

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

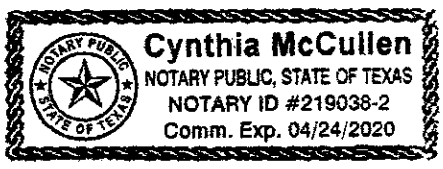
FORM C/OH
COVER SHEET PG 2

14 C/OH NAME <u>Melisa Miller</u>	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>22,270</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>18,249</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>27,836.42</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>15,000</u>

18 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Melisa Miller
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Melisa Miller, this the 4th day of JANUARY, 2018, to certify which, witness my hand and seal of office.

Cynthia McCullen
Signature of officer administering oath

Cynthia McCullen
Printed name of officer administering oath

Notary Public
Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>Melisa Miller</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 17,470
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 4,800
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 15,000
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 18,249
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 1 of 16
2 FILER NAME Melisa Miller		3 Filer ID (Ethics Commission Filers)
4 Date 7-3-17	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) A-1 Bail Bonds Mari van de Ven	7 Amount of contribution (\$) 500.00
6 Contributor address; City; State; Zip Code 97 Criminal Justice Dr. Conroe TX 77301		
8 Principal occupation / Job title (See Instructions) Bail bondsman		9 Employer (See Instructions) A-1 Bail Bonds
Date 7-10-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sylvia / Edward Olszowy	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 12898 Pelican Blvd. Willis TX 77318		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 7-31-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joey Ashton	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 410 Moonwalk St. Montgomery TX 77356		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Red Onion
Date 8-3-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly Lester	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 2771 Hidden Spring Falls Dr. Spring TX 77386		
Principal occupation / Job title (See Instructions) legal assistant		Employer (See Instructions) District Attorney
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 2 of 16

2 FILER NAME Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 Date 9-8-17

5 Full name of contributor out-of-state PAC (ID#: _____)
Charles Melancon

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
19 Swallow Tail Ct. The Woodlands TX 77381

100⁰⁰

8 Principal occupation / Job title (See Instructions)
Home Maker

9 Employer (See Instructions)

Date 9-11-17

Full name of contributor out-of-state PAC (ID#: _____)
Matt Farris

Amount of contribution (\$)

Contributor address; City; State; Zip Code
PO Box 2135 Leander TX TX 646

1500⁰⁰

Principal occupation / Job title (See Instructions)
owner

Employer (See Instructions)

Date 9-11-17

Full name of contributor out-of-state PAC (ID#: _____)
Dawn Becker

Amount of contribution (\$)

Contributor address; City; State; Zip Code
28906 Stapleford St. Spring TX 77386

50⁰⁰

Principal occupation / Job title (See Instructions)
IT Specialist

Employer (See Instructions)

Date 9-14-17

Full name of contributor out-of-state PAC (ID#: _____)
Cynthia McCullen

Amount of contribution (\$)

Contributor address; City; State; Zip Code
18024 Hill Rd Cleveland TX 77328

140.⁰⁰

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 3 of 16

2 FILER NAME Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 Date 9-14-17

5 Full name of contributor out-of-state PAC (ID#: _____)
Donna Bailey

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
108 Shadylyn Dr. Conroe TX 77304

55⁰⁰
~~25~~

8 Principal occupation / Job title (See Instructions)
Deputy Clerk

9 Employer (See Instructions)

Date 9-14-17

Full name of contributor out-of-state PAC (ID#: _____)
Mary Ostrom

Amount of contribution (\$)

Contributor address; City; State; Zip Code
2227 Valley View Conroe TX 77304

100⁰⁰

Principal occupation / Job title (See Instructions)
Legal assistant

Employer (See Instructions)

Date 9-14-17

Full name of contributor out-of-state PAC (ID#: _____)
Byron Bevers Campaign

Amount of contribution (\$)

Contributor address; City; State; Zip Code
18727 Tuscomy Woods Sherwood TX 77381

100⁰⁰

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)

Date 9-14-17

Full name of contributor out-of-state PAC (ID#: _____)
Bobbye Miller

Amount of contribution (\$)

Contributor address; City; State; Zip Code
18635 Walding Rd Montgomery TX 77356

125⁰⁰

Principal occupation / Job title (See Instructions)
Anchor Boatlift Owner

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 4 of 16

2 FILER NAME

Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 Date

9-14-17

5 Full name of contributor

Connie Whitton

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

25.00

6 Contributor address;

City; State; Zip Code

13303 Southshore Dr. Conroe TX 77304

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Date

9-15-17

Full name of contributor

Virginia Collins

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

110.00

Contributor address;

City; State; Zip Code

4192 Pamela Way Montgomery TX 77316

Principal occupation / Job title (See Instructions)

Admin Assistant

Employer (See Instructions)

Date

9-19-17

Full name of contributor

Freddie Brooks Jr.

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

825.00

Contributor address;

City; State; Zip Code

284 Jeff Cote Rd Conroe TX 77303

Principal occupation / Job title (See Instructions)

Gas Consultant

Employer (See Instructions)

Date

9-12-17

Full name of contributor

Gary Adams

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

100.00

Contributor address;

City; State; Zip Code

99 N. New Wood Ct The Woodlands TX 77381

Principal occupation / Job title (See Instructions)

Business Professional

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 16
2 FILER NAME Melisa Miller		3 Filer ID (Ethics Commission Filers)
4 Date 9-15-17	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearl Maggio	7 Amount of contribution (\$) 50⁰⁰
6 Contributor address; City; State; Zip Code 65 Dylanshire Comm TX 77384		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 9-14-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melanie Bush Campaign	Amount of contribution (\$) 25⁰⁰
Contributor address; City; State; Zip Code 25227 Crogan's Mill Rd Suite 220 The Woodlands 77380		
Principal occupation / Job title (See Instructions) School District		Employer (See Instructions)
Date 9-14-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Yollick	Amount of contribution (\$) # 1,025⁰⁰
Contributor address; City; State; Zip Code PO Box 7571 The Woodlands TX 77387		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions)
Date 9-14-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell Henderson	Amount of contribution (\$) 275⁰⁰
Contributor address; City; State; Zip Code 330 Forest Ln Huntsville TX 77340		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 6 of 16

2 FILER NAME

Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 Date

9-14-17

5 Full name of contributor

Emily De Jure

out-of-state PAC (ID#: _____)

6 Contributor address;

City; State; Zip Code

8463 Buffalo Cr Willis TX 77376

7 Amount of contribution (\$)

50⁰⁰

8 Principal occupation / Job title (See Instructions)

School Teacher

9 Employer (See Instructions)

Date

9-16-17

Full name of contributor

David/Helen Vandergriff

out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

1415 Kennaway Park Spring TX 77379

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Owner

Employer (See Instructions)

Date

9-14-17

Full name of contributor

Stephanie Hall

out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

702 Oak Ridge Grove Spring TX 77386

Amount of contribution (\$)

250⁰⁰

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Date

9-14-17

Full name of contributor

Raymond Weddall

out-of-state PAC (ID#: _____)

Contributor address;

City; State; Zip Code

65 Fairfield Dr. Montgomery TX 77356

Amount of contribution (\$)

25⁰⁰

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 7 of 16

2 FILER NAME

Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 Date

9-14-17

5 Full name of contributor out-of-state PAC (ID#: _____)

Gregory Parker

6 Contributor address; City; State; Zip Code

2206 Oak Rise Dr. Conroe TX 77304

7 Amount of contribution (\$)

250⁰⁰

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

9-13-17

Full name of contributor out-of-state PAC (ID#: _____)

Jim Gentry

Contributor address; City; State; Zip Code

P.O. Box 2177 Conroe TX 77305

Amount of contribution (\$)

250⁰⁰

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

9-14-17

Full name of contributor out-of-state PAC (ID#: _____)

ASAP Bail Bonds

Contributor address; City; State; Zip Code

102 Pine St. Conroe TX 77301

Amount of contribution (\$)

250⁰⁰

Principal occupation / Job title (See Instructions)

Bail Bonds

Employer (See Instructions)

Date

9-22-17

Full name of contributor out-of-state PAC (ID#: _____)

Samuel Cuminy Jr.

Contributor address; City; State; Zip Code

100 J-45 N. #100 Conroe TX 77301

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 8 of 16

2 FILER NAME

Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 Date

9-14-17

5 Full name of contributor

Renell Pedigo DBA Bail Bonds

out-of-state PAC (ID#: _____)

6 Contributor address;

2210 N. Frasier #230 Conroe TX 77383

City; State; Zip Code

7 Amount of contribution (\$)

100⁰⁰

8 Principal occupation / Job title (See Instructions)

Bail Bond

9 Employer (See Instructions)

Date

9-20-17

Full name of contributor

Toby Powell

out-of-state PAC (ID#: _____)

Contributor address;

2501 Angela Fayek Way Conroe TX 77384

City; State; Zip Code

Amount of contribution (\$)

200⁰⁰

Principal occupation / Job title (See Instructions)

Conroe Mayor

Employer (See Instructions)

Date

9-19-17

Full name of contributor

Julie Faubel

out-of-state PAC (ID#: _____)

Contributor address;

3110 Guffcrest Dr Montgomery TX 77356

City; State; Zip Code

Amount of contribution (\$)

100⁰⁰

Principal occupation / Job title (See Instructions)

Home Maker

Employer (See Instructions)

Date

9-14-17

Full name of contributor

Kelli Cook

out-of-state PAC (ID#: _____)

Contributor address;

14218 FM 1097W Willis TX 77378

City; State; Zip Code

Amount of contribution (\$)

50⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 9 of 16

2 FILER NAME Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 Date 9-14-17

5 Full name of contributor out-of-state PAC (ID#: _____)
Gary/Julie Christenbury

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
15942 Tree Mankey Conroe TX 77303

50⁰⁰

8 Principal occupation / Job title (See Instructions)
Police Officer

9 Employer (See Instructions)

Date 9-14-17

Full name of contributor out-of-state PAC (ID#: _____)
Mark Femea & Erin Femea

Amount of contribution (\$)

Contributor address; City; State; Zip Code

40⁰⁰

Principal occupation / Job title (See Instructions)
Legal Assistant

Employer (See Instructions)

Date 9-14-17

Full name of contributor out-of-state PAC (ID#: _____)
Meradith ~~Pruney~~ Prunaway

Amount of contribution (\$)

Contributor address; City; State; Zip Code
25 Prairie Conroe TX 77301

65⁰⁰

Principal occupation / Job title (See Instructions)
Surg Shepard

Employer (See Instructions)

Date 9-14-17

Full name of contributor out-of-state PAC (ID#: _____)
Cindi Brown

Amount of contribution (\$)

Contributor address; City; State; Zip Code
30 N. Bantam Woods The Woodlands TX 77382

60⁰⁰

Principal occupation / Job title (See Instructions)
Community Volunteer

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 10 of 16

2 FILER NAME Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 Date 9-14-17

5 Full name of contributor out-of-state PAC (ID#: _____)
Melanie Bush

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
25222 Grogans Mill Suite 200 77380

50⁰⁰

8 Principal occupation / Job title (See Instructions)
School District

9 Employer (See Instructions)

Date 9-14-17

Full name of contributor out-of-state PAC (ID#: _____)
Donna Walters

Amount of contribution (\$)

Contributor address; City; State; Zip Code

60⁰⁰

Principal occupation / Job title (See Instructions)
Deputy Clerk

Employer (See Instructions)

Date 9-26-17

Full name of contributor out-of-state PAC (ID#: _____)
Karen Darcy

Amount of contribution (\$)

Contributor address; City; State; Zip Code

577 Edgewood Dr. Montgomery TX 77556

40⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 9-26-17

Full name of contributor out-of-state PAC (ID#: _____)
Sylvia Oszowy

Amount of contribution (\$)

Contributor address; City; State; Zip Code

12898 Pelican Blvd. Willis TX 77318

150⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 11 of 16

2 FILER NAME Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 Date 9-26-17

5 Full name of contributor out-of-state PAC (ID#: _____)
Gary Frederick / Martha Kate

7 Amount of contribution (\$) 25⁰⁰

6 Contributor address; City; State; Zip Code
585 Edgewood Dr. Montgomery TX 77356

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)

Date 9-26-17

Full name of contributor out-of-state PAC (ID#: _____)
Jeffery Cannon

Amount of contribution (\$) 150⁰⁰

Contributor address; City; State; Zip Code
4315 Wickham Dr. Fulshear TX 77441

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)

Date 10-14-17

Full name of contributor out-of-state PAC (ID#: _____)
Janell Volke

Amount of contribution (\$) 100⁰⁰

Contributor address; City; State; Zip Code
10 Golden Sunset Circle The Woodlands TX 77381

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 10-19-17

Full name of contributor out-of-state PAC (ID#: _____)
Randal Bays

Amount of contribution (\$) 100⁰⁰

Contributor address; City; State; Zip Code
11991 White Oak Patch Conroe TX 77385

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **12 of 16**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 Date
10-19-17
~~9-26-17~~

5 Full name of contributor out-of-state PAC (ID#: _____)
Kimberly Bailey

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
38 Tender Violet Pl The Woodlands TX 77381

50⁰⁰

8 Principal occupation / Job title (See Instructions)
Home Maker

9 Employer (See Instructions)

Date
10-20-17

Full name of contributor out-of-state PAC (ID#: _____)
Michael Valdez Attorney At Law

Amount of contribution (\$)

Contributor address; City; State; Zip Code
P.O. Box 2863 Conroe TX 77305

1000⁰⁰

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)

Date
10-20-17

Full name of contributor out-of-state PAC (ID#: _____)
Philip Bullock Jr

Amount of contribution (\$)

Contributor address; City; State; Zip Code
118 E. 23rd St. Houston TX 77008

250⁰⁰

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)

Date
11-6-17

Full name of contributor out-of-state PAC (ID#: _____)
Mary Osborn

Amount of contribution (\$)

Contributor address; City; State; Zip Code
2227 Valley View Crossing Conroe TX 77304

200⁰⁰

Principal occupation / Job title (See Instructions)
Legal Assistant

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **13 of 16**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 Date **11-6-17**
 5 Full name of contributor out-of-state PAC (ID#: _____)
Susan Stockholm
 6 Contributor address; City; State; Zip Code
19 Deer lake Ct. The Woodlands TX 77381

7 Amount of contribution (\$)
250⁰⁰

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)

Date **11-14-17**
 Full name of contributor out-of-state PAC (ID#: _____)
Carol Welch
 Contributor address; City; State; Zip Code
14058 Tower Glen Ln

Amount of contribution (\$)
200⁰⁰

Principal occupation / Job title (See Instructions)
Retired

Employer (See Instructions)

Date **11-14-17**
 Full name of contributor out-of-state PAC (ID#: _____)
Melissa Wickham
 Contributor address; City; State; Zip Code
14520 Millmac Rel. Conroe TX 77303

Amount of contribution (\$)
20⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)
Agua Pure

Date **11-14-17**
 Full name of contributor out-of-state PAC (ID#: _____)
Dan Zientek
 Contributor address; City; State; Zip Code
47 Wind River Dr. Conroe TX 77384

Amount of contribution (\$)
400⁰⁰

Principal occupation / Job title (See Instructions)
mcco Ret. #4

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **14816**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 Date **11-14-17**

5 Full name of contributor out-of-state PAC (ID#: _____)
Marsha Duff

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
4531 Duval Ln Cleveland TX 77328

20⁰⁰

8 Principal occupation / Job title (See Instructions)
Retired

9 Employer (See Instructions)

Date **11-14-17**

Full name of contributor out-of-state PAC (ID#: _____)
Jack Wise

Amount of contribution (\$)

Contributor address; City; State; Zip Code
P.O. Box 2297 Spring TX 77383

25⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date **11-14-17**

Full name of contributor out-of-state PAC (ID#: _____)
Larry-Kathy Miller

Amount of contribution (\$)

Contributor address; City; State; Zip Code
18502 Grimes Rd Cleveland TX 77328

100⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Owner

Date **12-12-17**

Full name of contributor out-of-state PAC (ID#: _____)
George Randy Council

Amount of contribution (\$)

Contributor address; City; State; Zip Code
2555 Half Hollow St. Conroe TX 77304

3000⁰⁰

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Tele. services Owner

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: **5 of 16**

2 FILER NAME

Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 Date

12-13-17

5 Full name of contributor

Cathy Ansley

out-of-state PAC (ID#: _____)

7 Amount of contribution (\$)

100⁰⁰

6 Contributor address;

City; State; Zip Code

31202 Columbia Ct. Tomball 77375

8 Principal occupation / Job title (See Instructions)

Mont. County Clerk's office

9 Employer (See Instructions)

Date

12-19-17

Full name of contributor

Kevin Strickland

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

200⁰⁰

Contributor address;

City; State; Zip Code

12100 Maverick Willis TX 77378

Principal occupation / Job title (See Instructions)

General Manager Astro Fence

Employer (See Instructions)

Date

12-15-17

Full name of contributor

Duane T. Corley

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

3000⁰⁰

Contributor address;

City; State; Zip Code

208 W. Davis Conroe, TX 77301

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Date

12-22-17

Full name of contributor

Anna Dyson

out-of-state PAC (ID#: _____)

Amount of contribution (\$)

50⁰⁰

Contributor address;

City; State; Zip Code

13216 Captain Circle Willis TX 77318

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 16 of 16

2 FILER NAME Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 Date
12-27-17

5 Full name of contributor out-of-state PAC (ID#: _____)
Bustin' Out Bail Bonds Alexis Van de Ven

7 Amount of contribution (\$)

6 Contributor address; City; State; Zip Code
107 Cartwright Rd Conroe TX. 77301

500⁰⁰

8 Principal occupation / Job title (See Instructions)
Bond

9 Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
if contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **1 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date

6 Full name of contributor out-of-state PAC (ID#: _____)

8 Amount of Contribution \$

9 In-kind contribution description

9-14-17

Dean Towery

7 Contributor address; City; State; Zip Code

10907 Waterview Circle Montgomery TX 77356

Autograph football

400⁰⁰

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Retired

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of Contribution \$

In-kind contribution description

9-14-17

Kathleen Towery

Contributor address; City; State; Zip Code

10907 Waterview Cir Mont. TX 77356

Country Music Basket autographed

150⁰⁰

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Retired

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 2 of 18	
2 FILER NAME Melisa Miller		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 9-14-17	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean Towery	8 Amount of Contribution \$ 200⁰⁰	9 In-kind contribution description Arian Foster autographed helmet
7 Contributor address; City; State; Zip Code 10907 Waterview Cr. Mont. TX. 77356		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 9-14-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean Towery	Amount of Contribution \$ 300⁰⁰	In-kind contribution description 40" Elm. wall hanging fireplace
Contributor address; City; State; Zip Code 10907 Waterview Cr. Mont. TX. 77356		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **3 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

6 Full name of contributor out-of-state PAC (ID#: _____)

8 Amount of Contribution \$

9 In-kind contribution description

9-14-17

Kathleen Towery

200⁰⁰

**wine basket w/ glasses
Neal McCoy
George Strait**

7 Contributor address; City; State; Zip Code

10907 Waterman C. Mont. TX 77356

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Retired

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of Contribution \$

In-kind contribution description

9-14-17

Kathleen Towery

200⁰⁰

**Fishing Basket w/
Red, Reel, Tackle Box**

Contributor address; City; State; Zip Code

10907 Waterman C. Mont. Tx. 77356

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Retired

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **4 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date 9-14-17	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathleen Towery	8 Amount of Contribution \$ 270⁰⁰	9 In-kind contribution description Texas wine glasses, holder, bottle & Miller
7 Contributor address; City; State; Zip Code 10907 Waterview C. Montgomery TX 77356		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired	11 Employer (FOR NON-JUDICIAL) (See Instructions)
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title (FOR JUDICIAL) (See Instructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

Date 9-14-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathleen Towery	Amount of Contribution \$ 125⁰⁰	In-kind contribution description 2 Texas flag pillows w/ TX Goodie basket
Contributor address; City; State; Zip Code 10907 Waterview C. Montgomery TX 77356		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired	Employer (FOR NON-JUDICIAL) (See Instructions)
Contributor's principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)
Contributor's employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **5 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date **9-14-17**

6 Full name of contributor out-of-state PAC (ID#: _____)
Kathleen Tawney
 7 Contributor address; City; State; Zip Code
10907 Waterview Cr. Montgomery TX 77356

8 Amount of Contribution \$ **500** 9 In-kind contribution description
Crown royal collection w/ Blanket
 Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)
Retired

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date **9-14-17**

Full name of contributor out-of-state PAC (ID#: _____)
Brandie Lopez
 Contributor address; City; State; Zip Code
PO Box 1369 New Waverly TX 77358

Amount of Contribution \$ **700** in-kind contribution description
TX longhorn deer Mat
 Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)
Court Administrator

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 6 of 18	
2 FILER NAME <i>Melisa Miller</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>9-14-17</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Brandie Lopez</i>	8 Amount of Contribution \$ <i>70⁰⁰</i>	9 In-kind contribution description <i>AGM door Mat</i>
7 Contributor address; City; State; Zip Code <i>PO Box 1369 New Waverly TX 77558</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Court Administrator</i>		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date <i>9-14-17</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Brandi Hebert</i>	Amount of Contribution \$ <i>40⁰⁰</i>	In-kind contribution description <i>Gift cards to Polished in Montgomery</i>
Contributor address; City; State; Zip Code <i>10739 N. Lake Rd Montgomery TX. 77316</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>COA OSC</i>		Employer (FOR NON-JUDICIAL) (See Instructions) <i>Berkeley eye Center</i>	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **7 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

6 Full name of contributor out-of-state PAC (ID#: _____)

8 Amount of Contribution \$

9 In-kind contribution description

9-14-17

Debra & Bill Dausette
 7 Contributor address; City; State; Zip Code
165 Allen Rd. Huntsville TX. 77300

200⁰⁰

Zac Brown tickets w/ CD & gift cart. to cheese cake factory

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Walker County Commissioner

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of Contribution \$

In-kind contribution description

9-14-17

Debra & Bill Dausette
 Contributor address; City; State; Zip Code
165 Allen Rd. Huntsville TX 77300

100⁰⁰

Jeff Bagwell Bobblehead

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **8 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

6 Full name of contributor out-of-state PAC (ID#: _____)

8 Amount of Contribution \$

9 In-kind contribution description

9-14-17

Brandi Hebert

400

**Elegant Nails
Gift Card**

7 Contributor address; City; State; Zip Code

10739 N. Lake Rd. Montgomery TX 77316

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

COA, OSC Berkeley

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of Contribution \$

In-kind contribution description

9-14-17

Thomas Mileski

200⁰⁰

Hall Tree

Contributor address; City; State; Zip Code

10616 Champion Forest Loop Conroe TX 77303

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

owner Gutters by Mileski

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **9 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date

6 Full name of contributor out-of-state PAC (ID#: _____)

8 Amount of Contribution \$

9 In-kind contribution description

9-14-17

Thomas Mileski

350.00

Cedar Branch

7 Contributor address; City; State; Zip Code

10616 Champion Forest Loop Conroe TX 77303

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Owner Sealing Gutters by Mileski

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of Contribution \$

In-kind contribution description

9-14-17

Thomas Mileski

245.00

**TX flag hidden
Gun Frame**

Contributor address; City; State; Zip Code

10616 Champion Forest Loop Conroe TX 77303

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Owner Sealing Gutters by Mileski

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 10 of 18	
2 FILER NAME Melisa Miller		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 9-14-17	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas Mileski	8 Amount of Contribution \$ 120⁰⁰	9 In-kind contribution description large wooden Star
7 Contributor address; City; State; Zip Code 10616 Champion Forest Loop Conroe TX 77385		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Owner Samson Gutter by Mileski		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 9-14-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlie Heir	Amount of Contribution \$ 20⁰⁰	In-kind contribution description 3 Pack LED head lamps
Contributor address; City; State; Zip Code 15394 Cedar Circle Conroe TX 77302		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **11 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

6 Full name of contributor out-of-state PAC (ID#: _____)

8 Amount of Contribution \$

9 In-kind contribution description

9-14-17

Diane Hurv

60⁰⁰

urban rock teal bracelets & necklace w/ scarf

7 Contributor address; City; State; Zip Code

15394 Cedar Circle Conroe TX 77302

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Retired

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of Contribution \$

In-kind contribution description

9-14-17

Sarah ~~Fartough~~ Farlono

50⁰⁰

Texas flag bottle opener Texas coasters & 6 pack

Contributor address; City; State; Zip Code

47 Stone Creek Pl The Woodlands TX 77382

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Deputy Clerk

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **12 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date **9-14-17**

6 Full name of contributor out-of-state PAC (ID#: _____)
Ellen Blalock

8 Amount of Contribution \$ **25⁰⁰**

9 In-kind contribution description
**red, white & blue
Afghan**

7 Contributor address; City; State; Zip Code
PO Box 1892 Conroe TX. 77305

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)
Retired

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date **9-14-17**

Full name of contributor out-of-state PAC (ID#: _____)
Panorama Golf Club

Amount of Contribution \$ **200⁰⁰**

In-kind contribution description
**Round of Golf
for (4)**

Contributor address; City; State; Zip Code
73 Greenbriar Dr. Conroe TX 77384

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)
Golf Course

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 13 of 18	
2 FILER NAME <i>Melisa Miller</i>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <i>9-14-17</i>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>West Fork Golf Club</i>	8 Amount of Contribution \$ <i>150.00</i>	9 In-kind contribution description <i>Round of Golf for (4)</i>
7 Contributor address; City; State; Zip Code <i>#1 Golf Ridge, Conroe, TX 77304</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Golf Course</i>		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <i>9-14-17</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dean Towery</i>	Amount of Contribution \$ <i>80.00</i>	In-kind contribution description <i>two Melisa Miller Campaign Mugs</i>
Contributor address; City; State; Zip Code <i>10907 Waterview Cr. Montgomery TX 77556</i>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) <i>Retired</i>		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 14 of 18

2 FILER NAME Melisa Miller

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date

6 Full name of contributor out-of-state PAC (ID#: _____)

8 Amount of Contribution \$

9 In-kind contribution description

9-14-17

Joey Ashton Red Onion Company
7 Contributor address; City; State; Zip Code

150⁰⁰

Cater for 15

330 N. Main St. Conroe TX. 77301

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Owner Red Onion Company

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Amount of Contribution \$

In-kind contribution description

9-14-17

Joey Ashton Red Onion Company
Contributor address; City; State; Zip Code

300⁰⁰

Cater for 30

330 N. Main St. Conroe TX. 77301

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Owner Red Onion Company

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 15 of 18	
2 FILER NAME Melisa Miller		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 9-14-17	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melisa Miller Campaign 7 Contributor address; City; State; Zip Code 18319 Grinnon Rd Cleveland TX, 77328	8 Amount of Contribution \$ 9500	9 In-kind contribution description Silver & Turquoise necklace w/ earrings <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) County Clerk		11 Employer (FOR NON-JUDICIAL) (See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date 9-14-17	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diane Havi Contributor address; City; State; Zip Code 15324 Cedar Circle Conroe TX, 77362	Amount of Contribution \$ 2500	In-kind contribution description Tulle Wreath <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions) Retired		Employer (FOR NON-JUDICIAL) (See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **16 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date **9-14-17**

6 Full name of contributor out-of-state PAC (ID#: _____)
Diane Hair
 7 Contributor address; City; State; Zip Code
15394 Cedar Circle Conroe TX 77382

8 Amount of Contribution \$ **40⁰⁰** 9 In-kind contribution description
Gardner Basket
 Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)
Retired

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date **9-14-17**

Full name of contributor out-of-state PAC (ID#: _____)
Diane Hair
 Contributor address; City; State; Zip Code
15394 Cedar Circle Conroe TX 77382

Amount of Contribution \$ **75⁰⁰** In-kind contribution description
Chain Beaded necklace w/ Earrings
 Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)
Retired

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **17 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date **9-14-17**
 6 Full name of contributor out-of-state PAC (ID#: _____)
Diane Hair
 7 Contributor address; City; State; Zip Code
15394 Cedar Circle Conroe TX 77302

8 Amount of Contribution \$ **25.00**
 9 In-kind contribution description
White Sheet Cake
 Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)
Retired

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date **9-14-17**
 Full name of contributor out-of-state PAC (ID#: _____)
Diane Hair
 Contributor address; City; State; Zip Code
15394 Cedar Circle Conroe TX 77302

Amount of Contribution \$ **25.00**
 In-kind contribution description
2 layered white cake w/white filling
 Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)
Retired

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: **18 of 18**

2 FILER NAME **Melisa Miller**

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS \$

5 Date
9-14-17

6 Full name of contributor out-of-state PAC (ID#: _____)
Brandon Guance
7 Contributor address; City; State; Zip Code
18044 Hill Rd Cleveland TX 77328

8 Amount of Contribution \$ **150⁰⁰** 9 In-kind contribution description
**grilling set w/apron
Sawer & Marinade**
 Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)
Owner BSD LLC

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

Full name of contributor out-of-state PAC (ID#: _____)
Contributor address; City; State; Zip Code

Amount of Contribution \$ In-kind contribution description

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 8	2 FILER NAME Melisa Miller	3 Filer ID (Ethics Commission Filers)
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4 Date 7-7-17	5 Payee name Montgomery County Republican Women
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6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code PO. Box 1766 Conroe, TX 77305
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 7-13-17	Payee name North Shore Republican Womens
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Amount (\$) 200.00	Payee address; City; State; Zip Code P.O. Box 524 Willis TX 77378
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Contribution	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 7-13-17	Payee name Montgomery County Young Republican
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Amount (\$) 500.00	Payee address; City; State; Zip Code P.O. Box 2733 Conroe, TX, 77305
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 of 8	2 FILER NAME Melisa Miller	3 Filer ID (Ethics Commission Filers)
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4 Date 8-3-2017	5 Payee name Media Genics
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6 Amount (\$) \$1600.00	7 Payee address; City; State; Zip Code P.O. Box 8122 Huntsville, TX 77340
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8-16-2017	Payee name Post Master
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Amount (\$) 94.00	Payee address; City; State; Zip Code 809 W. Dallas St. Conroe TX 77301
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 8-22-2017	Payee name Post Master
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Amount (\$) 392.00	Payee address; City; State; Zip Code 809 W. Dallas St. Conroe TX 77301
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3 of 8		2 FILER NAME Melisa Miller		3 Filer ID (Ethics Commission Filers)	
4 Date 9-1-2017		5 Payee name City of Conroe			
6 Amount (\$) 75.00		7 Payee address; City; State; Zip Code PO Box 3060 Conroe TX 77305			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

Date 9-7-2017		Payee name Mediagenics			
Amount (\$) 1640.59		Payee address; City; State; Zip Code P.O. Box 8122 Huntsville TX 77340			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

Date 9-7-17		Payee name Media Genics LLC			
Amount (\$) 465.96		Payee address; City; State; Zip Code P.O. Box 8122 Huntsville TX 77340			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising fee		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel In District |
| Contributions/Donations Made By | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 8	2 FILER NAME Melissa Miller	3 Filer ID (Ethics Commission Filers)
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4 Date 9-7-2017	5 Payee name Montgomery County Area Business Women
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6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 13921 Hwy 105 West, Ste 130 Conroe TX 77304
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9-7-2017	Payee name Branding From Custom Goods
------------------	--

Amount (\$) 1065.00	Payee address; City; State; Zip Code 210 N Main St Conroe TX 77301
------------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9-14-17	Payee name Vince Ross Auctioneer
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Amount (\$) 400.00	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 8	2 FILER NAME Melisa Miller	3 Filer ID (Ethics Commission Filers)
4 Date 9-14-2017	5 Payee name Real Onion Company	
6 Amount (\$) 750 ⁰⁰	7 Payee address; City; State; Zip Code 410 Moonwalk St. Montgomery, TX. 77356	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	
	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 9-15-17	Payee name Gun Mart Inc.	
Amount (\$) 2665 ⁰⁰	Payee address; City; State; Zip Code 10135 Wahrenberger Rd. Conroe, TX, 77304	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	
	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 10-16-17	Payee name The Woodlands Republican Women	
Amount (\$) 50 ⁰⁰	Payee address; City; State; Zip Code PO Box 7294 The Woodlands TX 77387	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	
	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 8	2 FILER NAME Melisa Miller	3 Filer ID (Ethics Commission Filers)
4 Date 10-18-2017	5 Payee name Montgomery County Municipal Employee Association	
6 Amount (\$) 100. ⁰⁰	7 Payee address; City; State; Zip Code 10907 Waterview Circle Montgomery, TX 77356	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-20-17	Payee name Liberty Belles Republican Women		
Amount (\$) 100. ⁰⁰	Payee address; City; State; Zip Code 29815 South Legends Chase Circle Spring, TX 77386		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10-30-17	Payee name Catch A Trophy Fishing Guide Service		
Amount (\$) 400. ⁰⁰	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 7 of 8	2 FILER NAME Melisa Miller	3 Filer ID (Ethics Commission Filers)
4 Date 11-11-17	5 Payee name MCRP Filing Fee Account	
6 Amount (\$) 1250 ⁰⁰	7 Payee address; City; State; Zip Code 310 Metcalf Street Conroe TX 77301	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 11-14-17	Payee name Media Genics	
Amount (\$) 1600 ⁰⁰	Payee address; City; State; Zip Code PO Box 8122 Huntsville TX 77340	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	
Date 11-14-17	Payee name Media Genics	
Amount (\$) 760 ⁰⁰	Payee address; City; State; Zip Code PO Box 8122 Huntsville TX 77340	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 8	2 FILER NAME Melisa Miller	3 Filer ID (Ethics Commission Filers)
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4 Date 11-28-17	5 Payee name Texas GOP Store
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6 Amount (\$) 2341.45	7 Payee address; City; State; Zip Code 404 I-45 South Huntsville TX 77340
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-18-17	Payee name Media Genics
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Amount (\$) 1600 ⁰⁰	Payee address; City; State; Zip Code PO Box 8122 Huntsville TX 77340
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <u>1 of 1</u>
2 FILER NAME <i>Melisa Miller</i>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan <i>12-28-17</i>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jason & Melisa Miller</i>	9 Loan Amount (\$) <i>15,000⁰⁰</i>
6 Is lender a financial Institution? Y N	8 Lender address; City; State; Zip Code <i>18319 Grimes Rd Cleveland TX 77328</i>	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) <i>Assistant Director</i>		13 Employer (See Instructions) <i>City of Conroe</i>
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial Institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.