

# DR-3: Notice of Dissolution

**Date Posted**  
7/19/2008

**DR-3**

ID:	<b>18318</b>
Name:	<b>Committee to elect Gail Miller for Supervisor</b>
Type:	<b>County Candidate - Supervisor</b>
Status:	<b>Filed</b>

Comm. #	18318
Filed	5/6/2014
Audited	
Certified	

Committee Name	<b>Committee to elect Gail Miller for Supervisor</b>
Address	<b>2927 180th Street</b>
City, State, Zip	<b>Fairfield, IA 52556</b>
Phone	<b>319-696-3073</b>

Effective Date of Dissolution..... **7/19/2008**

**Myrna Flora**

**7/19/2008**

Signature of Treasurer

Date Signed

**THIS BOX APPLIES TO CANDIDATE COMMITTEES ONLY:**

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

**Gail Miller**

**7/19/2008**

Signature of Candidate

Date Signed