PAGE 1 / 39

#### REPORT OF RECEIPTS **AND DISBURSEMENTS**

For A	n Authorized Commit	itee	Offi	ce Use Only	
NAME OF COMMITTEE (in full)  TYPE OR P		ole: If typing, type he lines.	12FE4M5		
John Mills for Congress				1	
ADDRESS (number and street)	dwalk Drive				
<b>—</b>					
Check if different than previously reported. (ACC)			FL 325	550	
O FEO IDENTIFICATION NUMBER W	CITY ▲		STATE ▲	ZIP CODE ▲	
2. FEC IDENTIFICATION NUMBER ▼  C C00565366	3. IS THIS REPORT	NEW (N) OR	x AMENDED (A)	STATE ▼ DISTRICT	
4. TYPE OF REPORT (Choose One)	(b) 12-Day <b>PRE</b> -Ele	ection Report for the	,.		
(a) Quarterly Reports:	(b) 12-Day PRE-Ele	ction Report for the			
April 15 Quarterly Report (Q1)	Pr	imary (12P)	General (12G)	Runoff (12R)	
=	Co	onvention (12C)	ntion (12C) Special (12S)		
July 15 Quarterly Report (Q2)			/ Y " Y " Y " Y		
October 15 Quarterly Report (Q	3) Election on	M M / D D	/	in the State of	
January 31 Year-End Report (YE	(c) 30-Day <b>POST</b> -E	Election Report for the	ne.		
	(9) 00 Day 1 001 E			п	
_	Ge	eneral (30G)	Runoff (30R)	Special (30S)	
Termination Report (TER)	Election on	M M / D D	/ Y " Y " Y " Y	in the State of	
5. Covering Period 10 01	2017	through 12	M / D D / Y 2 31	Y Y Y 2017	
I certify that I have examined this Report ar Adams, 0 Type or Print Name of Treasurer	nd to the best of my knowl Christopher, , ,	edge and belief it is	s true, correct and co	mplete.	
Adams, Christophe Signature of Treasurer		ectronically Filed]	Date 04	18 / 2018	
NOTE: Submission of false, erroneous, or inco	mplete information may subj	ect the person signin	g this Report to the p	enalties of 52 U.S.C. §30109	
Office				FFC FODM 0	
Use Only				FEC FORM 3 (Revised 05/2016)	

#### **SUMMARY PAGE**

of Receipts and Disbursements FEC Form 3 (Revised 05/2016)

PAGE 2/39

2017

'12<sup>'</sup>

Write or	Type	Com	mittee	Name
John	Mills	for	Con	gress

10 2017 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 380.00 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 380.00 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 2177.30 8966.29 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 2177.30 8966.29 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 423.13 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 20809.55 Schedule C and/or Schedule D).....

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts PAGE 3 / 39 FEC Form 3 (Revised 05/2016) Write or Type Committee Name John Mills for Congress 10 12 01 2017 31 2017 Report Covering the Period: From: To: **COLUMN B COLUMN A** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 250.00 (i) Itemized (use Schedule A)...... 130.00 0.00 (ii) Unitemized ..... (iii) TOTAL of contributions 0.00 380.00 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate ..... TOTAL CONTRIBUTIONS (other than loans) 0.00 380.00 (add Lines 11(a)(iii), (b), (c), and (d))...

12.	TRANSFERS FROM OTHER
	AUTHORIZED COMMITTEES

13.	LOANS:		

(a	a)	Made or Guaranteed by the Candidate
(b	o)	All Other Loans

(c)	TOTAL LOANS
	(add Lines 13(a) and (b))

14.	OFFSETS TO OPERATING
	EXPENDITURES
	(Refunds, Rebates, etc.)
15.	OTHER RECEIPTS

(Dividends, Interest, etc.).....

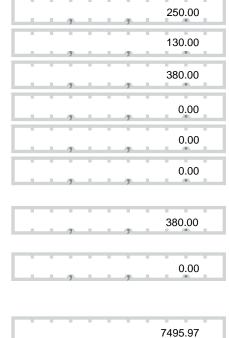
16.	TOTAL RECEIPTS (add Lines
	11(e), 12, 13(c), 14, and 15)
	(Carry Total to Line 24, page 4)

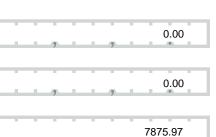
OFFICE TO OPERATING

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7495.97

#### **DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 05/2016)

of Disbursements

PAGE 4 / 39

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	2177.30	8966.29
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
1.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	2177.30	8966.29
	III. CASH SU	IMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	423.13
4	TOTAL RECEIPTS THIS PERIOD (from Line 1	2177.30	
5.	SUBTOTAL (add Line 23 and Line 24)	2600.43	
6.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	2177.30
	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	423.13

PAGE 5 OF FOR LINE NUMBER: 39 SCHEDULE A (FEC Form 3) (check only one) Use separate schedule(s) for each category of the ITEMIZED RECEIPTS 11a 11b 11d 11c **Detailed Summary Page x** | 13a 12 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) John Mills for Congress Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 04 City State Zip Code Transaction ID: SA13A.4742 FL 32550 Miramar Beach FEC ID number of contributing Amount of Each Receipt this Period C00565366 federal political committee. 303.01 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand Primary General 429.35 Other (specify) Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 2017 10 05 City State Zip Code Transaction ID: SA13A.4743 Miramar Beach FL 32550 FEC ID number of contributing С C00565366 Amount of Each Receipt this Period federal political committee. 4.24 Occupation Name of Employer Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand **✗** Primary General 433.59 Other (specify) ▼ Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 10 City State Zip Code Transaction ID: SA13A.4744 FL Miramar Beach 32550 FEC ID number of contributing C C00565366 Amount of Each Receipt this Period federal political committee. 35.00 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand Primary General Other (specify) 468.59

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

342.25

PAGE 6 OF FOR LINE NUMBER: 39 SCHEDULE A (FEC Form 3) (check only one) Use separate schedule(s) for each category of the ITEMIZED RECEIPTS 11a 11b 11d 11c **Detailed Summary Page x** | 13a 12 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) John Mills for Congress Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 12 City State Zip Code Transaction ID: SA13A.4745 FL 32550 Miramar Beach FEC ID number of contributing Amount of Each Receipt this Period C00565366 federal political committee. 21.63 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand Primary General 490.22 Other (specify) ▼ Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 2017 10 City State Zip Code Transaction ID: SA13A.4746 Miramar Beach FL 32550 FEC ID number of contributing С C00565366 Amount of Each Receipt this Period federal political committee. 7.95 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand **✗** Primary General 498.17 Other (specify) ▼ Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 30 City State Zip Code Transaction ID: SA13A.4747 FL Miramar Beach 32550 FEC ID number of contributing C C00565366 Amount of Each Receipt this Period federal political committee. 72.49 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand Primary General Other (specify) 570.66 102.07 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

PAGE OF FOR LINE NUMBER: 39 SCHEDULE A (FEC Form 3) (check only one) Use separate schedule(s) for each category of the ITEMIZED RECEIPTS 11a 11b 11d 11c **Detailed Summary Page x** | 13a 12 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) John Mills for Congress Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 31 City State Zip Code Transaction ID: SA13A.4748 FL 32550 Miramar Beach FEC ID number of contributing Amount of Each Receipt this Period C00565366 federal political committee. 196.54 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand Primary General 767.20 Other (specify) Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 01 2017 11 City State Zip Code Transaction ID: SA13A.4749 Miramar Beach FL 32550 FEC ID number of contributing С C00565366 Amount of Each Receipt this Period federal political committee. 41.21 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand **✗** Primary General 808.41 Other (specify) ▼ Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 05 City State Zip Code Transaction ID: SA13A.4750 FL Miramar Beach 32550 FEC ID number of contributing C C00565366 Amount of Each Receipt this Period federal political committee. 804.08 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand Primary General Other (specify) 1612.49

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1041.83

PAGE 8 OF FOR LINE NUMBER: 39 SCHEDULE A (FEC Form 3) (check only one) Use separate schedule(s) for each category of the ITEMIZED RECEIPTS 11a 11b 11d 11c **Detailed Summary Page x** | 13a 12 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) John Mills for Congress Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 80 City State Zip Code Transaction ID: SA13A.4751 FL 32550 Miramar Beach FEC ID number of contributing Amount of Each Receipt this Period C00565366 federal political committee. Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand Primary General 1631.57 Other (specify) ▼ Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 2017 11 80 City State Zip Code Transaction ID: SA13A.4752 Miramar Beach FL 32550 FEC ID number of contributing С C00565366 Amount of Each Receipt this Period federal political committee. 93.73 Occupation Name of Employer Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand **✗** Primary General 1725.30 Other (specify) ▼ Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive City State Zip Code Transaction ID: SA13A.4753 FL Miramar Beach 32550 FEC ID number of contributing C C00565366 Amount of Each Receipt this Period federal political committee. 6.00 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand Primary General Other (specify) 1731.30 118.81 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

#### SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

mage# 201804189110330087				
SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 OF 39 (check only one)  11a 11b 11c 11d 11d 12 13b 14 15	
			ny person for the purpose of soliciting contributions littee to solicit contributions from such committee.	
/ John Mills for Congress				
Full Name (Last, First, Middle Initial) John Mills for Congress  Mailing Address 1940 Boardwalk Drive  City Miramar Beach	State FL	Zip Code 32550	Date of Receipt  12 22 2017  Transaction ID : SA13A.4754	
FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: 2018	Occupation	0565366	Amount of Each Receipt this Period  308.00  Memo Item	
Primary General Other (specify) ▼	Election by	2039.30	On Demand	
Full Name (Last, First, Middle Initial)  John Mills for Congress  Mailing Address 1940 Boardwalk Drive  City	State	Zip Code	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Miramar Beach  FEC ID number of contributing federal political committee.	C Coo	32550 565366	Amount of Each Receipt this Period  56.34	
Name of Employer  Receipt For: 2018	Occupation  Election Cy	vcle-to-Date ▼ 2095.64	Memo Item On Demand	
Full Name (Last, First, Middle Initial)  John Mills for Congress  Mailing Address 1940 Boardwalk Drive			Date of Receipt  12 29 2017	
City	Stato	Zin Codo		

#### **SCH** ITEM

Senate

District:

State:

FL

President

01

Primary

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Other (specify)

General

lm	age# 201804189110330088				
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate scl for each categor Detailed Summan	y of the	FOR LINE NUMBER: PAGE 10 OF 39 (check only one)    X   17
	y information copied from such Reports and Stat for commercial purposes, other than using the n				person for the purpose of soliciting contributions ttee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  John Mills for Congress		······································		
<b>A</b> .	Full Name (Last, First, Middle Initial) Adams, Alisha, , ,				Date of Disbursement
	Mailing Address 70 Arnold Dr				12 22 2017
	City Lexington	State TN	Zip Code 38351		FEC Identification Number
	Purpose of Disbursement consulting fee			001	C C00565366
	Candidate Name John Mills for Congress			Category Type	// Amount of Each Disbursement this Period
	Office Sought:    X   House   Disburse   X     Senate   President     State:   FL   District:   01	-	General pecify)		308.00  Transaction ID : SB17.4738  Memo Item
В.	Full Name (Last, First, Middle Initial) Adams, Alisha, , ,  Mailing Address 70 Arnold Dr				Date of Disbursement  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Lexington	State TN	Zip Code 38351		FEC Identification Number
	Purpose of Disbursement consulting fee		3333.	001	C C00565366
	Candidate Name John Mills for Congress			Category Type	
	9 1.	ement For: Primary Other (sp	General pecify)		Transaction ID : SB17.4741  Memo Item
	Full Name (Last, First, Middle Initial)				
C. Office Depot  Mailing Address 34940 Emerald Coast Pkwy					Date of Disbursement  M M / D D / Y Y Y Y Y Y 10 04 2017
	City	State	Zip Code		FEC Identification Number
	Purpose of Disbursement Office supplies	FL	32541	001	C C00565366
	Candidate Name John Mills for Congress			Category Type	Amount of Each Disbursement this Period
	Office Sought: X House Disburse	ement For:	2018		303.01

819.01

Transaction ID : SB17.4713

Memo Item

#### SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 11 39 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c

19b 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) John Mills for Congress Full Name (Last, First, Middle Initial) Date of Disbursement A. Office Depot 2017 10 05 Mailing Address 34940 Emerald Coast Pkwy City State Zip Code **FEC Identification Number** FΙ Destin 32541 Purpose of Disbursement Office supplies C00565366 001 Candidate Name Amount of Each Disbursement this Period Category/ John Mills for Congress Type Office Sought: House Disbursement For: 2018 4.24 Senate Primary General Transaction ID: SB17.4714 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Verizon Wireless Date of Disbursement Mailing Address P.O. Box 4001 05 2017 City State Zip Code **FEC Identification Number** GA 30101 Acworth Purpose of Disbursement C00565366 campaign phones 001 Candidate Name Amount of Each Disbursement this Period Category/ John Mills for Congress Type 804.08 Office Sought: **★** House Disbursement For: 2018 Senate Primary General Transaction ID: SB17.4731 Other (specify) President Memo Item District: Full Name (Last, First, Middle Initial) c. Vista Print Date of Disbursement Mailing Address 1974 Ridgecrest Dr 01 2017 City State Zip Code **FEC Identification Number** Columbia TN 38401 Purpose of Disbursement C00565366 001 Candidate Name Amount of Each Disbursement this Period Category/ John Mills for Congress Type 41.21 Office Sought: House Disbursement For: 2018 Senate Primary General Transaction ID: SB17.4730 President Other (specify) Memo Item State: FL District: SUBTOTAL of Disbursements This Page (optional)..... 849.53 TOTAL This Period (last page this line number only)..... 1668.54

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

**PAGE** 

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×	13a
	13b

39

Transaction ID: SC/10.4711 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 126.34 0.00 126.34 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>21 <sup>D</sup> M09M Ž017 Y11/08/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 126.34 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

**PAGE** 

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Transaction ID: SC/10.4742 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 303.01 0.00 303.01 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10<sup>M</sup> 0.00 D04D Ž017 Y11/08/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 303.01 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 14 OF
FOR LINE NUMBER:
(check only one)

**X** 13a

		100
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4743
LOAN SOURCE Full Name (Last, First, M	liddle Initial	
John Mills for Congress	iiuuie iiiiliai)	☐ Memo Item
Mailing Address 1940 Boardwalk Drive		Other (specify) ▼
City	State	ZIP Code  Personal Funds of the Candidate
Miramar Beach	FL	32550
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4.24		0.00 4.24
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M10 <sup>M</sup> / D05 <sup>D</sup> / Y Ž017 Y	M M / D D	0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	1	Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	)	4.24
TOTALS This Period (last page in this line or	ıly)	······································
Carry outstanding balance only to LINE 3, Se	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4744
Ğ		T =
LOAN SOURCE Full Name (Last, First, M John Mills for Congress	liddie initial)	☐ Memo Item
Mailing Address 1940 Boardwalk Drive		General Other (specify) ▼
City	State	ZIP Code  Personal Funds of the Candidate
Miramar Beach	FL	32550
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
35.00		0.00 35.00
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M10 <sup>M</sup> / D10 <sup>D</sup> / Y Ž017 Y	M M / D D	/ Y11/Ŏ8/2Ŏ18
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	)	35.00
TOTALS This Period (last page in this line or	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

**PAGE** 

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13a 13b

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Transaction ID: SC/10.4745 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify) City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 21.63 0.00 21.63 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10<sup>M</sup> 0.00 <sup>D</sup>12<sup>D</sup> Ž017 Y11/08/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 21.63 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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OF

	OF COMMITTEE (In Full) Mills for Congress				Trans	saction ID : SC/10.4746	
	AN SOURCE Full Name (Last, hn Mills for Congress	First, Mic	Idle Initial)		☐ Memo Ite	Election: 2018  X Primary  General	
Mai 194	ling Address 0 Boardwalk Drive				Other (specify) ▼		
City	1		State	ZIP Co	de		
Mira	amar Beach		FL	32550		Personal Funds of the Candidate	
0	riginal Amount of Loan		Cumulative Pay	ment To	Date B	alance Outstanding at Close of This Period	
Ш	7	7.95	0.00		0.00	7.95	
TER	RMS Date Incurred		D	ate Due	Interest R (If none, er		
	M10M / D17D / Y 2017	Y	M M / D D	/ <sup>Y</sup> 11	1/Ŏ8/2Ŏ18 <sup>Y</sup>	0.00 % (apr) Yes No	
List	t All Endorsers or Guarantors	(if any) to	o Loan Source				
1.	Full Name (Last, First, Middle I	nitial)			Name of Employer		
	Mailing Address				Occupation		
	City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. F	Full Name (Last, First, Middle In	itial)			Name of Employer		
N	Mailing Address				Occupation		
(	City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
3. F	Full Name (Last, First, Middle In	itial)			Name of Employer		
N	Mailing Address				Occupation		
(	Dity	State	ZIP Code		Amount Guaranteed Outstanding:	9	
4. F	Full Name (Last, First, Middle In	itial)			Name of Employer		
N	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7 7 7	
SUBT	OTALS This Period This Page (o	optional)			······	7.95	
TOTAL	_S This Period (last page in this	line only	')				
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OF

		100
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4747
LOAN SOURCE Full Name (Last, First, M	liddle Initial\	
John Mills for Congress	liddle Illitial)	☐ Memo Item
Mailing Address 1940 Boardwalk Drive		Other (specify) ▼
City	State	ZIP Code  Personal Funds of the Candidate
Miramar Beach	FL	32550
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
72.49		0.00 72.49
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M10M / D30D / Y Z017 Y	M M / D D	/ Y11/ŏ8/2ŏ18
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	<b>'</b>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Degree (autional)		
SUBTOTALS This Period This Page (optional)	J	72.49
TOTALS This Period (last page in this line or	ıly)	······································
Carry outstanding balance only to LINE 3, Se	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		130		
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4748		
LOAN SOURCE Full Name (Last, First, Mic	ldle Initial)	☐ Memo Item   Election: 2018		
John Mills for Congress				
Mailing Address 1940 Boardwalk Drive		Other (specify) ▼		
City	State	ZIP Code  Personal Funds of the Candidate		
Miramar Beach	FL	32550		
Original Amount of Loan	Cumulative Pay			
196.54		0.00		
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)		
M10M / D31D / Y Ž01Ť Y	M M / D D	/ Y11/08/2018		
List All Endorsers or Guarantors (if any) to	o Loan Source			
Full Name (Last, First, Middle Initial)	224.7 304.73	Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount Guaranteed		
City	ZIP Code	Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	•	Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)		196.54		
TOTALS This Period (last page in this line only	y)	······································		
Carry outstanding balance only to LINE 3, Sch	edule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.		

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Transaction ID: SC/10.4749 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 41.21 0.00 41.21 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 M 1 1 M D01D Ž017 Y11/08/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 41.21 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4750
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	
John Mills for Congress	liddle Illitial)	☐ Memo Item
Mailing Address 1940 Boardwalk Drive		Other (specify)   ———————————————————————————————————
City	State	ZIP Code  Responsible to the Candidate Personal Funds of the Candidate
Miramar Beach	FL	32550
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
804.08		0.00 804.08
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D05D / Y Z017 Y	M M / D D	/ Y11/Ŏ8/2Ŏ18
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	·····	
CODICIALS THIS FERIOU THIS FAGE (OPHOHAI)	J	804.08
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Carry outstanding balance only to LINE 3, Se	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: SC/10.4751 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 19.08 0.00 19.08 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 M 1 1 M D08D Ž017 Y11/08/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 19.08 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4752
LOAN SOURCE Full Name (Last, First, N	Aiddle Initial	
John Mills for Congress	viidale initial)	☐ Memo Item
Mailing Address 1940 Boardwalk Drive		General Other (specify) ▼
City	State	ZIP Code  Personal Funds of the Candidate
Miramar Beach	FL	32550
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
93.73	9	0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D08D / Y 2017 Y	M M / D D	/ <sup>Y</sup> 11/ŏ8/2ŏ18 <sup>Y</sup> 0.00
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	T	Amount
City State	ZIP Code	Guaranteed Outstanding:
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CODICIALS THIS FERIOR THIS Fage (options		93.73
TOTALS This Period (last page in this line of	nly)	······································
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

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	ME OF COMMITTEE (In Full) ohn Mills for Congress				Transaction ID : SC/10.4753		
Ľ							
	LOAN SOURCE Full Name (Last,	First, Mid	Idle Initial)		Memo Item Election: 2018		
	John Mills for Congress				Primary		
	Mailing Address				General		
	Mailing Address 1940 Boardwalk Drive				Other (specify) ▼		
	City		State	ZIP Co	Y Personal Funds of the Candid	date	
	Miramar Beach		FL	32550	)		
	Original Amount of Loan		Cumulative Pay	ment To	Date Balance Outstanding at Close of This Pe	eriod	
		5.00			0.00		
	TERMS Date Incurred		D	ate Due	Interest Rate Secured: (If none, enter 0)		
	M12 <sup>M</sup> / D21 <sup>D</sup> / Y 2017	Y	M M / D D	/ Y11	1/ŏ8/2ŏ18 <sup>Y</sup> 0.00	No	
	List All Endorsers or Guarantors	(if any) to	a Loan Source		70 (apr) res	140	
	Full Name (Last, First, Middle I	` • •	D LOAN SOURCE		Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:		
	2. Full Name (Last, First, Middle In	itial)			Name of Employer  Occupation  Amount		
	Mailing Address						
	City	State	ZIP Code		Guaranteed Outstanding:		
	3. Full Name (Last, First, Middle In	itial)			Name of Employer  Occupation		
	Mailing Address						
	9						
	City	State	ZIP Code		Amount Guaranteed		
	4. Full Name (Last, First, Middle In	itial)			Outstanding:  Name of Employer		
	<b>`</b>						
	Mailing Address				Occupation		
			1		Amount		
	City	State	ZIP Code		Guaranteed Outstanding:		
						_	
SI	UBTOTALS This Period This Page (	optional)			6.00		
т	OTALS This Period (last page in this	line only	r)				
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			Detailed Odif	iiiaiy i agc		13b
AME OF COMMITTEE (In Full)  John Mills for Congress				Transaction	ID : SC/10.4754	
LOAN SOURCE Full Name (Last, First, Mid John Mills for Congress Mailing Address 1940 Boardwalk Drive	ddle Initial)		□ Ме		ection: 2018 Primary General Other (specify)	
City Miramar Beach	State FL	ZIP Code 32550			Personal Funds of the 0	Candidate
Original Amount of Loan	Cumulative Pay	yment To Da	0.00	Balance	Outstanding at Close of T	his Period
TERMS Date Incurred  M12 <sup>M</sup> / P22 <sup>D</sup> / Y Ž017 Y					Secured % (apr) Yes	<b>V</b>
List All Endorsers or Guarantors (if any) to	o Loan Source					
Full Name (Last, First, Middle Initial)			ame of Employ	yer		
Mailing Address		С	ccupation			
City	City State ZIP Code			,	,	
2. Full Name (Last, First, Middle Initial)		N	ame of Employ	yer		
Mailing Address		С	ccupation			
City	ZIP Code	G	mount luaranteed lutstanding:	,		
3. Full Name (Last, First, Middle Initial)		V	ame of Employ	yer		
Mailing Address		С	ccupation			
City	ZIP Code	G	mount luaranteed lutstanding:	,		
4. Full Name (Last, First, Middle Initial)	N	ame of Employ	yer			
Mailing Address		С	ccupation			
City State	ZIP Code	G	mount juaranteed outstanding:	,		
UBTOTALS This Period This Page (optional)						
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OF

AME OF COMMITTEE (In Fi	ess			saction ID : SC/10.4755		
John Mills for Cong	•	☐ Memo Ite	Election: 2018    X   Primary   General			
Mailing Address 1940 Boardwalk Drive				Other (specify) ▼		
City		State	ZIP Code	✗ Personal Funds of the Candidate		
Miramar Beach		FL	32550	r ersonal r unds of the Candidate		
Original Amount of Loan		Cumulative Pa	ment To Date B	alance Outstanding at Close of This Period		
	56.34		0.00	56.34		
TERMS Date Incur	red	Г	ate Due Interest R			
M12M / D24D /	<sup>Y</sup> Ž017 <sup>Y</sup>	M M / D D	<sup>/</sup> 11/08/2018 <sup>Y</sup>	0.00 % (apr) Yes X No		
List All Endorsers or Gu	arantors (if any) to	o Loan Source				
1. Full Name (Last, First,	, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State ZIP Code			7		
2. Full Name (Last, First,	Middle Initial)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
0::	lo	710.0.1	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	7 7 7		
3. Full Name (Last, First,	Middle Initial)		Name of Employer			
Mailing Address			Occupation			
0''	0	710.0.1	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	y y w		
4. Full Name (Last, First,	Middle Initial)		Name of Employer			
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	9 9		
UBTOTALS This Period Th	is Page (optional)		······	56.34		
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OF

		100		
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4756		
LOAN SOURCE Full Name (Last, First, M	iddle Initial\			
John Mills for Congress	☐ Memo Item			
Mailing Address 1940 Boardwalk Drive		Other (specify)		
City	State	ZIP Code  Personal Funds of the Candidate		
Miramar Beach	FL	32550		
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period		
208.00		0.00 208.00		
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)		
M12M / D29D / Y Ž017 Y	M M / D D	/ Y11/Ŏ8/2Ŏ18		
List All Endorsers or Guarantors (if any)	to Loan Source			
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
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SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line on	ly)	······································		
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Transaction ID: SC/10.4106 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary MILLS, Ralph, John, , III General Mailing Address 1940 Boardwalk Drive Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D24D M 06M ž014 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4116 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Memo Item Primary MILLS, Ralph, John, , III General Mailing Address 1940 Boardwalk Drive Other (specify) City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 4234.94 0.00 4234.94 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) D 18D M 07M ž014 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 4234.94 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

	OMMITTEE (In Full) s for Congress				Tra	insaction ID : SC/10.4197	
LOAN SOURCE Full Name (Last, First, Middle Initial)  MILLS, Ralph, John, , III						Item Election: Primary General	
Mailing Ad 1940 Boar	ddress dwalk Drive					Other (specify) ▼	
City			State	ZIP Co		▼ Personal Funds of the Candidate	
Miramar Be	each		FL	32550			
Original	Amount of Loan		Cumulative Pa	yment To	Date	Balance Outstanding at Close of This Period	
L.	100	0.00	2		0.00	1000.00	
TERMS	Date Incurred		Γ	Date Due	Interest (If none,		
M 09M	/ D08D / Y Ž01Š	Y	M M / D D	/ Y	YYY	% (apr) Yes X No	
List All E	ndorsers or Guarantors	(if any) t	o Loan Source				
1. Full N	ame (Last, First, Middle	Initial)			Name of Employer		
Mailin	g Address				Occupation		
011		la	T=15 0 1		Amount Guaranteed		
City		State	ZIP Code		Outstanding:		
2. Full Na	ıme (Last, First, Middle I	nitial)			Name of Employer		
Mailing	Address				Occupation		
		Ta	T		Amount Guaranteed		
City		State	ZIP Code		Outstanding:	7	
3. Full Na	ıme (Last, First, Middle I	nitial)			Name of Employer		
Mailing	Address				Occupation		
		T_	T ·		Amount Guaranteed		
City		State	ZIP Code		Outstanding:	7	
4. Full Na	ıme (Last, First, Middle I	nitial)			Name of Employer		
Mailing	Mailing Address				Occupation		
					Amount		
City		State	ZIP Code		Guaranteed Outstanding:	9 9 9	
SUBTOTALS	This Period This Page	(optional).				1000.00	
	s Period (last page in th				<u> </u>	, 1000.00	
0	andina halassa	INE A A :		- II 15	na Cabadata B	famous to assess the Francis	
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

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Transaction ID: SC/10.4299 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary MILLS, Ralph, John, , III General Mailing Address 1940 Boardwalk Drive Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3850.64 0.00 3850.64 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) D02D M01M ž016 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3850.64 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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OF

AME OF COMMITTEE (In Full)  John Mills for Congress					Transac	tion ID : SC/10.4337	
LOAN SOURCE Full Name (Last, First, Middle Initial)  MILLS, Ralph, John, , III  Mailing Address					Memo Item	Election: 2016	
1940 Boardwalk Drive							
City		State	ZIP Co	de			
Miramar Beach		FL	32550			Personal Funds of the Candid	ate
Original Amount of Loan		Cumulative Pay	ment To	Date	Balaı	nce Outstanding at Close of This Pe	riod
345	.33	3		0.0	0	345.33	
TERMS Date Incurred		D	ate Due		Interest Rate (If none, enter		
M06M / D30D / Y Z016	Y	// M / D D	/ Y	YYY	0.0	0/ () Voc X	No
List All Endorsers or Guarantors	(if any) to	Loan Source					
1. Full Name (Last, First, Middle In	nitial)			Name of En	nployer		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding		y	
2. Full Name (Last, First, Middle In	l itial)			Name of Employer			
Mailing Address				Occupation			
	1			Amount			
City	State	ZIP Code		Guaranteed Outstanding		7 7	
3. Full Name (Last, First, Middle In	itial)	1		Name of En	nployer		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding		7	
4. Full Name (Last, First, Middle In	itial)	-		Name of En	nployer		
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding		7	
SUBTOTALS This Period This Page (optional) 345.33  OTALS This Period (last page in this line only)							
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Use separate schedule(s) for each category of the Detailed Summary Page

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		100			
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID: SC/10.4342			
LOAN SOURCE Full Name (Last, First, Mi	ddla Initial\				
MILLS, Ralph, John, , III	☐ Memo Item    Election: 2018   ▼ Primary   General				
Mailing Address 1940 Boardwalk Drive		Other (specify) ▼			
City	State	ZIP Code  Personal Funds of the Candidate			
Miramar Beach	FL	32550			
Original Amount of Loan	Cumulative Pag	yment To Date Balance Outstanding at Close of This Period			
1500.00		0.00 1500.00			
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)			
M07 <sup>M</sup> / D18 <sup>D</sup> / Y Ž016 Y	M M / D D	/ Poěmaňd Y 0.00 % (apr) Yes ▼ No			
List All Endorsers or Guarantors (if any)	to Loan Source				
Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)	<u>.</u>	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
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SUBTOTALS This Period This Page (optional)					
TOTALS This Period (last page in this line onl	y)	• • • • • • • • • • • • • • • • • • •			
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

		100			
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4343			
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)	Memo Item Election: 2018			
MILLS, Ralph, John, , III	Memo Item    Clection: 2018				
Mailing Address 1940 Boardwalk Drive		Other (specify) ▼			
City	State	ZIP Code  Personal Funds of the Candidate			
Miramar Beach	FL	32550			
Original Amount of Loan	Cumulative Page	yment To Date Balance Outstanding at Close of This Period			
300.00		0.00 300.00			
TERMS Date Incurred		late Due Interest Rate Secured: (If none, enter 0)			
M09 <sup>M</sup> / D06 <sup>D</sup> / Y Z016 Y	M M / D D	✓ Pěmaňd Ý 0.00 % (apr) Yes 🗶 No			
List All Endorsers or Guarantors (if any) t	to Loan Source				
Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)  Name of Employer					
Mailing Address		Occupation			
	T	Amount			
City	ZIP Code	Guaranteed Outstanding:			
SUBTOTALS This Period This Page (optional)					
300.00					
TOTALS This Period (last page in this line only	y)	· · · · · · · · · · · · · · · · · · ·			
Carry outstanding balance only to LINE 3, Sc	hedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.			

Use separate schedule(s) for each category of the Detailed Summary Page

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OF

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AME OF COMMITTEE (In Full) Iohn Mills for Congress			Transaction ID : SC/10.4344
LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III  Mailing Address 1940 Boardwalk Drive	First, Mid	ddle Initial)	☐ Memo Item  Election: 2018   Primary  General  Other (specify) ▼
City		State	ZIP Code
Miramar Beach		FL	32550 Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pay	yment To Date Balance Outstanding at Close of This Period
500	0.00		0.00 500.00
TERMS Date Incurred		D	Date Due Interest Rate Secured: (If none, enter 0)
M09 <sup>M</sup> / D23 <sup>D</sup> / Y Ž016	Y	M M / D D	/ Y Děmaňd Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors	(if any) t	o Loan Source	
1. Full Name (Last, First, Middle I	nitial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle In	itial)	1	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed
City		ZIP Code	Outstanding:
4. Full Name (Last, First, Middle In	iitiai)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (			, , , , , ,
	NE 3, Scl	nedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4351 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary MILLS, Ralph, John, , III General Mailing Address 1940 Boardwalk Drive Other (specify)  $\blacktriangledown$ City State ZIP Code Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D02D M 05M Ž017 Děmaňd x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 500.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4357 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary MILLS, Ralph, John, , III General Mailing Address 1940 Boardwalk Drive Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 150.00 0.00 150.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>26<sup>D</sup> M 07M Ž017 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 150.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: SC/10.4358 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary MILLS, Ralph, John, , III General Mailing Address 1940 Boardwalk Drive Other (specify)  $\blacktriangledown$ State ZIP Code City X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 750.00 0.00 750.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>13<sup>D</sup> M09M Ž017 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 750.00 TOTALS This Period (last page in this line only) ...... 20434.55 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

NAME OF COMMITTEE (In Full)

#### SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

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J	John Mills for Congress				
	A. Full Name (Last, First, Middle Initial) of De Law Office of James C. Thoma	Nature of Debt (Purpose): Legal and Reporting Services			
-	Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300				
	City Kansas City	State MO	Zip Code 64153		
	Outstanding Balance Beginning This Period			Transaction ID : SD10.4362	
	0.00				
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	375.00		0.00	375.00	
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):	
-	Mailing Address			_	
Ì	City	State	Zip Code		
	Outstanding Balance Beginning This Period  Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):	
	Mailing Address				
Ī	City	State	Zip Code		
	Outstanding Balance Beginning This Period  Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
1)	SUBTOTALS This Period This Page (optional)	375.00			
2)	TOTALS This Period (last page this line number only)			375.00	
3)	TOTAL OUTSTANDING LOANS from Schedule C (last page only)			20434.55	
4)	ADD 2) and 3) and carry forward to appropri	20809.55			