIONS LOS ANGELES

Full Name (Last, First, Middle Initial)

Mailing Address 701 N. Brand Avenue, Suite 550

City Glendale State CA Zip Code 91203

Purpose of Disbursement
Airtime Radio

Candidate Name

004
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 17-4146-P

Date of Disbursement

04 / 27 / 2010

Amount of Each Disbursement this Period

5400.00

[MEMO ITEM]
credit card payee

B. Ruth's Chris Steakhouse

Full Name (Last, First, Middle Initial)

Mailing Address 1801 Connecticut Ave NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Food/Beverage

Candidate Name

007
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 17-4147-P

Date of Disbursement

04 / 29 / 2010

Amount of Each Disbursement this Period

494.60

[MEMO ITEM]
credit card payee

C. Activate Direct

Full Name (Last, First, Middle Initial)

Mailing Address 1415 L. Street, Suite 430

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Mass Emails

Candidate Name

004
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 17-4164-P

Date of Disbursement

05 / 17 / 2010

Amount of Each Disbursement this Period

1250.00

[MEMO ITEM]
credit card payee

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Activate Direct	Transaction ID: 17-4163-P Date of Disbursement																			
	Mailing Address 1415 L. Street, Suite 430	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	1		2	0	1	0												
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Mass Emails Candidate Name	<table border="1"><tr><td>750.00</td></tr></table>	750.00																		
750.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<table border="1"><tr><td>004</td></tr></table> Category/Type	004																		
004																					
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] credit card payee																			

B.	Full Name (Last, First, Middle Initial) Activate Direct	Transaction ID: 17-4165-P Date of Disbursement																			
	Mailing Address 1415 L. Street, Suite 430	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	1	0												
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Mass Emails Candidate Name	<table border="1"><tr><td>3500.00</td></tr></table>	3500.00																		
3500.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<table border="1"><tr><td>004</td></tr></table> Category/Type	004																		
004																					
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] credit card payee																			

C.	Full Name (Last, First, Middle Initial) Chase Card Services	Transaction ID: 17-3266-W Date of Disbursement																			
	Mailing Address PO Box 94014	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	1	0												
	City Palatine State IL Zip Code 60094-4014	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Payment Candidate Name	<table border="1"><tr><td>5500.00</td></tr></table>	5500.00																		
5500.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<table border="1"><tr><td></td></tr></table> Category/Type																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Expenditure purpose details appear in Credit Card Payees reaching disclosure threshold.																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>5500.00</td></tr></table>	5500.00
5500.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)
Gary Miller for Congress

A.	Full Name (Last, First, Middle Initial) Chase Card Services (cm)	Transaction ID: 17-3208-W
	Mailing Address PO Box 94014	Date of Disbursement MM / DD / YYYY 04 / 21 / 2010
	City Palatine State IL Zip Code 60094-4014	Amount of Each Disbursement this Period 15.01
	Purpose of Disbursement Credit Card Payment	Expenditure purpose details appear in Credit Card Payees reaching disclosure threshold.
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Chase Card Services (cm)	Transaction ID: 17-3254-W
	Mailing Address PO Box 94014	Date of Disbursement MM / DD / YYYY 05 / 17 / 2010
	City Palatine State IL Zip Code 60094-4014	Amount of Each Disbursement this Period 8471.92
	Purpose of Disbursement Credit Card Payment	Expenditure purpose details appear in Credit Card Payees reaching disclosure threshold.
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Cox Media Inc.	Transaction ID: 17-4139-P
	Mailing Address 29947 Avenida De Banderas	Date of Disbursement MM / DD / YYYY 05 / 04 / 2010
	City Rancho Santa Marga State CA Zip Code 92688	Amount of Each Disbursement this Period 6512.70
	Purpose of Disbursement Airtime Television	[MEMO ITEM] credit card payee
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	8486.93
TOTAL This Period (last page this line number only)	128121.48

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 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 checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Gary Miller for Congress

A. Full Name (Last, First, Middle Initial)
Chino Valley Released Time Christian Education

Mailing Address 16095 Pinnacle Road

City State Zip Code
Chino Hills CA 91709

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 21-4126
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	3	/	2	0	1	0

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Meals on Wheels

Mailing Address PO Box 3293

City State Zip Code
City of Industry CA 91744

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 21-4127
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	3	/	2	0	1	0

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

2000.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 40 / 40
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Gary Miller for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor World Marketing Inc.	Nature of Debt (Purpose): Printing/Data Processing/-Mail
Mailing Address 14407 Alondra Boulevard	
City State ZIP Code La Mirada CA 90638	

Outstanding Balance Beginning This Period	Transaction ID: D10-2717-V	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
21737.97	0.00	21737.97

1) SUBTOTALS This Period This Page (optional).....	21737.97
2) TOTALS This Period (last page this line number only).....	21737.97
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	21737.97