Yes No V	child because	sactions, or liabilities of a spouse or dependent with the Committee on Ethics.	f income, tran	<b>EXEMPTION</b> —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.
Yes No	scrosed. Have you	d certain other "excepted trusts" need not be disc:osed. Have you ⊪id?	on Ethics and dependent chi	TRUSTS—Details regarding 'Qualified Blind Trusts' approved by the Committee on Ethics and certain other 'excepted trust excluded from this report details of such a trust benefiting you, your spouse, or dependent child?
Yes No 🔽			ublic Offering?	IPO—Did you purchase any shares that were allocated as a part of an Initial Public Offering?
IESTIONS	ER EACH OF THESE QUESTIONS	INFORMATION — ANSWER EACH O	T INFOR	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST
in this part must be answered and the edule attached for each "Yes" response.	in this part must be answered and the edule attached for each "Yes" response	Each question in this part rappropriate schedule attache	\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?  If yes, complete and attach Schedule V.
No S	arrangement with	IX. Did you have any reportable agreement or arrangement with an outside entity?  If yes, complete and attach Schedule IX.	<b>S</b>	IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?  If yes, complete and attach Schedule IV.
Yes No No	or before the date	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	s	III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes If yes, complete and attach Schedule III.
Yes No N	I receive any n the reporting s)?	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)?  If yes, complete and attach Schedule VII.	\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>	II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?  If yes, complete and attach Schedule II.
Yes No V	regating more	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)?  If yes, complete and attach Schedule VI.	N <sub>S</sub>	I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?  If yes, complete and attach Schedule I.
		E QUESTIONS	OF THESE	PRELIMINARY INFORMATION - ANSWER EACH
A \$200 penalty shall be assessed against anyone who files more than 30 days late.	A \$200 penalty against anyone 30 days late.	Termination 01/03/2013	Employee	Status House of Representatives District: 13  Report Annual (May 15, 2013)  Amendment
(Office Use Only)	(Office			
U.S. HOUSE OF REPRESENTATIVES	U.S. HOUSE O	Daytime Telephone:	Daytime T	Name: Ralph Bradley Miller
LEGISLATIVE RESOURCE CENTE 2013 JUN -3 AM 11: 49	LEGISLATIVE 2013 JUN	Form A For use by Members, officers, and employees	WENT	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2012 FINANCIAL DISCLOSURE STATEMENT
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#### Name Ralph Bradley Miller

Page 2 of 8

#### SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Source	Type	Amount
	Approved Teaching Fee	\$6.000
State of Maryland	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
Onlario County Board of Education	Spouse Salary	NA
Met Life Insurance Company of Connecticut	Attown fee - Stevetured \$1650	\$1650
		T TOTAL PARTY BANKALLA
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s. Apple Inc	4. Allei	3. Acces	2.3M	1. Drey	Mongan		Examples:	SP	Exclude: Your personal resistances and vacation homes income during the reporting ping \$5,000 or less in a persaccounts; and any financial into from. a federal retirement pro Savings Plan.  If you so choose, you may income source is that of your so chidd (DC), or is jointly held with optional column on the far left. For a detailed discussion of Splease refer to the instruction of Splease refer to the instruction of Splease.	For an ownership that is not public! ness, the nature of t	For rental or other real propert vide a complete address or a property," and a city and state.	all IRAs and one provide the ount that exce	Provide complete name: not use ticker symbols.)	ncome with a end of the ortable asset of than \$200 in		A 000
le Inc.	4. Allengan Inc.	3. Amenture PLC Ireland	s.3M Company	1. Dreyfus Liquid Assets	Smith Barney (SEP)	1st Bank of Paducah, KY Accounts	Simon & Schuster	Меда Согр. Stock	Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a tederal retirement program, including the Thrift Savings Plan.  If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left.  For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental or other real property held for investment, pro- vide a complete address or a description, e.g., "rental property," and a city and state.	For all IRAs and other retirement plans (such as 401(k) plans) provide the value for each asset held in the account that exceeds the reporting thresholds.	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	Asset and/or lifeone source	BLOCK A
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					×		6		\$15,001 - \$50.000	O		흅필	# \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	828	-	
						ļ	_	×	\$50,001 - \$100,000	m	_	* This column is for assets held solely by your spouse or dependent child.	If an asset was sold during the reporting year and is included only because it generated income, the value should be "None."	warrane value or asset at crose or reporting year. If you use a valuation method other than fair market value, please specify the method used.	value of Asset	5
						×	<u> </u>		\$100,001 - \$250,000	71	_	en a	왕이	pe vals	e	Е
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								×	CAPITAL GAINS		٩ -	ᅙᅔᅏ	IRAs), you may check to Deferred" column. Dividencest, and capital gains, eve	Crieck all columns that relirement accounts that allow you to choose speciments or that generate lay income (such as 401(k)	type of incom	BLOCK C
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									TAX-DEFERRED		1	5 ± 5			- 6	
							Royalties		Other Type of Income (Specify: e.g., Partnership Income or Farm Incom	ne)		vested, must be disclosed as income. Check "None" if the asset generated no income during the	IRAs), you may check the "Tax- Deferred" column. Dividends, inter- est, and capital gains, even if rein-	crieck all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or		'
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									\$50,001 - \$100,000	≦	]	you gen		2	ŭ	Ü
							×		\$100,001 \$1,000,000	×		no moome was earned or generaled. * This column is for income gener assets held solely by your spo	Teck	nay sset che	Amount of Income	
								$\Box$	\$1,000,001 - \$5,000,000	×		o income was earned or generaled. This column is for income generaled ssets held solely by your spouse		For assets for which you checked Deferred in Block C, you may chec "None" column. For all other assets, in the category of income by checking the beautiful to the category of the column.	W	
									Over \$5,000,000	×		8 8	and capital gains, even if reinvested, must be disclosed as income. Check "None" if	For assets for which you checked "lax- beferred" in Block C, you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate have below inside the laterate.		
				]					Spouse/DC Income over \$1,000,000*	¥		द <u>ह</u>	= 5	* \$ \$ \$ \$		
	Þ		9					S (partial)	indicate as follows: (S) (partial) See below for example.  P, S, E	portion of an asset is sold, please	if only a	year.	(t.) exceeding \$1,000 in reporting	esset had purchases (P), sales (S), or exchanges	Indicate if the	BLOCK E

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

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Continuation Sheet (if needed)	ONEANNED INCOME	Name 5	alph Bradley Miller Page 4
Asset and/or Income Source	BLOCK B Year-End Value of Asset	BLOCK C Type of Income	BLOCK D  Amount of Income
S. P.	00 X	ST.	
DC.	000 0,000 50,000 00,000 000,000 55,000,000	S IND TRUST D acome Partnership	0 00 00 000
	None \$1 - \$1,000 \$1,001 - \$15,0 \$15,001 - \$50, \$50,001 - \$100 \$100,001 - \$25,000,001 - \$1,000,00	NONE DIVIDENDS RENT INTEREST CAPITAL GAIN EXCEPTED/BL TAX-DEFERRE Other Type of Ir (Specify: e.g., F Income or Farr	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$50,001 - \$100,0 \$100,001 - \$1,00 \$1,000,001 - \$5,0 Over \$5,000,000
6. Baxter Intil	×	×	×
7. Black ROCK Inc.	×	×	*
8. Bristol Myers Squibb	×	×	×
a Colgate Palmolive Co	×	×	×
10. Covidien Plc.	×	×	×
" Crown Castle Intil	×	×	×
W. Exxon Mobil Corp	×	×	
B. General Electric Co	*	×	×
14. Honeywell Intil Inc.	×	×	×
15. Hinder Morgan Incorp.	×	×	×
16. Marshe McLinnan Cos.	×	×	*
17. Microsoft Corp.	×	×	×
is. Mondelez Intl Inc. Co.	×	×	X
19. Pepsica Inc. NC	×	×	×
so. Qualcomm Inc.	×	×	×
	×	X	×
22. Target Corp	×	×	×
23. Thekma Figher Scientific	×	×	×
24. Visa Inc	×	×	x
	×	*	×
Ob. Phillip Meekis Intr Inc.	×	*	*

Continuation Sheet (if needed) SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Name Ralph Bradley Miller Page 5 of 8

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					System (NC)	Legislative Retirement	The state of the s	a) The Investment Com. of America	1) Euro Pacific Growth FundA	American Funds (IRA)	J	34. JP Morgan Chase & Co.	33 TRavelers Companies	32. Wisconsin Energy Corp.	31. American Express	30. Dollar Tree Inc.	29. YUM BROND'S Inc.	e xcel Entegy Inc.	27. Wells Fargo and Co.		Asset and/or Income Source	BLOCK A
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## SCHEDULE IV-TRANSACTIONS

Name Ralph Bradley Miller

Page 6 of 8

Cardinal Health Inc	×	TRavelers Companies Inc × × 12/	Marshand McLennon Cos. x 11/	×	Allergan Inc. X 11/13/12	Wisconsin Energy Corp X X 11/12/12	Kinder Morgan Incorp. × 09/06/12	American Express Co. X x 9/06/12	Proctor and Gamble × as/01/12	Proctor and Gamble × 04/03/12	Powershares ABATR Series   X 04/03/12	XCEL Energy X 01/27/12	Sempra Energy × on/27/12	Dollar Tree Inc. X X 01/27/12	American Electric Power Co. Inc × 01/27/12	SP Example: Mega Corporation Common Stock (partial sale) X 10-12-12	SP, DC, JT Asset	Capital Gains — if a sales transaction resulted in a capital gain in excess of S200, check the "capital gains" box and disclose this income on Schedule III.  This column is for assets solely held by your spouse or dependent child.	NGE Box if C		Type of Transaction
12/20/12 ×	12/20/12 ×	12/20/12 ×	::/(a/12 ×	11/12/12 ×	×	×	<u>کو</u> ×	×	1/d ×	ž ×	/12 ×	/& X	* *	۶ ×	×			\$1,001- \$15,000 \$15,001-	y,	>	e e
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## SCHEDULE IV— TRANSACTIONS

Name Ralph Bradley Miller Page 7 of 8

									"I Inc.	3m Company	Example: Mega Corpor	SP, DC, JT Asset	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedute III.  * This column is for assets solely held by your spouse or dependent child.	purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	In a capital loss, Provide a oner description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the	,	Deletak et a samuel et a samue
		الله المراجعة							×	×			PURCH	ASE		of Tra	
											×		SALE			Type of Transaction	1
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													Check B Gain Ex				
									12/20/12	12/20/12	10-12-12		Monthly, or Bi-weekly, if applicable	or Ouarlerty,	(MO/DAY/YR)	Date	
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													Spouse/DC Ass		~		

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	Page 8 of 8

# SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and

spouse or dependent child that is totally independent of his or her relationship to you Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a

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Source	Chicago Chamber of Commerce	Roycroft Corporation								
Date(s)	_	Aug. 6–11								
(ŝ)	2	6-11								
City of Departure—Destination—	DC-Chicago-DC	DC—Los Angeles—Cleveland						Townstein the state of the stat		
Lodging?	z	Υ								
Food?	z	Υ								
Was a Family Member Included?	Z	Υ								
Number of days not at sponsor's expanse		2 Days								