

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

MARY MILLER FOR CONGRESS

ADDRESS (number and street)

23326 E COUNTY ROAD 1960 N

Check if different than previously reported. (ACC)

OAKLAND

IL

61943

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00723916

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

IL

15

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

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
02 / 27 / 2020

through

M M / D D / Y Y Y Y
03 / 31 / 2020

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 MILLER, MARY, , ,

Signature of Treasurer MILLER, MARY, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y
11 / 19 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
MARY MILLER FOR CONGRESS

Report Covering the Period: From: / / To: / /

	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))....	70325.40	345233.81
(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)).....	70325.40	345233.81
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	150168.47	318509.59
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	150168.47	318509.59
8. Cash on Hand at Close of Reporting Period (from Line 27).....	29524.22	
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).....	2800.00	

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 05/2016)

Write or Type Committee Name

MARY MILLER FOR CONGRESS

Report Covering the Period: From: / / To: / /

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		
(i) Itemized (use Schedule A).....	25890.00	242682.00
(ii) Unitemized	8910.40	53026.81
(iii) TOTAL of contributions from individuals	34800.40	295708.81
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	35525.00	49525.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	70325.40	345233.81
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	2800.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	2800.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	70325.40	348033.81

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 45

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	150168.47	318509.59
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	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	150168.47	318509.59

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	109367.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	70325.40
25. SUBTOTAL (add Line 23 and Line 24).....	179692.69
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	150168.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	29524.22

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

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

FOR LINE NUMBER: PAGE 5 OF 45
(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)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Berger, Dale, , ,
Mailing Address 540 N Hickory Ln

City Wauconda	State IL	Zip Code 60084
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FEC ID number of contributing federal political committee. **C**

Name of Employer Berger Excavating	Occupation CEO
---------------------------------------	-------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 19 / 2020

Transaction ID : SA11AI.8219

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Bolin, Jim, , ,
Mailing Address 2334 E Washington Street

City Casey	State IL	Zip Code 52420
---------------	-------------	-------------------

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

Name of Employer Self	Occupation Bolin Enterprises
--------------------------	---------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2020

Transaction ID : SA11AI.7754

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Childs, John, , ,
Mailing Address 116 Huntington Ave

City Boston	State MA	Zip Code 02116
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FEC ID number of contributing federal political committee. **C**

Name of Employer JW Childs Associates	Occupation Chair
--	---------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 11 / 2020

Transaction ID : SA11AI.7758

Amount of Each Receipt this Period
2800.00

Memo Item
Received through conduit, limit not affected

SUBTOTAL of Receipts This Page (optional)..... ▶

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

6300.00

**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 6 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address 300 INDEPENDENCE AVE. SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
100312.35

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 03 / 2020

Transaction ID : SA11AI.7758.0

Amount of Each Receipt this Period
2800.00

Memo Item
Contribution above received through conduit, limit not affected

B. Full Name (Last, First, Middle Initial)
Daniel, Thomas, , ,

Mailing Address 4155 Lawrenceville Hwy NW # 8148

City Lilburn	State GA	Zip Code 30047-1500
-----------------	-------------	------------------------

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

Name of Employer	Occupation Retired
------------------	-----------------------

Retired

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.8375

Amount of Each Receipt this Period
250.00

Memo Item
Received through conduit, limit not affected

C. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address 300 INDEPENDENCE AVE. SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
108402.35

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 14 / 2020

Transaction ID : SA11AI.8375.0

Amount of Each Receipt this Period
250.00

Memo Item
Contribution above received through conduit, limit not affected

SUBTOTAL of Receipts This Page (optional)..... ▶	250.00
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 OF 45
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Grunloh, Tom, , ,

Mailing Address P. O. Box 6014

City: Effingham State: IL Zip Code: 62401

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

Name of Employer: Grunloh Construction Inc. Occupation: General Contractor

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 03 / 18 / 2020

Transaction ID : SA11AI.7804

Amount of Each Receipt this Period: 1000.00

Memo Item
Received through conduit, limit not affected

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City: ARLINGTON State: VA Zip Code: 22219

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
14829.06

Date of Receipt: 03 / 18 / 2020

Transaction ID : SA11AI.7804.0

Amount of Each Receipt this Period: 1000.00

Memo Item
Contribution above received through conduit, limit not affected

C. Full Name (Last, First, Middle Initial)
Hillerson, Arlene, , ,

Mailing Address 11720 Centurion Way

City: Potomac State: MD Zip Code: 20854

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

Name of Employer: Self Occupation: Real Estate

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt: 03 / 05 / 2020

Transaction ID : SA11AI.7745

Amount of Each Receipt this Period: 2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

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

3000.00

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

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

FOR LINE NUMBER: PAGE 8 OF 45
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address 300 INDEPENDENCE AVE. SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 116721.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2020

Transaction ID : SA11AI.8283

Amount of Each Receipt this Period
 7319.00

Memo Item
 Unitemized contributions received through conduit, limit not affected

B. Full Name (Last, First, Middle Initial)
Hudson, Arthur, , ,

Mailing Address 9155 Sloane St

City Orlando State FL Zip Code 32827

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

Name of Employer Occupation
Self Animal Husbandry

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2020

Transaction ID : SA11AI.8064

Amount of Each Receipt this Period
 500.00

Memo Item
 Received through conduit, limit not affected

C. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address 300 INDEPENDENCE AVE. SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 97512.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 03 / 2020

Transaction ID : SA11AI.8064.0

Amount of Each Receipt this Period
 500.00

Memo Item
 Contribution above received through conduit, limit not affected

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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 9 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kolber, Vincent, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 24 / 2020	
Mailing Address 70 West Madison Street			Transaction ID : SA11AI.7826	
City Chicago	State IL	Zip Code 60602	Amount of Each Receipt this Period _____ 2800.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Residco		Occupation CEO		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 2800.00		

Full Name (Last, First, Middle Initial) B. Martin, Robert, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 28 / 2020	
Mailing Address 60 State Route 4			Transaction ID : SA11AI.7857	
City Saint Jacob	State IL	Zip Code 62281	Amount of Each Receipt this Period _____ 10.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Retired		Occupation Retired		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 360.00		

Full Name (Last, First, Middle Initial) C. Moskowitz, Cherna, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 05 / 2020	
Mailing Address 4744 N Bay Rd.			Transaction ID : SA11AI.7747	
City Miami Beach	State FL	Zip Code 33140	Amount of Each Receipt this Period _____ 2800.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item Received through conduit, limit not affected	
Name of Employer Moskowitz Foundation		Occupation Foundation Head		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 2800.00		

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 5610.00
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 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address 300 INDEPENDENCE AVE. SE

City WASHINGTON	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
106152.35

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.7747.0

Amount of Each Receipt this Period
2800.00

Memo Item
Contribution above received through conduit, limit not affected

B. Full Name (Last, First, Middle Initial)
Moskowitz, Cherna, , ,

Mailing Address 4744 N Bay Rd.

City Miami Beach	State FL	Zip Code 33140
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FEC ID number of contributing federal political committee. **C**

Name of Employer Moskowitz Foundation	Occupation Foundation Head
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Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.7749.0

Amount of Each Receipt this Period
2800.00

Memo Item
Received through conduit, limit not affected

C. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address 300 INDEPENDENCE AVE. SE

City WASHINGTON	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
103352.35

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.7749.0

Amount of Each Receipt this Period
2800.00

Memo Item
Contribution above received through conduit, limit not affected

SUBTOTAL of Receipts This Page (optional)..... ▶	2800.00
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 11 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Norwesh, Charles, , ,

Mailing Address 680 Portwine Rd

City Deerfield	State IL	Zip Code 60015
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FEC ID number of contributing federal political committee. **C**

Name of Employer Norcon	Occupation CEO
----------------------------	-------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 12 / 2020

Transaction ID : SA11AI.7824

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Plotkin, Shimshon, , ,

Mailing Address 8200 River Quarry Pl

City Bethesda	State MD	Zip Code 20817
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FEC ID number of contributing federal political committee. **C**

Name of Employer Plotkin Financial Advisors	Occupation Founder
--	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.8177

Amount of Each Receipt this Period
240.00

Memo Item
Received through conduit, limit not affected

C. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address 300 INDEPENDENCE AVE. SE

City WASHINGTON	State DC	Zip Code 20003
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FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
100552.35

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2020

Transaction ID : SA11AI.8177.0

Amount of Each Receipt this Period
240.00

Memo Item
Contribution above received through conduit, limit not affected

SUBTOTAL of Receipts This Page (optional)..... ▶	740.00
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 12 OF 45
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rabine, Gary, , ,

Mailing Address 900 National Parkway

City Schaumburg	State IL	Zip Code 60173
--------------------	-------------	-------------------

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

Name of Employer Rabine Group	Occupation Owner
----------------------------------	---------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 01 / 2020

Transaction ID : SA11AI.7633

Amount of Each Receipt this Period
1000.00

Memo Item
Received through conduit, limit not affected

B. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
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FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
13829.06

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 01 / 2020

Transaction ID : SA11AI.7633.0

Amount of Each Receipt this Period
1000.00

Memo Item
Contribution above received through conduit, limit not affected

C. Full Name (Last, First, Middle Initial)
Riemer, James, , ,

Mailing Address 4533 Greenbriar

City Springfield	State IL	Zip Code 62711
---------------------	-------------	-------------------

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

Name of Employer Government Consulting Solution	Occupation Lobbyist
--	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11AI.7820

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

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

1500.00

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

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

FOR LINE NUMBER: PAGE 13 OF 45
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ruth, Charles, , ,

Mailing Address 1166 Lake Ave

City Woodstock State IL Zip Code 60098

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

Name of Employer Alliance Contractors Occupation CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2020

Transaction ID : SA11AI.8215

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 5500 Holly St

City Houston State TX Zip Code 77081-7410

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

Name of Employer HCSS Occupation CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2020

Transaction ID : SA11AI.8346

Amount of Each Receipt this Period
 2000.00

Memo Item
 Received through conduit, limit not affected

C. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address 300 INDEPENDENCE AVE. SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
108152.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 10 / 2020

Transaction ID : SA11AI.8346.0

Amount of Each Receipt this Period
 2000.00

Memo Item
 Contribution above received through conduit, limit not affected

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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 14 OF 45
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Scott, John, , ,
 Mailing Address PO Box 66
 City Lake Delton State WI Zip Code 53940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Scott Construction Inc Occupation Executive
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2020
Transaction ID : SA11AI.7936
 Amount of Each Receipt this Period
 90.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Shannon, Kevin, , ,
 Mailing Address PO Box J
 City Dubois State PA Zip Code 15801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Open Flow Gas Supply Occupation President
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 295.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 05 / 2020
Transaction ID : SA11AI.8111
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Stahmann, Kathryn, , ,
 Mailing Address 42 N Tanglewood Spur
 City Sedona State AZ Zip Code 86351
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 28 / 2020
Transaction ID : SA11AI.8057
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Received through conduit, limit not affected

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

690.00

**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 15 OF 45	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND

Mailing Address 300 INDEPENDENCE AVE. SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00552851

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5575.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 25 / 2020

Transaction ID : SA11AI.8057.0

Amount of Each Receipt this Period
500.00

Memo Item
Contribution above received through conduit, limit not affected

B. Full Name (Last, First, Middle Initial)
Tarble, Sara, , ,

Mailing Address 409 N 7th Street

City Marshall	State IL	Zip Code 62441
------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Info Requested

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 01 / 2020

Transaction ID : SA11AI.7818

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WINRED

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
15850.46

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : SA11AI.8276

Amount of Each Receipt this Period
1021.40

Memo Item
Unitemized contributions received through conduit, limit not affected

SUBTOTAL of Receipts This Page (optional)..... ▶	500.00
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 16 OF 45
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Wright, Karen, , ,
 Mailing Address 1240 Gambrier Rd
 City Mount Vernon State OH Zip Code 43050
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Ariel Corp Occupation President And Ceo
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2020
Transaction ID : SA11AI.7779
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 Received through conduit, limit not affected

B. Full Name (Last, First, Middle Initial)
HOUSE FREEDOM FUND
 Mailing Address 300 INDEPENDENCE AVE. SE
 City WASHINGTON State DC Zip Code 20003
 FEC ID number of contributing federal political committee. **C** C00552851
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 109402.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2020
Transaction ID : SA11AI.7779.0
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 Contribution above received through conduit, limit not affected

C. Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	25890.00

**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 17 OF 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Citizens for Durkin

Mailing Address 16W281 83rd St

City Burr Ridge	State IL	Zip Code 60527
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	10	/	2020

Transaction ID : SA11C.7970

Amount of Each Receipt this Period

975.00

Memo Item
State entity contribution

B. Full Name (Last, First, Middle Initial)
JUMP INTO ACTION FOR CONSERVATIVES TO KEEP OUR IDEAS ELEVATED PAC

Mailing Address PO BOX 26141

City ALEXANDRIA	State VA	Zip Code 22313
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00582726

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	16	/	2020

Transaction ID : SA11C.8272

Amount of Each Receipt this Period

2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LIBERTY FUND; THE

Mailing Address PO BOX 1992

City VANCOUVER	State WA	Zip Code 98668
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00521310

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	02	/	2020

Transaction ID : SA11C.7639

Amount of Each Receipt this Period

1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	4475.00
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 18 OF 45	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC--MC PAC

Mailing Address PO BOX 10134

City BAKERSFIELD	State CA	Zip Code 93389
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11C.7738

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC--MC PAC

Mailing Address PO BOX 10134

City BAKERSFIELD	State CA	Zip Code 93389
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11C.7740

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RESTORING OUR DEMOCRACY (ROD PAC)

Mailing Address 499 S CAPITOL ST SW
STE 407

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00573493

Name of Employer	Occupation
------------------	------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 23 / 2020

Transaction ID : SA11C.8274

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
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 19 OF 45
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUSAN B ANTHONY LIST INC. CANDIDATE FUND

Mailing Address 2800 SHIRLINGTON RD
STE 1200

City ARLINGTON State VA Zip Code 22206

FEC ID number of contributing federal political committee. **C** C00332296

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2020

Transaction ID : SA11C.7766

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2020

Transaction ID : SA11C.7762

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00467431

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2020

Transaction ID : SA11C.7775

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00

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 20 OF 45		
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VALUE IN ELECTING WOMEN POLITICAL ACTION COMMITTEE

Mailing Address 1201 PENNSYLVANIA AVENUE
SUITE 800

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00327189

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 02 / 2020

Transaction ID : SA11C.7637

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	35475.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ad Works Publishing		Date of Disbursement
Mailing Address 17866 N US Highway 45 Ste 1		M M / D D / Y Y Y Y 03 / 05 / 2020
City Effingham	State IL	Zip Code 62401
Purpose of Disbursement Ad Expense	Category/Type 004	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	2837.17
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8527
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Awesomercampaigns.com		Date of Disbursement
Mailing Address 1220 St Charles Street		M M / D D / Y Y Y Y 03 / 03 / 2020
City Elgin	State IL	Zip Code 60120
Purpose of Disbursement Signs Expense	Category/Type 006	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	2665.00
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8414
		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Axiom Strategies		Date of Disbursement
Mailing Address 800 W. 47th Street		M M / D D / Y Y Y Y 03 / 17 / 2020
City Kansas City	State MO	Zip Code 64112
Purpose of Disbursement General Campaign Consulting	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	7144.62
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8537
		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	12646.79
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ax Media		Date of Disbursement MM / DD / YYYY 02 / 28 / 2020
Mailing Address 800 W 47th Street		FEC Identification Number C
City Kansas City	State MO	Zip Code 64112
Purpose of Disbursement Media Buy	Category/Type 004	
Candidate Name	Amount of Each Disbursement this Period 2376.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8571
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Bawcum, Justin, , ,		Date of Disbursement MM / DD / YYYY 03 / 09 / 2020
Mailing Address 805 19th Street		FEC Identification Number C
City Charleston	State IL	Zip Code 61920
Purpose of Disbursement Security	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 400.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8514
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Better Newspapers Inc		Date of Disbursement MM / DD / YYYY 03 / 10 / 2020
Mailing Address 314 E Church Street		FEC Identification Number C
City Mascoutah	State IL	Zip Code 62258
Purpose of Disbursement Ad Expense	Category/Type 004	
Candidate Name	Amount of Each Disbursement this Period 287.83	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8416
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	3063.83
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 23 OF 45			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Breese Printing			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2020		
Mailing Address 8060 Old US Hwy 50			FEC Identification Number C		
City Breese	State IL	Zip Code 62230	Amount of Each Disbursement this Period 203.77		
Purpose of Disbursement Print Expense		Category/ Type 006	Transaction ID : SB17.8418		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Cannon Research Group			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2020		
Mailing Address 309 Third Street			FEC Identification Number C		
City Annapolis	State MD	Zip Code 21403	Amount of Each Disbursement this Period 5047.07		
Purpose of Disbursement Research Services		Category/ Type 001	Transaction ID : SB17.8533		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Casey's General Store			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020		
Mailing Address 305 Professional Park Ave			FEC Identification Number C		
City Effingham	State IL	Zip Code 62401	Amount of Each Disbursement this Period 156.11		
Purpose of Disbursement Office Supplies		Category/ Type 001	Transaction ID : SB17.8420		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5406.95
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)		PAGE 24 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Champaign County Republican Party			Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2020	
Mailing Address 2104 Windsor Place			FEC Identification Number C	
City Champaign	State IL	Zip Code 61820	Amount of Each Disbursement this Period 360.00	
Purpose of Disbursement Event Expense		Category/ Type 007	Transaction ID : SB17.8513	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Drury Inn Marion			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2020	
Mailing Address 2706 W Deyoung Street			FEC Identification Number C	
City Marion	State IL	Zip Code 62959	Amount of Each Disbursement this Period 237.08	
Purpose of Disbursement Travel Room Expense		Category/ Type 002	Transaction ID : SB17.8422	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Durbin Consulting			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2020	
Mailing Address 100 E Pine Drive			FEC Identification Number C	
City Effingham	State IL	Zip Code 61920	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Campaign Management Consulting		Category/ Type 001	Transaction ID : SB17.8524	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2597.08
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 25 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Effingham Performance Center			Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2020	
Mailing Address 1325 Outer Belt W			FEC Identification Number C	
City Effingham	State IL	Zip Code 62401	Amount of Each Disbursement this Period 1655.00	
Purpose of Disbursement Event Room Rental		Category/ Type 007	Transaction ID : SB17.8413	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Facebook			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020	
Mailing Address 1 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025	Amount of Each Disbursement this Period 246.17	
Purpose of Disbursement Ad Expense		Category/ Type 004	Transaction ID : SB17.8443	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Fellowship of Christian Athletes			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2020	
Mailing Address 5258 S 6th Street			FEC Identification Number C	
City Springfield	State IL	Zip Code 62703	Amount of Each Disbursement this Period 200.00	
Purpose of Disbursement Event Sponsor		Category/ Type 007	Transaction ID : SB17.8500	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2101.17
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 26 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Firefly Grill		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2020
Mailing Address 1810 Ave of Mid America		FEC Identification Number C
City Effingham	State IL	Zip Code 62401
Purpose of Disbursement Event Food & Beverage	Category/ Type 003	
Candidate Name	Amount of Each Disbursement this Period 753.03	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8423 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Fit to a Tee		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2020
Mailing Address 413 N 15th Street		FEC Identification Number C
City Mattoon	State IL	Zip Code 61938
Purpose of Disbursement Shirts Expense	Category/ Type 006	
Candidate Name	Amount of Each Disbursement this Period 560.44	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8425 <input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Forcht Broadcasting		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2020
Mailing Address 200 South Kentucky Ave		FEC Identification Number C
City Corbin	State KY	Zip Code 40701
Purpose of Disbursement Media Buy	Category/ Type 004	
Candidate Name	Amount of Each Disbursement this Period 1536.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8426 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2849.47
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)	PAGE 27 OF 45			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Greenup Press			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2020		
Mailing Address 104 E Cumberland Street			FEC Identification Number C		
City Greenup	State IL	Zip Code 62428	Amount of Each Disbursement this Period 247.50		
Purpose of Disbursement Ad Expense		Category/ Type 004	Transaction ID : SB17.8503		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Hardin County Independent			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2020		
Mailing Address PO Box 338			FEC Identification Number C		
City Elizabethtown	State IL	Zip Code 62931	Amount of Each Disbursement this Period 303.50		
Purpose of Disbursement Ad Expense		Category/ Type 004	Transaction ID : SB17.8566		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. HenryAlan, LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020		
Mailing Address 75 S High Street Ste 4			FEC Identification Number C		
City Dublin	State OH	Zip Code 43017	Amount of Each Disbursement this Period 4000.00		
Purpose of Disbursement Accounting & Compliance		Category/ Type 001	Transaction ID : SB17.8561		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	4551.00
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)		PAGE 28 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Herald Enterprise			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2020	
Mailing Address 211 E Main St			FEC Identification Number C	
City Golconda	State IL	Zip Code 62938	Amount of Each Disbursement this Period 270.00	
Purpose of Disbursement Ad Expense		Category/ Type 004	Transaction ID : SB17.8450	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. High Cotton Consulting			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2020	
Mailing Address 800 W 47th Street			FEC Identification Number C	
City Kansas City	State MO	Zip Code 64112	Amount of Each Disbursement this Period 1023.40	
Purpose of Disbursement Fundraising Services		Category/ Type 003	Transaction ID : SB17.8522	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Hodas and Associates			Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2020	
Mailing Address 960 Clocktower Drive			FEC Identification Number C	
City Springfield	State IL	Zip Code 62704	Amount of Each Disbursement this Period 12388.27	
Purpose of Disbursement Media Buy		Category/ Type 004	Transaction ID : SB17.8570	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	13681.67
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)	PAGE 29 OF 45			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hyatt Place			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2020		
Mailing Address 217 N Neil Street			FEC Identification Number C		
City Champaign	State IL	Zip Code 61820	Amount of Each Disbursement this Period 585.18		
Purpose of Disbursement Travel Room Expense		Category/ Type 002	Transaction ID : SB17.8428		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. MILLER, MARY, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020		
Mailing Address 23326 E COUNTY ROAD 1960 N			FEC Identification Number C H0IL15129		
City OAKLAND	State IL	Zip Code 61943	Amount of Each Disbursement this Period 13825.64		
Purpose of Disbursement Expense Reimbursement		Category/ Type 001	Transaction ID : SB17.8543		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: IL District: 15					

Full Name (Last, First, Middle Initial) C. American Airlines			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020		
Mailing Address PO Box 619616			FEC Identification Number C		
City DFW Airport	State TX	Zip Code 75261	Amount of Each Disbursement this Period 1513.18		
Purpose of Disbursement Travel Flight Expense		Category/ Type 002	Transaction ID : SB17.8543.0		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	14410.82
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 30 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hyatt Regency DC			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020	
Mailing Address 400 New Jersey Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20001	Amount of Each Disbursement this Period 762.00	
Purpose of Disbursement Travel Room Expense		Category/ Type 002	Transaction ID : SB17.8543.1	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Southwest Airlines			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020	
Mailing Address 2702 Love Field Drive			FEC Identification Number C	
City Dallas	State TX	Zip Code 75235	Amount of Each Disbursement this Period 326.96	
Purpose of Disbursement Travel Flight Expense		Category/ Type 002	Transaction ID : SB17.8543.2	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Palmer House Hilton			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020	
Mailing Address 17 E Monroe Street			FEC Identification Number C	
City Chicago	State IL	Zip Code 60603	Amount of Each Disbursement this Period 416.67	
Purpose of Disbursement Travel Room Expense		Category/ Type 002	Transaction ID : SB17.8543.3	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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)		PAGE 31 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Paxton Media Group			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020	
Mailing Address 100 Television Ln			FEC Identification Number C	
City Paducah	State KY	Zip Code 42003	Amount of Each Disbursement this Period 395.00	
Purpose of Disbursement Media Buy		Category/ Type 004	Transaction ID : SB17.8543.4	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Navigator Journal			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020	
Mailing Address PO Box 10			FEC Identification Number C	
City Albion	State IL	Zip Code 62806	Amount of Each Disbursement this Period 904.50	
Purpose of Disbursement Ad Expense		Category/ Type 004	Transaction ID : SB17.8543.5	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Olney Daily Mail			Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020	
Mailing Address 206 S Whittle Ave			FEC Identification Number C	
City Olney	State IL	Zip Code 62450	Amount of Each Disbursement this Period 1980.00	
Purpose of Disbursement Ad Expense		Category/ Type 004	Transaction ID : SB17.8543.6	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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)		PAGE 32 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Vienna Times		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020
Mailing Address 305 Main Street		FEC Identification Number C
City Vienna	State IL	Zip Code 62995
Purpose of Disbursement Ad Expense	004	
Candidate Name		Amount of Each Disbursement this Period 444.13
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8543.7 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Robinson Daily News		Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2020
Mailing Address 302 S Cross Street		FEC Identification Number C
City Robinson	State IL	Zip Code 62454
Purpose of Disbursement Ad Expense	004	
Candidate Name		Amount of Each Disbursement this Period 877.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8543.8 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Navigator Journal		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2020
Mailing Address PO Box 10		FEC Identification Number C
City Albion	State IL	Zip Code 62806
Purpose of Disbursement Ad Expense	004	
Candidate Name		Amount of Each Disbursement this Period 472.25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8435 <input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	472.25
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 33 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Neoga News		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2020
Mailing Address PO Box 387		FEC Identification Number C
City Neoga	State IL	Zip Code 62447
Purpose of Disbursement Ad Expense	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 302.40
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8511
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Neuhoff Media		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2020
Mailing Address 3055 S 4th Street		FEC Identification Number C
City Springfield	State IL	Zip Code 62711
Purpose of Disbursement Media Buy	Category/ Type 004	
Candidate Name		Amount of Each Disbursement this Period 1598.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8437
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. NWTF		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2020
Mailing Address Post Office Box 530		FEC Identification Number C
City Edgefield	State SC	Zip Code 29824
Purpose of Disbursement Event Sponsor	Category/ Type 007	
Candidate Name		Amount of Each Disbursement this Period 270.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8565
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2170.40
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 34 OF 45			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Paap Printing			Date of Disbursement MM / DD / YYYY 03 / 16 / 2020		
Mailing Address 507 Jackson Ave			FEC Identification Number C		
City Charleston	State IL	Zip Code 61920	Amount of Each Disbursement this Period 645.00		
Purpose of Disbursement Print Expense		Category/ Type 006	Transaction ID : SB17.8518		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Pagliai's Pizza			Date of Disbursement MM / DD / YYYY 03 / 19 / 2020		
Mailing Address 1600 Lincoln Ave			FEC Identification Number C		
City Charleston	State IL	Zip Code 61920	Amount of Each Disbursement this Period 249.70		
Purpose of Disbursement Meals Expense		Category/ Type 002	Transaction ID : SB17.8439		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Paxton Media Group			Date of Disbursement MM / DD / YYYY 03 / 21 / 2020		
Mailing Address 100 Television Ln			FEC Identification Number C		
City Paducah	State KY	Zip Code 42003	Amount of Each Disbursement this Period 520.00		
Purpose of Disbursement Media Buy		Category/ Type 004	Transaction ID : SB17.8541		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1414.70
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 35 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Petty, Susan, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2020	
Mailing Address 11679 Wabash River			FEC Identification Number C	
City Effingham	State IL	Zip Code 62401	Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement Contractor Field Staff		Category/ Type 001	Transaction ID : SB17.8532	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Petty, Susan, , ,			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2020	
Mailing Address 11679 Wabash River			FEC Identification Number C	
City Effingham	State IL	Zip Code 62401	Amount of Each Disbursement this Period 4611.32	
Purpose of Disbursement Contractor Field Staff		Category/ Type 001	Transaction ID : SB17.8569	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Red Dog Media			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2020	
Mailing Address PO Box 58804			FEC Identification Number C	
City Nashville	State TN	Zip Code 37205	Amount of Each Disbursement this Period 13875.00	
Purpose of Disbursement Media Production		Category/ Type 006	Transaction ID : SB17.8539	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	22486.32
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 36 OF 45			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Remington Research Group			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2020		
Mailing Address 800 W 47th Street			FEC Identification Number C		
City Kansas City	State MO	Zip Code 64112	Amount of Each Disbursement this Period 3500.00		
Purpose of Disbursement Polling Expense		Category/ Type 005	Transaction ID : SB17.8530		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Remington Research Group			Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2020		
Mailing Address 800 W 47th Street			FEC Identification Number C		
City Kansas City	State MO	Zip Code 64112	Amount of Each Disbursement this Period 3500.00		
Purpose of Disbursement Polling Expense		Category/ Type 005	Transaction ID : SB17.8562		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Saline County Republicans			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2020		
Mailing Address PO Box 789			FEC Identification Number C		
City Harrisburg	State IL	Zip Code 62946	Amount of Each Disbursement this Period 300.00		
Purpose of Disbursement Event Expense		Category/ Type 007	Transaction ID : SB17.8509		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	7300.00
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)		PAGE 37 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SI Dollar Saver		Date of Disbursement MM / DD / YYYY 03 / 23 / 2020
Mailing Address 109 N Main Cross Street		FEC Identification Number C
City Galatia	State IL	Zip Code 62935
Purpose of Disbursement Ad Expense	Category/Type 004	
Candidate Name		Amount of Each Disbursement this Period 1886.52
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8521
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. State Journal		Date of Disbursement MM / DD / YYYY 03 / 12 / 2020
Mailing Address One Copley Plaza		FEC Identification Number C
City Springfield	State IL	Zip Code 62705
Purpose of Disbursement Ad Expense	Category/Type 004	
Candidate Name		Amount of Each Disbursement this Period 3909.78
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8475
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Stratemeyer Media		Date of Disbursement MM / DD / YYYY 03 / 04 / 2020
Mailing Address 5101 Hinkleville Rd		FEC Identification Number C
City Paducah	State KY	Zip Code 42001
Purpose of Disbursement Media Buy	Category/Type 004	
Candidate Name		Amount of Each Disbursement this Period 2500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.8525
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	8296.30
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)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

A. Stratemeyer Media

Full Name (Last, First, Middle Initial)
Mailing Address 5101 Hinkleville Rd

City Paducah State KY Zip Code 42001

Purpose of Disbursement Media Buy Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 03 / 12 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 8725.00

Transaction ID : SB17.8572

Memo Item

B. Strohm Newspapers

Full Name (Last, First, Middle Initial)
Mailing Address 510 N Michigan Ave

City Marshall State IL Zip Code 62441

Purpose of Disbursement Ad Expense Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 03 / 10 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 168.00

Transaction ID : SB17.8499

Memo Item

c. Strohm Newspapers

Full Name (Last, First, Middle Initial)
Mailing Address 510 N Michigan Ave

City Marshall State IL Zip Code 62441

Purpose of Disbursement Ad Expense Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 03 / 13 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 650.00

Transaction ID : SB17.8470

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 9543.00

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)		PAGE 39 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tactical Campaign			Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2020	
Mailing Address 575 N Sever Peaks Blvd			FEC Identification Number C	
City Provo	State UT	Zip Code 84606	Amount of Each Disbursement this Period 6500.00	
Purpose of Disbursement Field Operations Consulting		Category/ Type 001	Transaction ID : SB17.8535	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. The Cromwell Group			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2020	
Mailing Address PO Box 150846			FEC Identification Number C	
City Nashville	State TN	Zip Code 37215	Amount of Each Disbursement this Period 351.00	
Purpose of Disbursement Media Buy		Category/ Type 004	Transaction ID : SB17.8467	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. The Du Quoin Call			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2020	
Mailing Address 18 E Main Street			FEC Identification Number C	
City Du Quoin	State IL	Zip Code 62832	Amount of Each Disbursement this Period 380.00	
Purpose of Disbursement Ad Expense		Category/ Type 004	Transaction ID : SB17.8568	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	7231.00
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)	PAGE 40 OF 45			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The News Gazette			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2020		
Mailing Address 15 Main St.			FEC Identification Number C		
City Champaign	State IL	Zip Code 61820	Amount of Each Disbursement this Period 2296.60		
Purpose of Disbursement Ad Expense		Category/ Type 004	Transaction ID : SB17.8473		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. The Original Company			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2020		
Mailing Address PO Box 242			FEC Identification Number C		
City Vincennes	State IN	Zip Code 47591	Amount of Each Disbursement this Period 5256.00		
Purpose of Disbursement Media Buy		Category/ Type 004	Transaction ID : SB17.8432		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. The Prosper Group			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2020		
Mailing Address 150 W Market Street #500			FEC Identification Number C		
City Indianapolis	State IN	Zip Code 46204	Amount of Each Disbursement this Period 3500.00		
Purpose of Disbursement Media Buy		Category/ Type 004	Transaction ID : SB17.8529		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	11052.60
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 41 OF 45	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Prosper Group		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020
Mailing Address 150 W Market Street #500		FEC Identification Number C
City Indianapolis	State IN	Zip Code 46204
Purpose of Disbursement Media Buy	Category/Type 004	
Candidate Name	Amount of Each Disbursement this Period 8059.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	Transaction ID : SB17.8538
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Toledo Democrat		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2020
Mailing Address 116 Court House Sq		FEC Identification Number C
City Toledo	State IL	Zip Code 62468
Purpose of Disbursement Ad Expense	Category/Type 004	
Candidate Name	Amount of Each Disbursement this Period 252.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	Transaction ID : SB17.8507
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2020
Mailing Address 475 L'Enfant Plaza SW		FEC Identification Number C
City Washington	State DC	Zip Code 20260
Purpose of Disbursement Postage	Category/Type 001	
Candidate Name	Amount of Each Disbursement this Period 5.20	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020	Transaction ID : SB17.8454
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	8317.18
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 42 OF 45
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Vermilion County Conservative District		Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2020
Mailing Address 22296-A Henning Road		FEC Identification Number C
City Danville	State IL	Zip Code 61834
Purpose of Disbursement Event Room Rental	Category/Type 007	Amount of Each Disbursement this Period 250.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		Transaction ID : SB17.8505 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Vermilion County Conservative District		Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2020
Mailing Address 22296-A Henning Road		FEC Identification Number C
City Danville	State IL	Zip Code 61834
Purpose of Disbursement Event Room Rental	Category/Type 007	Amount of Each Disbursement this Period 50.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		Transaction ID : SB17.8452 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. Vienna Times		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2020
Mailing Address 305 Main Street		FEC Identification Number C
City Vienna	State IL	Zip Code 62995
Purpose of Disbursement Ad Expense	Category/Type 004	Amount of Each Disbursement this Period 479.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:		Transaction ID : SB17.8516 <input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	779.00
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)	PAGE 43 OF 45			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wayne County Press		Date of Disbursement
Mailing Address 213 E Main Street		M M / D D / Y Y Y Y 03 / 13 / 2020
City Fairfield	State IL	Zip Code 62837
Purpose of Disbursement Ad Expense	004	
Candidate Name		FEC Identification Number C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 539.40
State: District:		Transaction ID : SB17.8469 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. Wity Radio		Date of Disbursement
Mailing Address 399 Spelter Ave		M M / D D / Y Y Y Y 03 / 11 / 2020
City Tilton	State IL	Zip Code 61833
Purpose of Disbursement Media Buy	004	
Candidate Name		FEC Identification Number C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 1495.50
State: District:		Transaction ID : SB17.8471 <input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. WMMC		Date of Disbursement
Mailing Address PO Box 158		M M / D D / Y Y Y Y 03 / 17 / 2020
City Marshall	State IL	Zip Code 62441
Purpose of Disbursement Media Buy	004	
Candidate Name		FEC Identification Number C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 700.00
State: District:		Transaction ID : SB17.8519 <input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2734.90
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 44 OF 45		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WTHI			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2020		
Mailing Address 800 Ohio Street			FEC Identification Number C		
City Terre Haute	State IN	Zip Code 47807	Amount of Each Disbursement this Period 5142.50		
Purpose of Disbursement Media Buy		Category/ Type 004	Transaction ID : SB17.8477		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
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:					

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			FEC Identification Number C		
City	State	Zip Code	Amount of Each Disbursement this Period		
Purpose of Disbursement		Category/ Type	Memo Item		
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).....▶	5142.50
TOTAL This Period (last page this line number only).....▶	148248.93

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **MARY MILLER FOR CONGRESS** Transaction ID : **SC/10.10203**

LOAN SOURCE Full Name (Last, First, Middle Initial) MILLER, MARY, , ,		<input type="checkbox"/> Memo Item	Election: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 23326 E COUNTY ROAD 1960 N			
City OAKLAND	State IL	ZIP Code 61943	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 2800.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2800.00
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TERMS	Date Incurred M 10 / D 22 / Y 2019	Date Due M / D / Y 12/31/2020	Interest Rate (If none, enter 0) 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....▶	2800.00
TOTALS This Period (last page in this line only).....▶	2800.00

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