

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

MARY MILLER FOR CONGRESS

ADDRESS (number and street)

3710 BROADWAY STREET

BOX 102

QUINCY

IL

62305

☐ Check if different than previously reported. (ACC)

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00723916

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

STATE ▼ DISTRICT

IL

15

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
11 / 26 / 2024

through

M M / D D / Y Y Y Y
12 / 31 / 2024

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 BOLES, JASON, D, ,

Signature of Treasurer

BOLES, JASON, D, ,

Date

M M / D D / Y Y Y Y
01 / 29 / 2025

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

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

MARY MILLER FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
11 / 26 / 2024

To:

M M / D D / Y Y Y Y
12 / 31 / 2024

	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))....	21743.72	26882.68
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	21743.72	26882.68
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	30034.25	59332.31
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	30034.25	59332.31
8. Cash on Hand at Close of Reporting Period (from Line 27).....	646256.34	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

MARY MILLER FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
11 / 26 / 2024

To:

M M / D D / Y Y Y Y
12 / 31 / 2024**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

4158.00

5283.00

(ii) Unitemized

16585.72

20599.68

(iii) TOTAL of contributions
from individuals ▶

20743.72

25882.68

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs)

1000.00

1000.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

21743.72

26882.68

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

21743.72

26882.68

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	30034.25	59332.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	30034.25	59332.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	654546.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	21743.72
25. SUBTOTAL (add Line 23 and Line 24).....	676290.59
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	30034.25
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	646256.34

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 35

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

ADAMS, CHARLES, A, MR,

A.

Mailing Address PO BOX 1422

City

MATTOON

State

IL

Zip Code

61938

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	9		2	0	2	4

Transaction ID : RNQ2H6WZ7NRWBX3XC8J

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHAMBERLAIN, NANCY, A, MS,

B.

Mailing Address PO BOX 213

City

PIERCE

State

NE

Zip Code

68767-0213

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : R4XDD5YX66QBNWBFVKM

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DE ROX, MARY, A, MRS,

C.

Mailing Address 267 MAPLE VIEW DR

City

WESTFIELD

State

IN

Zip Code

46074

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : RHYY6RSGY5YT9ASJCUT6

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

1800.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

JENNINGS, JERRY, , MR,

A.

Mailing Address 416 N NATCHEZ TRCE

City

SPRINGFIELD

State

IL

Zip Code

62711

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	4

Transaction ID : RTQ3K6BHW4ZYKZRBYB8

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KORTE, GREGG, , ,

B.

Mailing Address 8479 GREENBRIAR ESTATES

City

EDWARDSVILLE

State

IL

Zip Code

62025

FEC ID number of contributing
federal political committee.

C

Name of Employer

KORTE LUITJOHAN CONTRACTORS INC.

Occupation

BUILDER PRESIDENT

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	2	4

Transaction ID : RW4N7K9CYESVPAA37KK

Amount of Each Receipt this Period

350.00

☐ Memo ItemTOTAL EARMARKED THROUGH CONDUIT WINRED
PAC. CONDUIT LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

WINRED PAC

C.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1464.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	6		2	0	2	4

Transaction ID : RV4SD83Z6HJERA64QDEA

Amount of Each Receipt this Period

350.00

☒ Memo ItemTOTAL EARMARKED THROUGH CONDUIT.
CONDUIT LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

650.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

LEE, DEAN, , ,

A.

Mailing Address PO BOX 89

City

LAKEWOOD

State

NM

Zip Code

88254

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RANCHER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 27 / 2024D D / Y Y Y Y Y
27 / 2024Y Y Y Y Y
2024

Transaction ID : R6FR92YR5F3JYSRGC67Y

Amount of Each Receipt this Period

250.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

LIAY, MARY, W, MS,

Mailing Address 919 CHESHIRE DR APT B

City

CHAMPAIGN

State

IL

Zip Code

61821

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2024D D / Y Y Y Y Y
31 / 2024Y Y Y Y Y
2024

Transaction ID : RUTZXXJVHA5S6BJ99494

Amount of Each Receipt this Period

250.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

MADRIL, RICHARD, F, MR,

Mailing Address 777 E QUARTZ AVE PMB 9009

City

JEAN

State

NV

Zip Code

89019

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 12 / 2024D D / Y Y Y Y Y
12 / 2024Y Y Y Y Y
2024

Transaction ID : R9Q53QNZKN958AHDQ3SF

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

750.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

MUSSON, GARY, , MR,

Mailing Address 510 COUNTY ROAD 700 N

City

SADORUS

State

IL

Zip Code

61872

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
FARMER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		10		2024

Transaction ID : RSBA9N4X85DHDRUU8FB4

Amount of Each Receipt this Period

250.00



Memo Item

B.

Full Name (Last, First, Middle Initial)

SCHEIBAL, KATHRYN, , MRS,

Mailing Address 1720 DUKE ST

City

EDWARDSVILLE

State

IL

Zip Code

62025

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		10		2024

Transaction ID : RSMW9UP56RPXTWV5EKV

Amount of Each Receipt this Period

500.00



Memo Item

C.

Full Name (Last, First, Middle Initial)

THIENEMAN, MARILYN, F, MRS,

Mailing Address 645 SKY PARK DR NE

City

CORYDON

State

IN

Zip Code

47112

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

58.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		12		2024

Transaction ID : R43MUTB2FCEY8TYU9H57

Amount of Each Receipt this Period

58.00



Memo Item

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

808.00

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

THIENEMAN, MARILYN, F, MRS,

A. Mailing Address 645 SKY PARK DR NE

City
CORYDON

State
IN

Zip Code
47112

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 19 2024

Transaction ID : RJKERXGR223J4BGB7WQI

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WINRED PAC

B. Mailing Address PO BOX 9891

City
ARLINGTON

State
VA

Zip Code
22219

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2227.69

Date of Receipt

M M / D D / Y Y Y Y Y
12 31 2024

Transaction ID : RH2RAGJQGNM4CZGPLYW:

Amount of Each Receipt this Period

762.73

☒ Memo Item

TOTAL EARMARKED THROUGH CONDUIT.
CONDUIT LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

C. 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

Amount of Each Receipt this Period

☐ Memo Item

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

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

150.00

4158.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☒ 11c	☐ 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMEREN CORPORATION FEDERAL PAC (AMEREN FEDPAC)**A.**Mailing Address 1331 PENNSYLVANIA AVENUE NW
SUITE 550SCity
WASHINGTONState
DCZip Code
20004FEC ID number of contributing
federal political committee.**C** C00206136

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
12 23 2024

Transaction ID : RFTAPGSXXWYGFDUTQS/

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

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

Amount of Each Receipt this Period

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

1000.00

1000.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address 200 VESEY STREET

City
MANHATTANState
NYZip Code
10080Purpose of Disbursement
PAYMENT OF CAMPAIGN CREDIT CARD

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

5589.51

Transaction ID : DHZPZDEBCXF578G85RXC

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

18.50

Transaction ID : DEF5CKRRP7XAQ6A3VKU3

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

229.98

Transaction ID : DJRJ6GVVAWAEJK8XDM9U

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5589.51

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

279.98

Transaction ID : DFRTVAKTDH42SQCPVP4R

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SE

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
MEALS

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

74.11

Transaction ID : D68WPTBSP4643WCBUE7Y

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MARRIOTT

Mailing Address 7750 WISCONSIN AVENUE

City
BETHESDAState
MDZip Code
20814Purpose of Disbursement
LODGING

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

87.50

Transaction ID : D65MPECRQXJP6E56GGB

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MARRIOTT

Mailing Address 7750 WISCONSIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2024

City
BETHESDAState
MDZip Code
20814Purpose of Disbursement
LODGING

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

342.39

Transaction ID : DTK5NHX8JPC23RVWE4XM

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. MARRIOTT

Mailing Address 7750 WISCONSIN AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		07		2024

City
BETHESDAState
MDZip Code
20814Purpose of Disbursement
LODGING

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

374.50

Transaction ID : DTV2NRN52BVFKEKRCJFYF

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. LYFTMailing Address 185 BERRY ST
#5000

Date of Disbursement

M M	/	D D	/	Y Y Y Y
11		06		2024

City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

2.00

Transaction ID : D5AEBFAKZ25GFVDQJJ99

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LYFTMailing Address 185 BERRY ST
#5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

3.00

Transaction ID : DBTUTNTB8E2EW3S25GBS

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LYFTMailing Address 185 BERRY ST
#5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

7.52

Transaction ID : DDTX9G6UB9QXSQYSST3V

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. LYFTMailing Address 185 BERRY ST
#5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

26.88

Transaction ID : DF7M6GTPQKBZRHA8CSNP

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LYFTMailing Address 185 BERRY ST
#5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

33.70

Transaction ID : D55XE3ME9NV5QRJ6PVJK

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LYFTMailing Address 185 BERRY ST
#5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

5.50

Transaction ID : DFR9AH9EU93C2TUEKUV

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. LYFTMailing Address 185 BERRY ST
#5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

8.05

Transaction ID : DUJ54Q83PVNAP8XNPV3E

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LYFTMailing Address 185 BERRY ST
#5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

9.93

Transaction ID : DVDVYFVKHJG3WJAJMC8E

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. LYFTMailing Address 185 BERRY ST
#5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

16.42

Transaction ID : DPRDZBE236375FXND23Q

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. LYFTMailing Address 185 BERRY ST
#5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

17.49

Transaction ID : D7NGR6VDRM4P8C9CSQEK

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LYFTMailing Address 185 BERRY ST
#5000City
SAN FRANCISCOState
CAZip Code
94107Purpose of Disbursement
TRANSPORTATION

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

30.39

Transaction ID : DSEX9XTMKNEAFGR5444E

☒ Memo Item**B. CONSTANT CONTACT**

Mailing Address 1601 TRAPELO ROAD

City
WALTHAMState
MAZip Code
02451Purpose of Disbursement
DATA SUBSCRIPTION

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

227.00

Transaction ID : DBPNGD7KH2ZWR9A535CT

☒ Memo Item**C. FAIRFIELD INN BY MARRIOTT**

Mailing Address 7750 WISCONSIN AVENUE

City
BETHESDAState
MDZip Code
20814Purpose of Disbursement
LODGING

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

136.53

Transaction ID : DKDVKDTC7WNGVQ8B8KE:

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FAIRFIELD INN BY MARRIOTT

Mailing Address 7750 WISCONSIN AVENUE

Date of Disbursement

M M	D D	Y Y Y Y
11	04	2024

City
BETHESDAState
MDZip Code
20814

FEC Identification Number

C

Purpose of Disbursement
LODGING

002

Amount of Each Disbursement this Period

136.53

Transaction ID : DSVUP6BY59634TMDEK3G

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

Date of Disbursement

M M	D D	Y Y Y Y
11	04	2024

City
DALLASState
TXZip Code
75235

FEC Identification Number

C

Purpose of Disbursement
AIRFARE

002

Amount of Each Disbursement this Period

30.00

Transaction ID : D7Y28ZTCCUXK6F3422SA

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

Date of Disbursement

M M	D D	Y Y Y Y
11	04	2024

City
DALLASState
TXZip Code
75235

FEC Identification Number

C

Purpose of Disbursement
AIRFARE

002

Amount of Each Disbursement this Period

30.00

Transaction ID : D2U4EW8MDK3YYR5NUMKI

☒ Memo Item

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State:

District:

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

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 35

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

315.98

Transaction ID : D55NNJNQC PN XWZ2PQTMA

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

315.98

Transaction ID : DAVTX73TR2E3KQC8CQQG

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

528.98

Transaction ID : DQ3M7JXRGW27HGT XV3UC

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 20a	☐ 20b	☐ 20c	☐ 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address 2702 LOVE FIELD DRIVE

City
DALLASState
TXZip Code
75235Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

528.98

Transaction ID : DER7ENPCA9BY3AFW5332

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

35.78

Transaction ID : D2EY7SE29ADGHB7K52Q

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

146.95

Transaction ID : DPDPX5UPWNNY8XXN3EK4

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

350.96

Transaction ID : D9ZDMQ2YN9MVAR6NTE95

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. SHERATON BY MARRIOTT

Mailing Address 750 WISCONSIN AVE

City
BETHESDAState
MDZip Code
20814Purpose of Disbursement
TRAVEL-LODGING

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

176.63

Transaction ID : DMP36AXXVV3X8J6D2CKN

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

75.00

Transaction ID : DG2NH5QW67YWKXFNJ5JZ

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SHERATON BY MARRIOTT

Mailing Address 750 WISCONSIN AVE

City
BETHESDAState
MDZip Code
20814Purpose of Disbursement
TRAVEL-LODGING

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

274.35

Transaction ID : D9NTQNGXPMVEH2246YBB

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. MAR-A-LAGO CLUB LLC

Mailing Address 1100 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
ENTERTAINMENT-ASSOCIATIONS

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

128.40

Transaction ID : DEBKSHX9RGDZB94M6G44

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. MAR-A-LAGO CLUB LLC

Mailing Address 1100 S OCEAN BLVD

City
PALM BEACHState
FLZip Code
33480Purpose of Disbursement
ENTERTAINMENT-ASSOCIATIONS

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	5		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

331.70

Transaction ID : DFFZEWFQBQYZQJSMB3WB!

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

792.95

Transaction ID : DE9TZKRENBXU68NZCCU

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
TRAVEL-AIRLINE

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

792.95

Transaction ID : DAX2XVY5UNVQKNU7GSFN

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
REFUND

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	3		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

- 792.95

Transaction ID : DKDUS22Q3RP8KF6BHFWT

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
REFUND

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	3	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

- 792.95

Transaction ID : DUNNTQPT4CN9B3N5VRDG

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
REFUND

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

- 279.98

Transaction ID : D8DJVUYHS66AHA8RVJTG

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
REFUND

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

- 229.98

Transaction ID : DA6BTZ7Z4FUycQF7VW5M

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address PO BOX 619616

City
DFW AIRPORTState
TXZip Code
75261Purpose of Disbursement
REFUND

002

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

- 18.50

Transaction ID : DVMJM59FUJC4G9TQ33TH

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. ELECTIONS LLCMailing Address 1050 CONNECTICUT AVE NW
SUITE 500City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
LEGAL

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	6		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

2500.00

Transaction ID : D8V3FVRQMAD99M2SD69J

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FULFILLMENT SOLUTIONS INC.Mailing Address 44970 FALCON PLACE
SUITE 400City
STERLINGState
VAZip Code
20166Purpose of Disbursement
POSTAGE AND DELIVERY

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

13996.63

Transaction ID : DKBU74SWYF4VNG7P8SAK

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

16496.63

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAILING & CAGING LLC

Mailing Address 1060 POWERS PL

City
ALPHARETTAState
GAZip Code
30009Purpose of Disbursement
FUNDRAISING MAIL PROGRAM CAGING

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

3263.15

Transaction ID : DG8E6UFUWKM2CUEUKBP5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAWCO LLC

Mailing Address 215 N PAYNE ST

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
FUNDRAISING

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

133.17

Transaction ID : DCC63TZDK8GTSEFBZGXA

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAWCO LLC

Mailing Address 215 N PAYNE ST

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
FUNDRAISING

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

84.05

Transaction ID : DH7BFQQ7Q956RDVU42TA

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3480.37

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAWCO LLC

Mailing Address 215 N PAYNE ST

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
FUNDRAISING

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	6	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

75.15

Transaction ID : DPV8Y3KRZT2SRUFH9PRQ

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAWCO LLC

Mailing Address 215 N PAYNE ST

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
FUNDRAISING

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

106.24

Transaction ID : D2CA7XQMTYMWD9RTPM6L

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MAWCO LLC

Mailing Address 215 N PAYNE ST

City
ALEXANDRIAState
VAZip Code
22314Purpose of Disbursement
FUNDRAISING

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2024

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

116.52

Transaction ID : DXF6T7XF26QRTC78EP5R

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

297.91

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. ONPOINT DATA STRATEGY LLCMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DATA: LIST FULFILLMENT

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

390.00

Transaction ID : DHP8STKWJBCQ9EH4QCFF

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ONPOINT DATA STRATEGY LLCMailing Address 20130 LAKEVIEW CENTER PLAZA
SUITE 300City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
DATA: LIST FULFILLMENT

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

643.74

Transaction ID : DX5F3ZAQHE5VAKKWFPQR

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SERVISFIRST BANKMailing Address 300 GALLERIA PARKWAY SE
SUITE 100City
ATLANTAState
GAZip Code
30339Purpose of Disbursement
BANK SERVICE FEE

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	9	/	2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

28.75

Transaction ID : DHA84C3WBCV5MSH7WUT

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1062.49

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SERVISFIRST BANKMailing Address 300 GALLERIA PARKWAY SE
SUITE 100City
ATLANTAState
GAZip Code
30339Purpose of Disbursement
BANK SERVICE FEE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		3	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

8.10

Transaction ID : DPM5G6ENPC8R93AA5BMP

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SERVISFIRST BANKMailing Address 300 GALLERIA PARKWAY SE
SUITE 100City
ATLANTAState
GAZip Code
30339Purpose of Disbursement
BANK SERVICE FEE

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

266.06

Transaction ID : DV3E4RT9WXM4KR7UCBNH

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SERVISFIRST BANKMailing Address 300 GALLERIA PARKWAY SE
SUITE 100City
ATLANTAState
GAZip Code
30339Purpose of Disbursement
BANK SERVICE FEE

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1.30

Transaction ID : DE2BUHGPHF27PJDP7TJS

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

275.46

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SERVISFIRST BANKMailing Address 300 GALLERIA PARKWAY SE
SUITE 100City
ATLANTAState
GAZip Code
30339Purpose of Disbursement
BANK SERVICE FEE

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

59.75

Transaction ID : DTQXFSE9TM62T942B9HJ

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SERVISFIRST BANKMailing Address 300 GALLERIA PARKWAY SE
SUITE 100City
ATLANTAState
GAZip Code
30339Purpose of Disbursement
BANK SERVICE FEE

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

58.00

Transaction ID : DSY23J2R4BU78965QUC7

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. TABULARIUS COMPLIANCEMailing Address 126 C STREET NW
THIRD FLOORCity
WASHINGTONState
DCZip Code
20001Purpose of Disbursement
COMPLIANCE AND ETHICS CONSULTING - REGULATORY REPORTING

001

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐ General
☐	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : DQX2JVP82XCE77ZRHUSD

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1617.75

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 35

☒ 17	☐ 18	☐ 19a	☐ 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

MARY MILLER FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNITED STATES POSTAL SERVICE USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTONState
DCZip Code
20260Purpose of Disbursement
POSTAGE

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	7		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

55.80

Transaction ID : DJ5MQHERD594DEHN7U7K

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. UNITED STATES POSTAL SERVICE USPS

Mailing Address 475 L'ENFANT PLAZA SW

City
WASHINGTONState
DCZip Code
20260Purpose of Disbursement
POSTAGE

003

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For: 2026

☒	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	0		2	0	2	4

FEC Identification Number

C

Amount of Each Disbursement this Period

1088.80

Transaction ID : DD8Z42TAR4EH2BYN6GGR

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐	House
☐	Senate
☐	President

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1144.60

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

29964.72

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 32 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.10203

MARY MILLER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☒ Primary☐ General☐ Other (specify) ▼

MILLER, MARY, , ,

Mailing Address

PO BOX 159

City

HINDSBORO

State

IL

ZIP Code

61930

☒ Personal Funds of the Candidate

Original Amount of Loan

2800.00

Cumulative Payment To Date

2800.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
10 / 22 / 2019M M / D D / Y Y Y Y
05 / 21 / 2022

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

0.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 33 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.10207

MARY MILLER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼

MILLER, MARY, , ,

Mailing Address

PO BOX 159

City

HINDSBORO

State

IL

ZIP Code

61930

☒ Personal Funds of the Candidate

Original Amount of Loan

2800.00

Cumulative Payment To Date

2800.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 23 / 2020M M / D D / Y Y Y Y
05 21 / 2022

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

0.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 34 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.10208

MARY MILLER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼

MILLER, MARY, , ,

Mailing Address

PO BOX 159

City

HINDSBORO

State

IL

ZIP Code

61930

☒ Personal Funds of the Candidate

Original Amount of Loan

2800.00

Cumulative Payment To Date

2800.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 23 / 2020M M / D D / Y Y Y Y
05 21 / 2022

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

0.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 35 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.10209

MARY MILLER FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2020

☐ Primary☒ General☐ Other (specify) ▼

MILLER, MARY, , ,

Mailing Address

PO BOX 159

City

HINDSBORO

State

IL

ZIP Code

61930

☒ Personal Funds of the Candidate

Original Amount of Loan

1600.00

Cumulative Payment To Date

1600.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 / 23 / 2020M M / D D / Y Y Y Y
05 / 21 / 2022M M / D D / Y Y Y Y
05 / 21 / 2022

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

0.00

TOTALS This Period (last page in this line only).....▶

0.00

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