# **Campaign Finance Report**

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

Filer Identification 2024C0430 Report CAI   Number : Filed By : Filed By : CAI							CANDI	DATE	✓	СС	OMMITTEE		LOBE	BYIST					
Name of Filing C	Committee, Candida	ate or Lo	obbyist:		DAN MI	-													
Street Address:																			
City:							State:				Zip Cod	<b>e:</b> 15	243						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA PRIM		POST-	3.		AMENDMENT REPORT?		Yes	No	$\checkmark$				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE-	5.	30 DA		POST- 6. <b>X</b>		TERMINATION REPORT?		Yes	No	$\checkmark$					
report type)	ANNUAL REPORT	7.	<b>Year</b> 2024				NG METHO				PAPER		$\checkmark$	DISKE	TTE				
Name of Office S	Sought by Candidat	te:					DATE O	F ELEC	CTION		District Number	Office Code	Par	ty Code	County Code				
							мо	DAY	YEA	R	42	STH	DEN	1					
REPRESENTATI	VE IN THE GENER	AL ASSI	EMBLI				11		5	2024		(SEE INS	TRUCTIO	ONS FOR	CODES)				
	Receipts and	мо	DAY	YEAR			мо	DAY	YEA	R	FOF	R OFFIC	E USE	ONLY					
Expenditures	s from:	1	.0 22	20	24 <b>T</b>	0	11	2	25	2024									
A. Amount Bro	ught Forward Fron	n Last R	eport			\$				0.00									
B. Total Monet	ary Contributions A	And Reco	eipts (From	Sched	ule I)	\$				0.00									
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				0.00									
D. Total Expen	ditures (From Sche	edule II	[)			\$				0.00									
E. Ending Cash	Balance (Subtract	Line D	From Line (	C)		\$				0.00	-								
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedule	e II)	\$				0.00	-								
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	)		\$				0.00									
				AFFI	DAVI	T SE	CTION												
	s a Committee repo		-					• •			-				- 6 . have -				
correct and comple	) that this report, incl ete.	uding the	attached sci	nedules	filed on	paper	or by elect	ronic me	edium, a	re to 1	the best of	ту кпом	leage	and bell	ef , true				
Sworn to and subs	cribed before me this day of	•	20						Sig	nature	e of Person	Submitt	ing Rep	ort					
	Signatu	re				_					Printe	ed Name							
My Commission Ex	xpires					_					Email								
	мо	DA	NY	YR				Are	a Code		Daytime	e Telepho	one Nu	mber					
	a report of a cand				•			-			ione of the	n at of lu	- 2 1	27 (81	1222				
No 320) as amende		ly knowle	uge and ben	er uns p	Junitar	comm	ittee nas n		eu any	provis			ine 5,1:	937 (P.L	. 1333,				
Sworn to and subso	ribed before me this day of		20					Signature of Candidate											
						-					Printed	Name							
My Commission Exp	Signature bires					-					Email								
	мо	DA	AY.	YR		-		Area	Code		Day	ytime Te	lephon	e Numb	er				

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** DAN MILLER From: <u>10/22/2024</u> **To:** 11/25/2024 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting 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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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 Candidate Reporting Period										
			From: To			): 				
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address	_	_					\$	0.00		
City	State	Zip Code (Plus 4	k)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 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						
				То:					
				DA	TE		ŀ	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							<b>-</b>   \$	0.00	
City	State	Zip Cod	e (Plus 4)						
					PAGE TOTAL				
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							\$	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						
From:				m:			То:			
				D	ATE	IOUNT				
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 Schedule I, Detailed Summary Page, Section							P#	<b>AGE TOTAL</b> 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:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (	Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary 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	
DAN MILLER	From:	<u>10/22/2024</u> <b>To:</b>	<u>11/25/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
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		\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R			Reporting Period					
				From:			То:	
	DATE			AMOUNT				
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detai Section 2.				ailed Summary Page,			PAGE TOTAL	
						\$		0.00

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

Name of Filing Committee or Candidate				Reporting Period						
				From:						
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address			-				<b>\$</b> 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 Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						<b>PAGE TOTAL</b> 0.00				

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
				From							
		DATE		AMOUNT							
To Whom Paid	мо	DAY	YEAR								
Mailing Address						\$	0.00				
City	Zip Code (Plus 4)	) Description of Expenditure									
Enter Crand Tatal of Evnanditures					PAGE TOTAL						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	0.00				