

# **Report 1 - Amended**

**CITY OF TANEYTOWN  
ELECTION 2023  
CAMPAIGN FINANCING REPORT TITLE PAGE**

**CANDIDATE**

Name of Candidate: Christopher Gehrig Miller

Bank Account:  Christopher Gehrig Miller  
Bank Name Account Number Name as Appears on Account

**Report Type**

**Due Date**

☒ First Report

Due March 20, 2023

☐ Second Report

Due April 16, 2023

☐ Third Report

Due April 24, 2023

☐ Fourth Report

Due May 31, 2023

☐ Annual Report

Due December 31, 2023

☐ This is the final report and the account has been terminated.

☐ This is an amendment to a previous report, filed \_\_\_\_\_, 20\_\_

ALL REPORTS MUST BE SUBMITTED BY 4:00 P.M. ON DUE DATE

 3/21/23

## CAMPAIGN FINANCING SUMMARY REPORT

Name of Candidate; Political Committee, or Individual: Christopher Gehrig Miller

### Cash Balance

1. Cash Balance – Beginning of Period	\$ <u>0</u>
2. Total Contributions from Schedule No. 1	\$ <u>8,000.25</u>
<i>Total Cash Available</i>	\$ <u>8,000.25</u>
3. Total Expenditures from Schedule No. 2	\$ <u>7,976.43</u>
4. Cash Balance – End of Transaction	\$ <u>23.82</u>

### In-Kind Donations

1. In-Kind Donation Value – Beginning of Period	\$ <u>0</u>
2. Total Value of In-Kind Donations During Reporting Period	\$ <u>~ \$300</u>
<i>Total Value of In-Kind Donations</i>	\$ <u>~ \$300</u>
3. Total Value of In-Kind Expenditures	\$ <u>0</u>
4. In-Kind Balance – End of Transaction	\$ <u>~ \$300</u>

### Loans\* (Schedule 3)

1. Total Loan Value – Beginning of Period	\$ <u>0</u>
2. Total Loans Received During Reporting Period	\$ <u>0</u>
<i>Total Value of Loans</i>	\$ <u>0</u>
3. Total Loans Repaid During Reporting Period	\$ <u>0</u>
4. Loan Balance – End of Transaction	\$ <u>0</u>

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Christopher Gehrig Miller 3/21/23  
Candidate; Treasurer of Political Committee; or Individual Date

\*For each loan received by a candidate, a separate Declaration of Campaign Loans Report form must be filed; total of all loans cannot exceed \$10,000 for one election cycle.

## Schedule A – Employment/Source of Income

During the reporting period, did you or any member of your immediate family, receive any income or compensation of any kind, including in-kind goods or services, from any source (this also includes any governmental entity or quasi-governmental entity)? [Note that your dependent child's does not need to be disclosed unless the place of employment is subject to regulation or the authority of the City.]

☒ Yes  
☐ No (Go to Schedule B)

\* \* \* \* \*

If Yes: (Answer each question below.)

1. If, during the reporting period, you or a member of your immediate family received any income or compensation of any kind, including in-kind goods or services, from any source, list the relevant information below.

Name of individual: Christopher Miller

Relationship to filer: Self

Name of Employer/source of income: US Govt - Veteran Disability

Address: 31 Hopkins Plaza

City/State/Zip: Baltimore, MD 21201

Name of individual: Christopher Miller

Relationship to filer: Self

Name of Employer/source of income: City of Taneytown - Planning & Zoning

Address: 17 E Baltimore St

City/State/Zip: Taneytown, MD 21787

cont.  
Rachael Miller  
Spouse  
US Govt - NIH Bethesda  
10 Center Dr  
Bethesda, MD 20892



## Schedule A – Employment/Source of Income

During the reporting period, did you or any member of your immediate family, receive any income or compensation of any kind, including in-kind goods or services, from any source (this also includes any governmental entity or quasi-governmental entity)? [Note that your dependent child's does not need to be disclosed unless the place of employment is subject to regulation or the authority of the City.]

☒ Yes

☐ No (Go to Schedule B)

\* \* \* \* \*

If Yes: (Answer each question below.)

1. If, during the reporting period, you or a member of your immediate family received any income or compensation of any kind, including in-kind goods or services, from any source, list the relevant information below.

Name of individual: Rachael Miller

Relationship to filer: Spouse

Name of Employer/source of income: US Govt NIH Bethesda

Address: 10 Center Drive

City/State/Zip: Bethesda MD 20892

Name of individual: \_\_\_\_\_

Relationship to filer: \_\_\_\_\_

Name of Employer/source of income: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

6. Are there any legal conditions or encumbrances on the property? (Example: mortgages, liens, contracts, options, etc.)

☒ Yes  
☐ No

**If yes:** what is/are the name(s) of the lender(s), creditor(s), lien holder(s), etc? Village Capital Mortgage

7. What date was the property acquired? Nov 2017

8. How was the property acquired? (Example: purchase, gift, inheritance, etc.)

Purchase

9. From whom was the property acquired? (Name of individual or entity from whom you purchased or inherited the property or who gifted the property to you.)

10. Have you transferred any interest in this property during the reporting period?

☐ Yes  
☒ No

**If Yes:**

10.A. What percentage of interest did you transfer: \_\_\_\_\_%

10.B. What consideration did you receive for the interest (money, property, services?):  
\_\_\_\_\_

10.C. To whom did you transfer the interest: \_\_\_\_\_

11. Is any part or portion of this property leased or rented to individuals/entities which are not your immediate family? NO

## Schedule D – Interests in Corporations and Partnerships

Did you have any interest in any corporations, partnerships, limited liability partnerships (LLP) or limited liability companies (LLC) during the reporting period whether or not the entity did business with the City? [NOTE: You do not need to include mutual funds or stock owned in a pension fund.]

☐ Yes

☒ No (Go to Schedule E)

*I have no Interest in Laughing Coffin LC*

\* \* \* \* \*

*Wife is Partner of Laughing Coffin LC*

If Yes: (Answer each question below. A separate Schedule D will be required for each interest you need to disclose.)

*Rachael Miller and Christopher Miller Guarantee the lease for 1 Broad Street*

1. What is the name of the entity? Include the complete name of the entity, do not identify solely by trading symbol: \_\_\_\_\_

2. Does the stock of the corporation trade on a stock exchange?

☐ Yes

☐ No

If "no," the legal address of the entity's principal office.

\_\_\_\_\_

3. Is the interest held directly by you or is it attributable to you?

Directly: \_\_\_\_\_ Attributable: \_\_\_\_\_

4. Do you hold the interest in your name alone, or is it held jointly?

In your name alone: \_\_\_\_\_ Jointly: \_\_\_\_\_

If jointly, the percentage of your interest: \_\_\_\_\_%

5. What is the nature of your interest? (Example: stock, notes, bonds, puts, calls, straddles, purchase options, etc.) If in a non-publicly traded entity or LLP or LLC, report the percentage of ownership.

Type: \_\_\_\_\_  
percentage of ownership: \_\_\_\_\_%

6. Are there any legal conditions or encumbrances that apply to your interest in the entity? (Example: mortgages, liens, contracts, options, etc.)

☐ No

### Schedule I – Family Members Employed by the City

During the reporting period, were any members of your immediate family employed by the City in any capacity?



☒ Yes

☐ No (Go to Schedule J)

\* \* \* \* \*

If Yes; (Answer each question below. A separate Schedule I will be required for each member of the immediate family who is employed by the City.)

1. What is the relation and name of the immediate family member employed by the City?

Ava Miller

2. What is the name of the agency that employed the member of your immediate family?

City of Taneytown - Ethics Committee

3. What was the title of your immediate family member's position in the City agency during the reporting period? Committee Member

**If necessary, please use additional sheet(s) for any additional entries.**



Name: Christopher Gehrig Miller

## I. CONSENT OF RECIPIENT

I, N/A, hereby acknowledge receipt of a loan on  
N/A, in the amount of \$                     made payable to  
                     from                     .

## II. CERTIFICATION OF CANDIDATE

☐ 1. Is from a financial institution or other entity in the business of making loans;

☐ 2. Is personally guaranteed by me and required to be repaid within one (1) year from the date of the loan.

NA

Date \_\_\_\_\_

### Declaration of Campaign Loans