Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	i on 2012	0415			Repoi Filed		CAND	IDATE		СОМІ	MITTEE	\checkmark	LOB	BYIST	
	Committee, Candid	ate or Lo	obbyist:			-	E DAN MIL	LER							
Street Address: PO BOX 13421															
City:	PITTSBURGH						State: PA Zip Code: 15					5243			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIN	DAY 1ARY	POST-	3.		AMENDI REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	E- 5.		30 DAY POST- 6. ELECTION			TERMINATION Ye REPORT?			No	\checkmark	
report type)	ANNUAL REPORT	7. X	Year 2020				ING METH				PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Candidat	te:					DATE C	OF ELE	СТІО	N	District Number		Par	ty Code	County Code
							мо	DAY	YE	AR			DEN	1	
								-	3	2020]	(SEE IN	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	YE	AR	FC	OR OFFIC	CE USE	ONLY	
Expenditures	s from:	1	24	2	020	ГО	12	2 3	31	2020					
A. Amount Bro	ught Forward Fron	n Last R	eport			9	\$	-	119,8	865.79					
B. Total Monet	ary Contributions	And Reco	eipts (Fron	n Sche	dule I)		\$ 0.00								
C. Total Funds	Available (Sum Of	Lines A	and B)				\$:	119,8	865.79					
D. Total Expen	ditures (From Sche	edule III	[)				\$		4	88.39					
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$	1	L19,3	77.40					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)		\$			5.20					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	/)			\$			0.00					
				AFF	IDAV	IT S	ECTION								
	s a Committee repo		-					• •							
I swear (or affirm correct and compl) that this report, incl ete.	uding the	attached sc	hedule	s filed or	i pape	r or by elect	tronic me	edium	, are to i	the best o	of my knov	wledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	5	20			_			s	ignature	e of Perso	on Submitt	ting Rep	oort	
	Signatu	re				_					Prir	nted Name	9		
My Commission E	xpires										Ema	ail			
	МО	DA	AY	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee, (Candi	date shall	sign he	ere.						
I swear (or affirm) No 320) as amendo	that to the best of ned.	ny knowle	dge and beli	ief this	politica	com	mittee has r	not violat	ted an	y provis	ions of th	e act of Ju	une 3,1	937 (P.L	. 1333,
Sworn to and subso	ribed before me this day of		20							s	ignature	of Candida	ate		
						_					Printe	ed Name			
My Commission Exp	Signature										Ema	ail			
	мо	D/	AY	YR	1	_		Area	Code		D	aytime To	elephor	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page	E			
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF DAN MILLER	<u>11/24/202</u>	<u>.0</u> То:	<u>12/31/2020</u>	
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	0.00
2. Contributions Received - \$50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			•	
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate				Reporting Period					
				From: To:					
		·			DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	4)						
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00	

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)										
Name of Filing Committee or Candida	te		Rep	orting P m:	eriod	Τα	<u>.</u>			
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address		_					\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	0.00		

PART C Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting Period						
				:: To:					
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00
Mailing Address] *	(0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	L
Enter Grand Total of Part C on Schedule I, Detailed Summary Pa				n 3.			\$	0.	.00

PART D ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate				Reporting Period					
Fro					From:				
				D	ATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00	

PART E **OTHER RECEIPTS**

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC. Use this Part to report refunds received, interest earned, returned checks and

prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate			Reporting Period						
			From: To:						
				C	ATE			AMOUNT	ſ
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description							1		
			- ··					PAGE TO	TAL
Enter Grand Total of Part E or	n Schedule I, Detailed	Summary Page,	Section	4.			\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
FRIENDS OF DAN MILLER	From:	<u>11/24/2020</u> то:	<u>12/31/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	5.20
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	5.20

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re			Reporting Period					
F						То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				porting I	Period	Reporting Period					
						То:					
					DATE		AMOUNT				
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$ 0.00				
City	State	Zip Code(Plus 4)									
Employer of Contributor		•		Occupa	ation						
Employer Mailing Address/Principal Place of Business City				e Zip	Code(Plus 4)	Descri	ption of Contribution				
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	ed			PAGE TOTAL 0.00				

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Can	didate	Name of Filing Committee or Candidate			Reporting Period						
FRIENDS OF DAN MILLER			From	<u>11/24</u>	<u>4/2020</u>	То:	<u>12/31/2020</u>				
				AMOUNT							
To Whom Paid			мо	DAY	YEAR						
ACT BLUE/VANTIV											
Mailing Address PO BOX 4411	46		12 9 202			\$	0.50				
City WEST SOMERVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
	MA	021440031	ECOMM	ERCE CHA	RGE						
To Whom Paid DAN MILLER	мо	DAY	YEAR								
Mailing Address 467 LONGRIDGE DR				21	2020	\$	399.98				
City PITTSBURGH State Zip Code (Plus 4)				tion of Exp	enditure						
	PA	152432049	CAMPAI	IGN WEBSI	TE SSL						
To Whom Paid			мо	DAY	YEAR						
PNC BANK											
Mailing Address 620 WASHING	GTON RD		12	9	2020	\$	11.91				
City MT LEBANON	State	Zip Code (Plus 4)) Description of Expenditure								
	PA	152281916	BANKC	ARD MERCI	HANT FE	E					
To Whom Paid UNITED STATES POST OFFICE			мо	DAY	YEAR						
Mailing Address 1099 BOWER	HILL RD		12	1	2020	\$	76.00				
City PITTSBURGH	State	Zip Code (Plus 4)	Zip Code (Plus 4) Description of Expenditur								
PA 152431333			PO BOX	COST							
							PAGE TOTAL				
Enter Grand Total of Expendit	ures on Page 1, Repo	ort Cover Page, Item D).			\$	488.39				