

**SPECIFIC-PURPOSE COMMITTEE  
CAMPAIGN FINANCE REPORT**

**FORM SPAC  
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission file)	2 Total pages filed: <i>3</i>
3 COMMITTEE NAME <i>GEORGE D. MILES, JR. (an "as-if" filing) (2007 Former Candidate for Mayor)</i>		OFFICE USE ONLY	
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE <i>673 ELKINS LAKE HUNTSVILLE, TX 77340</i>	Date Received <b>RECEIVED</b> <i>4/13/11</i> <i>SIC</i>	
		Date Hand-delivered or Date Postmarked	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <i>NOT APPLICABLE</i>	Receipt #	Amount
	NICKNAME LAST SUFFIX	Date Processed	
		Date Imaged	
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE		
7 CAMPAIGN TREASURER'S MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>( ) _____</i>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input type="checkbox"/> 6th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year      THROUGH      Month Day Year <i>07/01/11</i> <i>09/29/11</i>		
11 ELECTION	ELECTION DATE Month Day Year <i>11/08/11</i>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <i>&amp;</i> <input type="checkbox"/> Special <i>City</i>	

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**SPECIFIC-PURPOSE COMMITTEE REPORT:  
PURPOSE AND TOTALS**


**Form SPAC  
COVER SHEET PG 2**

<p><b>12 COMMITTEE NAME</b></p> <p><i>An "as if" filing</i> <i>Former (2007) candidate for Mayor - GEORGE D. MILES, JR.</i></p>	<p><b>ACCOUNT #</b> (Ethics Commission file)</p>
<p><b>13 COMMITTEE PURPOSE</b> (Attach lists on plain paper to complete this report if necessary.)</p> <p><input checked="" type="checkbox"/> <b>SUPPORT</b> (Candidate or Measure)</p> <p><input type="checkbox"/> <b>OPPOSE</b> (Candidate or Measure)</p> <p><input type="checkbox"/> <b>ASSIST</b> (Officeholder)</p>	<p><b>CANDIDATE / OFFICEHOLDER NAME</b> <i>Supporting Candidate for City Council wards 1, 2, and 4. Names appear on Schedule F attached.</i></p> <p><input checked="" type="checkbox"/> <b>CANDIDATES</b></p> <p><input type="checkbox"/> <b>OFFICEHOLDER</b></p> <p><b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b></p> <p><b>BALLOT IDENTIFICATION / #</b></p> <p style="text-align: right;"><b>ELECTION DATE</b> Month Day Year <i>11 / 8 / 2011</i></p> <p><b>DESCRIPTION</b></p>

<b>14 CONTRIBUTION TOTALS</b>	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)	\$
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <i>600.00</i>
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>1,127.97</i>
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <i>-0-</i>

**15 AFFIDAVIT**

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.



*George D. Miles Jr.*  
Signature of campaign treasurer: **FORMER CANDIDATE**

Sworn to and subscribed before me, by the said George D. Miles Jr, this the 31<sup>st</sup> day of Jan, 2013, to certify which, witness my hand and seal of office.

*Jennifer L. Drane*  
Signature of officer administering oath

Jennifer L. Drane  
Printed name of officer administering oath

*Notary*  
Title of officer administering oath

**POLITICAL EXPENDITURES**

**SCHEDULE F**

The instruction Guide explains how to complete this form.

1 Total pages Schedule F:

1

2 FILER NAME

GEORGE D. MILES, JR.

3 ACCOUNT # (Ethics Commission files)

4 Date

5 Payee name

7 Amount (\$)

9-1-11

Clyde Loll Campaign for City Council, Ward 4

6 Payee address; City, State, Zip Code

1137 Ellins Lake - Huntsville, TX 77340

\$200.00

8 Purpose of payment (See instructions regarding type of information required.)

Campaign Contribution  
(If travel outside of Texas, complete Schedule T)

9 -- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name Office sought Office held

CLYDE LOLL

City Councilman

Date

Payee name

Amount (\$)

9-9-11

Joe Emmett Campaign for City Council, Ward 1

Payee address; City, State, Zip Code

1304 Avenue O - Huntsville, TX 77340

\$200.00

Purpose of payment (See instructions regarding type of information required.)

Campaign Contribution  
(If travel outside of Texas, complete Schedule T)

-- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name Office sought Office held

JOE EMMETT

City Councilman

Date

Payee name

Amount (\$)

9-9-11

Tish Humphrey Campaign for City Council, Ward 2

Payee address; City, State, Zip Code

305 Forest Lane - Huntsville, TX 77340

\$200.00

Purpose of payment (See instructions regarding type of information required.)

Campaign Contribution  
(If travel outside of Texas, complete Schedule T)

-- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name Office sought Office held

TISH HUMPHREY

City Councilwoman

Date

Payee name

Amount (\$)

Payee address; City, State, Zip Code

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

-- Complete if direct expenditure to benefit C/OH --  
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED