

# 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  
Candice Miller for Congress

ADDRESS (number and street) PO Box 182152  
 Check if different than previously reported. (ACC) Shelby Township MI 48318-2152

2. **FEC IDENTIFICATION NUMBER** C C00365593 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) MI 10

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 MI

5. Covering Period M M / D D / Y Y Y Y 10 / 18 / 2012 through M M / D D / Y Y Y Y 11 / 26 / 2012

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 Richard Springer  
Signature of Treasurer Richard Springer *[Electronically Filed]* Date M M / D D / Y Y Y Y 12 / 06 / 2012

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Candice 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))....	59830	672863.5
(b) Total Contribution Refunds (from Line 20(d)) .....	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	59830	672863.5
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	21541.51	349827.31
(b) Total Offsets to Operating Expenditures (from Line 14).....	590.78	1801.73
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	20950.73	348025.58
8. Cash on Hand at Close of Reporting Period (from Line 27).....	780279.76	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Candice Miller for Congress

Report Covering the Period: From: 10 / 18 / 2012 To: 11 / 26 / 2012

I. RECEIPTS

COLUMN A Total this Period

COLUMN B Election Cycle Total as of

COLUMN C Total for

11 / 06 / 2012 (date of general election)

11 / 07 / 2012 (date after general election)

through

11 / 26 / 2012 (last day of reporting period)

11. CONTRIBUTIONS

(other than loans) FROM:

- (a) Individuals/Persons Other than Political Committees
  - (i) Itemized (use Schedule A)

3700

167075

0

(ii) Unitemized

4380

58338.5

0

(iii) Total of contributions from individuals

8080

225413.5

0

(b) Political Party Committees

0

0

0

(c) Other Political Committees

51750

447450

1000

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 43

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
59830	672863.5	1000
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0	0	0
(b) All Other Loans		
0	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
590.78	1801.73	590.78
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
30.44	1155.36	0
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
60451.22	675820.59	1590.78

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Candice Miller for Congress

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

**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
<input type="text" value="21541.51"/>	<input type="text" value="349827.31"/>	<input type="text" value="10798.18"/>
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
(b) Of All Other Loans		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
(b) Political Party Committees		
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 43

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0	0	0
---	---	---

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0	0	0
---	---	---

**21. OTHER DISBURSEMENTS**

34400	452571	2000
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**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

55941.51	802398.31	12798.18
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

59830.00	672863.50	1000.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

20950.73	348025.58	10207.40
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	775770.05
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	60451.22
25. SUBTOTAL (add Line 23 and Line 24).....	836221.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	55941.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	780279.76

**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 7 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Henry Bone**

Mailing Address 18530 Mack Avenue  
Apartment #348

City Grosse Pointe State MI Zip Code 48236

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2012

**Transaction ID : A-C18275**

Amount of Each Receipt this Period  
**300**

**B.** Full Name (Last, First, Middle Initial)  
**Dan Degrow**

Mailing Address 6540 Lakeshore Road

City Burtchville State MI Zip Code 48059-2211

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

Name of Employer Information Requested Occupation Information Requested  
 St. Clair County RESA Superintendant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : A-C18318**

Amount of Each Receipt this Period  
**300**

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

Mailing Address 13288 Lillian Lane

City Sterling Heights State MI Zip Code 48313-2638

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

Name of Employer Information Requested Occupation Information Requested  
 Fenn & Associates Land Surveyor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : A-C18320**

Amount of Each Receipt this Period  
**100**

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

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

**700.00**

**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 43  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Donna Gorman-Ales**

Mailing Address 33776 Michigamme Drive

City State Zip Code  
Chesterfield MI 48047-4378

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Henry Ford Health Occupational Therapist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-C18313**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Stanley Hirt**

Mailing Address 2303 River Road

City State Zip Code  
Saint Clair MI 48079-4256

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-C18316**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**John F. Kazmierski**

Mailing Address 2690 West Long Lake Road

City State Zip Code  
Troy MI 48098-5406

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
General Hospital Medical Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : A-C18314**

Amount of Each Receipt this Period

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

**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 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Lietke**

Mailing Address 1705 Michigan Avenue

City Marysville State MI Zip Code 48040

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

Name of Employer Campbell & Shaw Steel Occupation Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : A-C18309**

Amount of Each Receipt this Period  
 100

**B.** Full Name (Last, First, Middle Initial)  
**Charles M. Mabley**

Mailing Address 35480 Willow Lane

City Richmond State MI Zip Code 48062-1001

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : A-C18315**

Amount of Each Receipt this Period  
 100

**C.** Full Name (Last, First, Middle Initial)  
**Lewis R. Thumm**

Mailing Address 38976 Farmcrest Street

City Clinton Township State MI Zip Code 48036-3218

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

Name of Employer Motor City Stamping, Inc. Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : A-C18317**

Amount of Each Receipt this Period  
 100

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

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

300.00

**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 10 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Cherokee Nation**

Mailing Address **PO Box 948**

City **Tahlequah** State **OK** Zip Code **74465**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 01 / 2012**

**Transaction ID : A-C18297**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Peter Beauregard Sr.**

Mailing Address **2444 Saint Clair River Drive**

City **Algonac** State **MI** Zip Code **48001-1143**

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

Name of Employer **Colony Marine** Occupation **President**

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : A-C18361**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mary J. Burns**

Mailing Address **1460 Kinney Road**

City **Memphis** State **MI** Zip Code **48401**

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

Name of Employer **BioPro Implants** Occupation **Accountant**

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : A-C18371**

Amount of Each Receipt this Period  
**300**

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

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

**1400.00**

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

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

FOR LINE NUMBER: PAGE 11 OF 43  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Guastello**

Mailing Address 300 Park Street  
Suite 410

City Birmingham State MI Zip Code 48009-3482

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

Name of Employer Center Management Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : A-C18363**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Ronald J. Kaski**

Mailing Address 5232 Ponderosa

City Clyde State MI Zip Code 48049

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : A-C18395**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Chester Kolascz**

Mailing Address 506 North Lakeshore Road

City Port Sanilac State MI Zip Code 48469-9713

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

Name of Employer Port Sanilac Marina Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : A-C18396**

Amount of Each Receipt this Period  
**100**

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

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

**400.00**

**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 12 OF 43
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Deloris Newell**

Mailing Address 2736 Hogan Way

City Canton State MI Zip Code 48188-6302

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

Name of Employer Strategic Communication Occupation Director of Special Projects

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : A-C18376**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Thomas D. Vertin**

Mailing Address 6535 Green Drive

City Harsens Is State MI Zip Code 48028-9642

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : A-C18369**

Amount of Each Receipt this Period  
**300**

**C.** Full Name (Last, First, Middle Initial)  
**Penny L. Eastman**

Mailing Address 6616 Rosecroft Place

City Falls Church State VA Zip Code 22043

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

Name of Employer MorphoTrust USA Occupation Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2012**

**Transaction ID : A-C18357**

Amount of Each Receipt this Period  
**250**

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

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

**650.00**

**3700.00**

**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 13 OF 43
	<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)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**BAE Systems, Inc. USA PAC**

Mailing Address 1101 Wilson Boulevard

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C C00281212**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2012

**Transaction ID : A-C18201**

Amount of Each Receipt this Period  
2500

**B.** Full Name (Last, First, Middle Initial)  
**DRIVE Committee**

Mailing Address 25 Louisiana Avenue NW

City State Zip Code  
Washington DC 20001-2130

FEC ID number of contributing federal political committee. **C C00032979**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : A-C18278**

Amount of Each Receipt this Period  
2500

**C.** Full Name (Last, First, Middle Initial)  
**Motorola Solutions, Inc. Political Action Committee**

Mailing Address 1455 Pennsylvania Avenue NW  
Suite 900

City State Zip Code  
Washington DC 20004-1016

FEC ID number of contributing federal political committee. **C C00075341**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : A-C18277**

Amount of Each Receipt this Period  
2000

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 14 OF 43  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 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)  
**Candice Miller for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**United Technologies Corporation PAC (UTC PAC)**

Mailing Address 1101 Pennsylvania Avenue NW  
10th Floor

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00035683**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 22 / 2012

**Transaction ID : A-C18276**

Amount of Each Receipt this Period  
**1500**

**B. Full Name (Last, First, Middle Initial)**  
**American Crystal Sugar Company PAC**

Mailing Address 101 3rd Street North

City Moorhead State MN Zip Code 56560-1952

FEC ID number of contributing federal political committee. **C C00110338**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : A-C18280**

Amount of Each Receipt this Period  
**5000**

**C. Full Name (Last, First, Middle Initial)**  
**The Doctors Company Federal PAC**

Mailing Address 185 Greenwood Road

City Napa State CA Zip Code 94558-6270

FEC ID number of contributing federal political committee. **C C00300376**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 23 / 2012

**Transaction ID : A-C18279**

Amount of Each Receipt this Period  
**1000**

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

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

**7500.00**

**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 43
	<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)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Smiths Group Services Corporation Political Action Committee (SMITHS PAC)**

Mailing Address 425 3rd Street SW  
Suite 875

City Washington State DC Zip Code 20024-3237

FEC ID number of contributing federal political committee. **C C00448324**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : A-C18281**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**TRUST PAC**

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

FEC ID number of contributing federal political committee. **C C00330720**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : A-C18286**

Amount of Each Receipt this Period  
5000

**C.** Full Name (Last, First, Middle Initial)  
**American Medical Association PAC (AMPAC)**

Mailing Address 25 Massachusetts Avenue NW  
Suite 600

City Washington State DC Zip Code 20001-7400

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : A-C18296**

Amount of Each Receipt this Period  
2000

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

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

8000.00

**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 16 OF 43
	<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)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Honeywell International PAC (HIPAC)**

Mailing Address 101 Constitution Avenue NW  
Suite 500

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
7500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : A-C18295**

Amount of Each Receipt this Period  
2500

**B.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Employees PAC**

Mailing Address 1550 Crystal Drive

City Arlington State VA Zip Code 22202-4135

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : A-C18292**

Amount of Each Receipt this Period  
2000

**C.** Full Name (Last, First, Middle Initial)  
**National Cable & Telecommunications Association PAC**

Mailing Address 25 Massachusetts Avenue NW  
Suite 100

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : A-C18294**

Amount of Each Receipt this Period  
1000

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

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

5500.00



**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 43
<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)  
**Candice Miller for Congress**

**A. Treasury Employees PAC (TEPAC)**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1750 H Street NW

City Washington	State DC	Zip Code 20006-4600
FEC ID number of contributing federal political committee. <b>C</b> C00107128		
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2012

**Transaction ID : A-C18293**

Amount of Each Receipt this Period  
1000

**B. Build PAC of the National Association of Home Builders**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1201 15th Street NW

City Washington	State DC	Zip Code 20005-2842
FEC ID number of contributing federal political committee. <b>C</b> C00000901		
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8000	

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2012

**Transaction ID : A-C18291**

Amount of Each Receipt this Period  
2000

**C. Dairy Farmers of America, Inc. DEPAC (Dairy Educational PAC)**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10220 North Ambassador Drive

City Kansas City	State MO	Zip Code 64153-1367
FEC ID number of contributing federal political committee. <b>C</b> C00001388		
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2012

**Transaction ID : A-C18290**

Amount of Each Receipt this Period  
2000

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

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

5000.00

**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 18 OF 43
	<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)  
**Candice Miller for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**Motorcycle Rights Fund PAC (MRF PAC)**

Mailing Address 236 Massachusetts Avenue NE  
Suite 204

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00298356**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : A-C18322**

Amount of Each Receipt this Period  
250

**B. Full Name (Last, First, Middle Initial)**  
**American Dental PAC**

Mailing Address 1111 14th Street NW  
Suite 1100

City Washington State DC Zip Code 20005-5627

FEC ID number of contributing federal political committee. **C C00000729**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : A-C18299**

Amount of Each Receipt this Period  
5000

**C. Full Name (Last, First, Middle Initial)**  
**Chesapeake Energy Corporation PAC**

Mailing Address PO Box 18576

City Oklahoma City State OK Zip Code 73154

FEC ID number of contributing federal political committee. **C C00389288**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : A-C18298**

Amount of Each Receipt this Period  
2500

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

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

7750.00

**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 19 OF 43
<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)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Council of Engineering Companies PAC (ACEC PAC)**

Mailing Address 1015 15th Street NW  
Suite 802

City Washington State DC Zip Code 20005-2605

FEC ID number of contributing federal political committee. **C C00010868**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : A-C18300**

Amount of Each Receipt this Period  
**4000**

**B.** Full Name (Last, First, Middle Initial)  
**American Hospital Association PAC**

Mailing Address 325 7th Street NW  
Suite 700

City Washington State DC Zip Code 20004-2801

FEC ID number of contributing federal political committee. **C C00106146**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : A-C18362**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Emergent Biosolutions Employees PAC**

Mailing Address 2273 Research Boulevard  
Suite 400

City Rockville State MD Zip Code 20877

FEC ID number of contributing federal political committee. **C C00380303**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : A-C18301**

Amount of Each Receipt this Period  
**1000**

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

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

**5500.00**

**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 20 OF 43
	<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)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Realtors Political Action Committee**

Mailing Address 430 North Michigan Avenue

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : A-C18302**

Amount of Each Receipt this Period  
 2000

**B.** Full Name (Last, First, Middle Initial)  
**Exxon Mobil Corporation PAC**

Mailing Address 5959 Las Colinas Boulevard

City Irving State TX Zip Code 75039

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : A-C18406**

Amount of Each Receipt this Period  
 2500

**C.** Full Name (Last, First, Middle Initial)  
**Johnson Controls, Inc. Federal PAC**

Mailing Address 5757 North Green Bay Avenue

City Milwaukee State WI Zip Code 53209

FEC ID number of contributing federal political committee. **C** C00343095

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 08 / 2012

**Transaction ID : A-C18399**

Amount of Each Receipt this Period  
 1000  
 POSTMARKED PRIOR TO GENERAL

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

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

5500.00

51750.00

**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 21 OF 43
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Enterprise Rent-A-Car**

Mailing Address 66152 Van Dyke Road

City Washington State MI Zip Code 48095-2012

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2066.78

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 13 / 2012

**Transaction ID : A-O18438**

Amount of Each Receipt this Period  
295.39

OFFSET- Rental Deposit

**B.** Full Name (Last, First, Middle Initial)  
**Enterprise Rent-A-Car**

Mailing Address 66152 Van Dyke Road

City Washington State MI Zip Code 48095-2012

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2066.78

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 13 / 2012

**Transaction ID : A-O18439**

Amount of Each Receipt this Period  
295.39

OFFSET- Rental Deposit

**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

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

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

590.78

590.78

**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 22 OF 43
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Candice Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Huntington National Bank**

Mailing Address PO Box 1558

City Columbus State OH Zip Code 43216-1558

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**746.76**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 / 31 / 2012**

**Transaction ID : A-M18389**

Amount of Each Receipt this Period  
**30.44**

Interest Income

**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

Amount of Each Receipt this Period

**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

Amount of Each Receipt this Period

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

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

**30.44**

**30.44**

**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 43	
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 7755 22 Mile Road		Amount of Each Disbursement this Period 18.95 <b>Transaction ID : B-E-18328</b>
City Shelby Township	State MI Zip Code 48317-2313	
Purpose of Disbursement Postage	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. American Thermographers</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 291 East 12 Mile Road		Amount of Each Disbursement this Period 2185 <b>Transaction ID : B-E-18199</b>
City Madison Heights	State MI Zip Code 48071-2557	
Purpose of Disbursement Printing	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Comcast Cable</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address PO Box 3006		Amount of Each Disbursement this Period 124.32 <b>Transaction ID : B-E-18198</b>
City Southeastern	State PA Zip Code 19398-3006	
Purpose of Disbursement Telephone Service	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2328.27
<b>TOTAL</b> 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 43	
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. M.J. Chirco Professional Building</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 48635 Van Dyke Avenue		Amount of Each Disbursement this Period 400 <b>Transaction ID : B-E-18200</b>
City Shelby Township	State MI Zip Code 48317-2560	
Purpose of Disbursement Rent	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 50.08 <b>Transaction ID : B-E-18196</b>
City Dallas	State TX Zip Code 75266	
Purpose of Disbursement Cellular Phone Service	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 470.37 <b>Transaction ID : B-E-18330</b>
City Carol Stream	State IL Zip Code 60197-6463	
Purpose of Disbursement Cellular Phone Service	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	920.45
<b>TOTAL</b> 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 43		
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 344.67 <b>Transaction ID : B-E-18331</b>
City State Zip Code Novi MI 48377-2951	Purpose of Disbursement Payroll Taxes 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Philip Kraft</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 50723 Jim Drive		Amount of Each Disbursement this Period 168.47 <b>Transaction ID : B-E-18386</b>
City State Zip Code Chesterfield MI 48047-4635	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Anthony J. Lewis</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address PO Box 182152		Amount of Each Disbursement this Period 186.66 <b>Transaction ID : B-E-18351</b>
City State Zip Code Shelby Township MI 48318-2152	Purpose of Disbursement Payroll 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	699.80
<b>TOTAL</b> 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 43		
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anthony J. Lewis</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address PO Box 182152		Amount of Each Disbursement this Period 186.66
City Shelby Township	State MI	Zip Code 48318-2152
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name		Transaction ID : B-E-18352
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 45320 Utica Park Boulevard		Amount of Each Disbursement this Period 67.83
City Utica	State MI	Zip Code 48315-5914
Purpose of Disbursement General Office Supplies	Category/ Type 001	
Candidate Name		Transaction ID : B-E-18332
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Wendy Carmack</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 26845 Campau Lane		Amount of Each Disbursement this Period 961.97
City Harrison Township	State MI	Zip Code 48045-2442
Purpose of Disbursement Payroll	Category/ Type 001	
Candidate Name		Transaction ID : B-E-18353
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1216.46
<b>TOTAL</b> 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 43	
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 45231 Market Street		Amount of Each Disbursement this Period 90.09 <b>Transaction ID : B-E-18335</b>
City Shelby Township State MI Zip Code 48315-6222	Purpose of Disbursement Printing Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. American Thermographers</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 291 East 12 Mile Road		Amount of Each Disbursement this Period 375 <b>Transaction ID : B-E-18287</b>
City Madison Heights State MI Zip Code 48071-2557	Purpose of Disbursement Printing Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Tent Occasions, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 2893 Coleman Road		Amount of Each Disbursement this Period 175 <b>Transaction ID : B-E-18289</b>
City Kimball State MI Zip Code 48074-1002	Purpose of Disbursement Equipment Rental Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	640.09
<b>TOTAL</b> 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 43	
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anthony J. Lewis</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address PO Box 182152		Amount of Each Disbursement this Period 890.78 <b>Transaction ID : B-E-18288</b>
City Shelby Township	State MI	
Purpose of Disbursement Reimbursed- Mileage	Category/ Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. River Crab Restaurant &amp; Blue Water Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 1337 River Road		Amount of Each Disbursement this Period 1893.16 <b>Transaction ID : B-E-18337</b>
City Saint Clair	State MI	
Purpose of Disbursement Catering	Category/ Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Huntington Merchant Credit Card Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address PO Box 6600		Amount of Each Disbursement this Period 42.4 <b>Transaction ID : B-E-18339</b>
City Hagerstown	State MD	
Purpose of Disbursement E-Merchant Fees	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2826.34
<b>TOTAL</b> 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 43			
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 500 <b>Transaction ID : B-E-18303</b>
City Washington State DC Zip Code 20003-1164	Purpose of Disbursement Software Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 25.9 <b>Transaction ID : B-E-18305</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Meal Expense Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address PO Box 660108		Amount of Each Disbursement this Period 316.85 <b>Transaction ID : B-E-18340</b>
City Dallas State TX Zip Code 75266	Purpose of Disbursement Cellular Phone Service Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	842.75
<b>TOTAL</b> 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 43	
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Captures for Keeps Photography</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 2250 Auburn Road Suite 112		Amount of Each Disbursement this Period 250 <b>Transaction ID : B-E-18306</b>
City Shelby Township	State MI Zip Code 48317	
Purpose of Disbursement Photography Service	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Comcast Cable</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address PO Box 3006		Amount of Each Disbursement this Period 248.94 <b>Transaction ID : B-E-18307</b>
City Southeastern	State PA Zip Code 19398-3006	
Purpose of Disbursement Telephone Service	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Philip Kraft</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 50723 Jim Drive		Amount of Each Disbursement this Period 168.47 <b>Transaction ID : B-E-18354</b>
City Chesterfield	State MI Zip Code 48047-4635	
Purpose of Disbursement Payroll	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	667.41
<b>TOTAL</b> 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 43		
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Anthony J. Lewis</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address PO Box 182152		Amount of Each Disbursement this Period 186.66 <b>Transaction ID : B-E-18355</b>
City Shelby Township	State MI	
Zip Code 48318-2152	Purpose of Disbursement Payroll	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 344.66 <b>Transaction ID : B-E-18344</b>
City Novi	State MI	
Zip Code 48377-2951	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Tractor Supply Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 66030 Van Dyke Road		Amount of Each Disbursement this Period 63.59 <b>Transaction ID : B-E-18345</b>
City Washington	State MI	
Zip Code 48095-2013	Purpose of Disbursement Banners & Signs	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	594.91
<b>TOTAL</b> 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 43	
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tractor Supply Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 66030 Van Dyke Road		Amount of Each Disbursement this Period 68.89 <b>Transaction ID : B-E-18346</b>
City Washington State MI Zip Code 48095-2013	Purpose of Disbursement Banners & Signs Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Tractor Supply Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 66030 Van Dyke Road		Amount of Each Disbursement this Period 68.89 <b>Transaction ID : B-E-18347</b>
City Washington State MI Zip Code 48095-2013	Purpose of Disbursement Banners & Signs Candidate Name Category/Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Wendy Carmack</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 26845 Campau Lane		Amount of Each Disbursement this Period 961.98 <b>Transaction ID : B-E-18435</b>
City Harrison Township State MI Zip Code 48045-2442	Purpose of Disbursement Payroll Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1099.76
<b>TOTAL</b> 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 43			
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Enterprise Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 66152 Van Dyke Road		Amount of Each Disbursement this Period 641.47 <b>Transaction ID : B-E-18408</b>
City Washington State MI Zip Code 48095-2012	Purpose of Disbursement Transportation 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Enterprise Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 66152 Van Dyke Road		Amount of Each Disbursement this Period 641.47 <b>Transaction ID : B-E-18409</b>
City Washington State MI Zip Code 48095-2012	Purpose of Disbursement Transportation 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Marathon Oil Sharrak Conv. Ctr.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2012
Mailing Address 13630 Hall Road		Amount of Each Disbursement this Period 58.02 <b>Transaction ID : B-E-18411</b>
City Sterling Heights State MI Zip Code 48313-1220	Purpose of Disbursement Fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1340.96
<b>TOTAL</b> 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 43			
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Marathon Oil Sharrak Conv. Ctr.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2012
Mailing Address 13630 Hall Road		Amount of Each Disbursement this Period 35.38
City Sterling Heights	State MI	
Zip Code 48313-1220	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Enterprise Rent-A-Car</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 66152 Van Dyke Road		Amount of Each Disbursement this Period 541.47
City Washington	State MI	
Zip Code 48095-2012	Purpose of Disbursement Car Rental	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Marathon Oil Sharrak Conv. Ctr.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 13630 Hall Road		Amount of Each Disbursement this Period 61.19
City Sterling Heights	State MI	
Zip Code 48313-1220	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	638.04
<b>TOTAL</b> 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 43		
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Marathon Oil Sharrak Conv. Ctr.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 13630 Hall Road		Amount of Each Disbursement this Period 44.02
City Sterling Heights	State MI	
Zip Code 48313-1220	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Marathon Oil Sharrak Conv. Ctr.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 13630 Hall Road		Amount of Each Disbursement this Period 31.66
City Sterling Heights	State MI	
Zip Code 48313-1220	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Marathon Oil Sharrak Conv. Ctr.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 13630 Hall Road		Amount of Each Disbursement this Period 25
City Sterling Heights	State MI	
Zip Code 48313-1220	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	100.68
<b>TOTAL</b> 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 43	
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 159.02 <b>Transaction ID : B-E-18415</b>
City Novi	State MI	
Zip Code 48377-2951	Purpose of Disbursement Payroll Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address PO Box 38044		Amount of Each Disbursement this Period 1338.9 <b>Transaction ID : B-E-18391</b>
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement SEE MEMO ITEMS	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	Original vendors exceeding reporting threshold itemized as memo transactions.

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address PO Box 38044		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-S-16432</b>
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement Compliance Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>[MEMO ITEM]</b> Subitemization of Campaign Financial Services(11/15/12)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1497.92
<b>TOTAL</b> 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 43	
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address PO Box 38044		Amount of Each Disbursement this Period 100 <b>Transaction ID : B-S-16433</b>
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement Accounting Services	[MEMO ITEM] Subitemization of Campaign Financial Services(11/15/12)
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address PO Box 38044		Amount of Each Disbursement this Period 175.9 <b>Transaction ID : B-S-16434</b>
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement Express Shipping	[MEMO ITEM] Subitemization of Campaign Financial Services(11/15/12)
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Financial Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address PO Box 38044		Amount of Each Disbursement this Period 63 <b>Transaction ID : B-S-16435</b>
City Bethesda	State MD	
Zip Code 20824-0844	Purpose of Disbursement E-Merchant Fees	[MEMO ITEM] Subitemization of Campaign Financial Services(11/15/12)
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> 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 38 OF 43	
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Phil Kraft</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address 50723 Jim Drive		Amount of Each Disbursement this Period 328.56 <b>Transaction ID : B-E-18392</b>
City Chesterfield	State MI	
Zip Code 48047-4635	Purpose of Disbursement Reimbursed-Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2012
Mailing Address 45231 Market Street		Amount of Each Disbursement this Period 704.16 <b>Transaction ID : B-E-18424</b>
City Shelby Township	State MI	
Zip Code 48315-6222	Purpose of Disbursement Printing	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Aristotle International, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2012
Mailing Address 205 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-18400</b>
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Software Service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2032.72
<b>TOTAL</b> 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 43	
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Joshua Sparling</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2012
Mailing Address 5555 State Road		Amount of Each Disbursement this Period 508.94 <b>Transaction ID : B-E-18401</b>
City Fort Gratiot	State MI	
Zip Code 48059	Purpose of Disbursement Reimbursed- Mileage	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. M.J. Chirco Professional Building</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2012
Mailing Address 48635 Van Dyke Avenue		Amount of Each Disbursement this Period 400 <b>Transaction ID : B-E-18403</b>
City Shelby Township	State MI	
Zip Code 48317-2560	Purpose of Disbursement Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Paychex, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2012
Mailing Address 29065 Cabot Drive		Amount of Each Disbursement this Period 344.66 <b>Transaction ID : B-E-18426</b>
City Novi	State MI	
Zip Code 48377-2951	Purpose of Disbursement Payroll Taxes	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1253.66
<b>TOTAL</b> 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 43			
	<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)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wendy Carmack</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2012	
Mailing Address 26845 Campau Lane			Amount of Each Disbursement this Period 961.98	
City Harrison Township	State MI	Zip Code 48045-2442	Transaction ID : B-E-18436	
Purpose of Disbursement Payroll		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2012	
Mailing Address PO Box 6463			Amount of Each Disbursement this Period 452.84	
City Carol Stream	State IL	Zip Code 60197-6463	Transaction ID : B-E-18427	
Purpose of Disbursement Cellular Phone Service		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2012	
Mailing Address PO Box 660108			Amount of Each Disbursement this Period 343.48	
City Dallas	State TX	Zip Code 75266	Transaction ID : B-E-18428	
Purpose of Disbursement Cellular Phone Service		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1758.30
<b>TOTAL</b> This Period (last page this line number only).....	20458.46



**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 43
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Strickland for Congress 2012</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>
Mailing Address <b>603 East Alton Avenue Suite H</b>		Amount of Each Disbursement this Period <b>2000</b> Transaction ID : <b>B-E-18192</b>
City <b>Santa Ana</b> State <b>CA</b> Zip Code <b>92705</b>	Purpose of Disbursement Political Contribution <b>011</b> Category/Type	
Candidate Name <b>Anthony A. Strickland</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>CA</b> District: <b>26</b>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) <b>B. Michigan Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2012</b>
Mailing Address <b>520 Seymour Avenue</b>		Amount of Each Disbursement this Period <b>25000</b> Transaction ID : <b>B-E-18197</b>
City <b>Lansing</b> State <b>MI</b> Zip Code <b>48933-1118</b>	Purpose of Disbursement Political Contribution <b>011</b> Category/Type	
Candidate Name <b>Michigan Republican Party</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) <b>c. Anderson For Congress</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 25 / 2012</b>
Mailing Address <b>160 Louisville Road</b>		Amount of Each Disbursement this Period <b>1000</b> Transaction ID : <b>B-E-18284</b>
City <b>Grovetown</b> State <b>GA</b> Zip Code <b>30813-4121</b>	Purpose of Disbursement Political Contribution <b>011</b> Category/Type	
Candidate Name <b>Lee Ivey Anderson</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>GA</b> District: <b>12</b>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>28000.00</b>
<b>TOTAL</b> 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 43	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends of Nan Hayworth</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address PO Box 188		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-18283</b>
City Carmel	State NY	
Zip Code 10512	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>Nan Hayworth</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NY District: 19	

Full Name (Last, First, Middle Initial) <b>B. Judy Biggert for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address PO Box 4198		Amount of Each Disbursement this Period 1000 <b>Transaction ID : B-E-18282</b>
City Naperville	State IL	
Zip Code 60567-4198	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>Judy Biggert</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: IL District: 11	

Full Name (Last, First, Middle Initial) <b>c. Children's Miracle Network</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 205 West 700 South		Amount of Each Disbursement this Period 2000 <b>Transaction ID : B-E-18285</b>
City Salt Lake City	State UT	
Zip Code 84101	Purpose of Disbursement Charitable Contribution	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4000.00
<b>TOTAL</b> 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 43	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Candice Miller for Congress**

Full Name (Last, First, Middle Initial) <b>A. Congressional Sportsmen's Foundation</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address <b>110 North Carolina Avenue SE</b>		Amount of Each Disbursement this Period <b>400</b> Transaction ID : <b>B-E-18387</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20003-1841</b>	Purpose of Disbursement <b>Charitable Donation</b> <input type="checkbox"/> 012 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Benishek For Congress, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 26 / 2012</b>
Mailing Address <b>PO Box 108</b>		Amount of Each Disbursement this Period <b>1000</b> Transaction ID : <b>B-E-18404</b>
City <b>Gladstone</b> State <b>MI</b> Zip Code <b>49837</b>	Purpose of Disbursement <b>Political Contribution</b> <input type="checkbox"/> 011 Category/Type	
Candidate Name <b>Daniel J Benishek</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special 2012</b>	
State: <b>MI</b> District: <b>01</b>		

Full Name (Last, First, Middle Initial) <b>c. Kerry Bentivolio For US Congress</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 26 / 2012</b>
Mailing Address <b>260 White Pine Trail</b>		Amount of Each Disbursement this Period <b>1000</b> Transaction ID : <b>B-E-18405</b>
City <b>Milford</b> State <b>MI</b> Zip Code <b>48381-3445</b>	Purpose of Disbursement <b>Political Contribution</b> <input type="checkbox"/> 011 Category/Type	
Candidate Name <b>Kerry Bentivolio</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Special 2012</b>	
State: <b>MI</b> District: <b>11</b>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2400.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>34400.00</b>