

FORM COR-C/OH

**CORRECTION/AMENDMENT AFFIDAVIT
FOR CANDIDATE/OFFICEHOLDER 7773**

1 ACCOUNT # 7773	2 Total pages filed: 153 pm	OFFICE USE ONLY
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <u>Mr</u> FIRST <u>DAMON</u> MI <u>J.</u>	Date Received Date Hand-delivered or Postmarked Receipt # / Amount Date Processed Date Imaged
	NICKNAME <u>J</u> LAST <u>Miller</u> SUFFIX <u>II</u>	
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit _____ <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> 8th day before election <input type="checkbox"/> Final report	2012 APR 16 AM 11:42 FILED FOR RECORD Dana DeBeauvoir County Clerk Travis County, Texas
	5 ORIGINAL PERIOD COVERED	

6 EXPLANATION OF CORRECTION
 Schedule G was missing some expenditure amounts. We filled in the missing amounts.

7 AFFIDAVIT

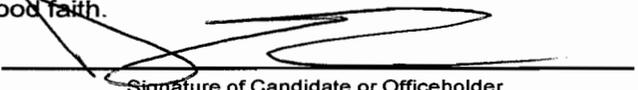
I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

Semiannual reports: This report is an amendment/correction to a semiannual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports (excluding semiannual reports due on or after September 1, 2011): I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

DIANNA KING
MY COMMISSION EXPIRES
September 24, 2014


 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Damon J. Miller, this the 16th day of April, 2012, to certify which, witness my hand and seal of office.

Signature of officer administering oath
Dianna King

Printed name of officer administering oath

Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <u>2</u>	2 FILER NAME <u>Damon J Miller</u>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date <u>3-11-12</u>	5 Payee name <u>The Home Depot</u>
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6 Amount (\$) <u>28.09</u> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <u>1200 Home Depot Blvd Sunset Valley, TX 78745</u>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <u>advertising exp</u>	(b) Description (If travel outside of Texas, complete Schedule T) <u>for nails 1" plastic round signs</u>
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Date <u>3-11-12</u>	Payee name <u>Lowe's</u>
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Amount (\$) <u>84.69</u> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <u>6400 Brodie LANE Austin, TX 78745</u>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>advertising exp</u>	Description (If travel outside of Texas, complete Schedule T) <u>1X2X8 WOOD for signs</u>
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Date <u>3-17-12</u>	Payee name <u>Lowe's</u>
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Amount (\$) <u>235.6</u> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <u>6400 Brodie Ln Austin, TX 78745</u>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>advertising exp</u>	Description (If travel outside of Texas, complete Schedule T) <u>black cable ties for signs</u>
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Date <u>3-17-12</u>	Payee name <u>The Home Depot</u>
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Amount (\$) <u>43.12</u> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <u>1200 Home Depot Blvd. Sunset Valley, TX 78745</u>
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <u>advertising exp.</u>	Description (If travel outside of Texas, complete Schedule T) <u>spray paint + cable ties</u>
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS**

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 2	2 FILER NAME Damon J Miller	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 3-17-12	5 Payee name McCoyS
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6 Amount (\$) 300.29 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 13324 Highway 71 W Bee Caves, TX 78738
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) advertising exp.	(b) Description (If travel outside of Texas, complete Schedule T) T-Posts/for signs
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Date 3-22-12	Payee name Tennessee Print Masters
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Amount (\$) 689.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2151 Denton Ave Cookeville TN 38501
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising exp.	Description (If travel outside of Texas, complete Schedule T) yard signs
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Date 3-30-12	Payee name Tennessee Print Masters
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Amount (\$) 289.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 2151 Denton Ave Cookeville TN 38501
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) advertising exp	Description (If travel outside of Texas, complete Schedule T) yard signs
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
<input type="checkbox"/> Reimbursement from political contributions intended	

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
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