

IA ETHICS AND CAMPAIGN DISCLOSURE
DISCLOSURE SUMMARY PAGE



FORM DR-2 (Rev. 12/2005) DISCLOSURE REPORT
For Office Use Only
Comm. #
Logged In
Scanned
Computer
Audited
File with: Iowa Ethics and Campaign Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-3701

COMMITTEE NAME (Must be same as on Statement of Organization)
Miller for Auditor
IMPORTANT: Indicate by # type of committee you are reporting for: 5
( 1 )Statewide/Legislative/Judge Standing for Retention Candidate ( 2 )State PAC ( 3 )State Party
( 4 )County Central Committee ( 5 )County Candidate ( 6 )City Candidate ( 7 )School Board or Other Political Subdivision Candidate ( 8 )County PAC ( 9 )City PAC ( 10 )School Board or Other Political Subdivision PAC ( 11 )Local Ballot Issue
CANDIDATE COMMITTEES ONLY:
Candidate Name: Joel D. Miller Political Party (if applicable): Democrat
Office Sought: Linn County Auditor District (if Senate or House):

2008 MAY -7 AM 11:59

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Eric A. Muto
SIGNATURE OF PERSON FILING REPORT

319-393-0533
TELEPHONE

05/07/2008
DATE SIGNED

I AM FILING A May 14, 2008 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate by # 1

CHECK IF AMENDMENT TO REPORT DATED

Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
11/4/2008 and (Primary 6/3/2008)
County & Local Committees, enter County in which Election is held
Linn

STATEMENT OF CASH ON HAND

Table with columns for description and amount. Rows include: CASH ON HAND at the beginning of the reporting period (\$232.87), ADD TOTAL MONEY TAKEN IN THIS PERIOD (Schedule A: 1,055.00, Schedule F: 0.00, Schedule H: 0.00), SUB-TOTAL (\$1,287.87), SUBTRACT TOTAL MONEY SPENT THIS PERIOD (Schedule B: 68.00, Schedule F: 0.00), CASH ON HAND at the end of this reporting period (\$1,219.87), \*\*UNPAID BILLS (\$0.00), \*\*IN KIND CONTRIBUTIONS (\$366.23), \*\*OUTSTANDING LOANS (\$100.00), CONSULTANT BREAKDOWN (YES/NO), CANDIDATE COMMITTEES ONLY: VALUE OF CAMPAIGN PROPERTY (\$0.00), STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Miller for Auditor

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
03/26/2008	ID# CK# 4825	Carole S. Maher 4980 Kesler Road NW Cedar Rapids, IA 52405		\$25.00	<input type="checkbox"/>
04/03/2008	ID# CK# 124	Allen Miller 1007 Pinehurst Drive North Aurora, IL 60542	Brother	\$100.00	<input type="checkbox"/>
04/06/2008	ID# CK# 6156	Kevin & Becky Shoop 3490 Wileys Rd Walker, IA 52352		\$100.00	<input type="checkbox"/>
04/12/2008	ID# CK# 7063	Shirley Brace 178 Cardinal Ct. SW #18 Independence, IA 50644	Mother	\$150.00	<input type="checkbox"/>
04/28/2008	ID# CK# Cash	Holly Ralston 4881 1st Ave SW Cedar Rapids, IA 52405		\$30.00	<input type="checkbox"/>
05/01/2008	ID# CK# 7294	Willie Cisco Caldwell 2000 First Avenue NE STE 200 Cedar Rapids, IA 52402-6300		\$100.00	<input type="checkbox"/>
05/05/08	ID# CK# Cash	Mike Haeder 3210 Towne House Dr. NE Cedar Rapids, IA 52402		\$50.00	<input type="checkbox"/>
05/06/08	ID# CK# 17459	I.B.E.W. Educational Committee 900 Seventh Street NW Washington DC 20001		\$500.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1,055.00	
<b>TOTAL (if last page of this schedule)</b>				\$ 1,055.00	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

**COMMITTEE NAME** *(Must be same as on Statement of Organization)*  
 Miller for Auditor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
04/15/2008	ID# CK# 2098	Linn County Auditor 930 1st Street SW Cedar Rapids, IA52404	Voter Data, PCT Maps	\$ 68.00
	ID# CK#			
<b>SUB-TOTAL</b>				<b>\$ 68.00</b>
<b>TOTAL (if last page of this schedule)</b>				<b>\$ 68.00</b>

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
 Miller for Auditor

Reset Form

<b>SCHEDULE E</b> (Rev. 06/97)	<b>IN-KIND CONTRIBUTIONS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
04/20/2008	Lowe's Home Center 5300 Blairs Forest Blvd NE Cedar Rapids, IA 52402	Candidate	Sign Post install materials	\$ 1.64	<input type="checkbox"/>
04/22/2008	Theisen's Home Farm Auto 3111 16th Ave SW Cedar Rapids, IA 52404	Candidate	Sign Posts	189.21	<input type="checkbox"/>
04/27/2008	Menard's 200 Nenard Lane Marion, IA 52302	Candidate	Sign Post install materials - Cable ties	21.17	<input type="checkbox"/>
05/01/2008	OfficeMax 327 Collins Road NE Cedar Rapids, IA 52402	Candidate	Laser Paper	27.55	<input type="checkbox"/>
05/01/2008	Northeast Post Office Cedar Rapids, IA 52402-9802	Candidate	Postage	98.40	<input type="checkbox"/>
05/03/2008	Sam's Club 2605 Blairs Ferry Road NE Cedar Rapids, IA 52402	Spouse	Card stock and paper	28.26	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 366.23	
<b>TOTAL (if last page of this schedule)</b>				\$ 366.23	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

SCHEDULE <b>F</b> (Rev. 07/03)	<b>LOANS RECEIVED &amp; REPAID</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)  
Miller for Auditor

**NOTE:** This schedule reports money loaned to the committee which is deposited in the committee account.

**TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD** \$ 100.00

**PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD**  
(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

**PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD**  
(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
No Activity			\$ 0.00

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAID
No Activity			\$ 0.00

**TOTAL (PART I)** \$ 0.00

**TOTAL CASH REPAYMENTS (PART II)** \$ 0.00  
 From Schedule E -- TOTAL LOANS FORGIVEN \$ 0.00  
**TOTAL OUTSTANDING LOANS END OF REPORT PERIOD** \$ 100.00

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