10/14/2019 16 : 12

PAGE 1 / 53 -

FFC I	ND DISBU	F RECEIPTS JRSEMENTS rized Committee		Office Use Only
1. NAME OF T COMMITTEE (in full)	YPE OR PRINT 🔻	Example: If typing over the lines.	g, type 12FE4M	5
John Mills for Congress				
ADDRESS (number and street)	1940 Boardwalk Drive			
▼ Check if different				
than previously reported. (ACC)	Miramar Beach			32550
2. FEC IDENTIFICATION NUM	MBER 🔻	CITY A	STATE 🔺	ZIP CODE
C C00565366	3.	IS THIS NEW REPORT (N)	OR AMEN (A)	DED STATE ▼ DISTRICT
 4. TYPE OF REPORT (Chool) (a) Quarterly Reports: April 15 Quarterly Reports July 15 Quarterly Reports 	port (Q1)	12-Day PRE -Election Repo Primary (12P)	General	
Cotober 15 Quarterly		Election on	D D / Y Y Y	in the State of
January 31 Year-End	Report (YE) (c)	30-Day POST -Election Rep General (30G		OR) Special (30S)
Termination Report (T	ER)	Election on	D D / Y Y Y Y	in the State of
5. Covering Period 07	/ D D / Y	2019 through	M M / D D / 09 30	2019
I certify that I have examined this Type or Print Name of Treasurer	Report and to the b Adams, Christopher		pelief it is true, correct ar	nd complete.
Adams Signature of Treasurer	, Christopher, , ,	[Electronically I	Tiled] Date	/ D D / Y Y Y Y 14 2019
NOTE: Submission of false, erroneou	us, or incomplete info	rmation may subject the pers	on signing this Report to	the penalties of 52 U.S.C. §30109
Office Use Only				FEC FORM 3 (Revised 05/2016)

Im	age# 2	201910149163846090		
	_	FEC Form 3 (Revised 05/2016)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 53
		or Type Committee Name n Mills for Congress		
F	Report	t Covering the Period: From:	07 / D D / Y Y Y Y 01 / 2019 To:	M 09 / D D / Y Y Y Y 30 / 2019
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	0.00	805.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	805.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	1859.95	8801.49
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1859.95	8801.49
8.		sh on Hand at Close of porting Period (from Line 27)	367.52	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	41455.87	

For further information contact:

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

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

Image#	20191	01491	63846091
mayem	20131	01431	03040031

Write	FEC Form 3 (Revised 05/2016) or Type Committee Name	DETAILED SUMMARY PAGE of Receipts	PAGE 3 / 53
	n Mills for Congress		
Repor	t Covering the Period: From:	07 / D D / Y Y Y Y Y 01 2019	To: 09 / D D / Y Y Y Y 30 2019
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CC	NTRIBUTIONS (other than loans) FROM:		
(a)	Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	0.00	300.00
	(ii) Unitemized	0.00	505.00
	(iii) TOTAL of contributions from individuals	0.00	805.00
(b)	Political Party Committees	0.00	0.00
(c)	Other Political Committees (such as PACs)	0.00	0.00
(d) (e)	The Candidate TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	805.00
	ANSFERS FROM OTHER THORIZED COMMITTEES	0.00	0.00
13. LO			
(a)	Made or Guaranteed by the Candidate	3000.00	9234.94
(b)	All Other Loans	0.00	0.00
(c)	TOTAL LOANS (add Lines 13(a) and (b))	3000.00	9234.94
EX	FSETS TO OPERATING PENDITURES Ifunds, Rebates, etc.)	0.00	0.00
	HER RECEIPTS vidends, Interest, etc.)	0.00	0.00
11(TAL RECEIPTS (add Linese), 12, 13(c), 14, and 15)urry Total to Line 24, page 4)	3000.00	10039.94

FEC Form 3 (Revised 05/2016) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 1859.95 8801.49 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 920.16 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 920.16 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 2780.11 8801.49 (add Lines 17, 18, 19(c), 20(d), and 21)

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7		7		147.63
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7		7		3000.00
25.	SUBTOTAL (add Line 23 and Line 24)		7		7	-	3147.63
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		,		7	-	2780.11
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7	-	367.52

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4 / 53

SCHEDULE A (FEC Form 3)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 5 OF 53							
			(check only one)								
IT	EMIZED RECEIPTS		for each category of the	11a 11b 11c 11d							
_			Detailed Summary Page	12 🗶 13a 13b 14 15							
A	ny information copied from such Reports and S	Statements m	nay not be sold or used by any	person for the purpose of soliciting contributions							
				ee to solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full)										
$ \rangle$	· ·										
/	John Mills for Congress										
<u> </u>	Full Name (Last, First, Middle Initial)										
	MILLS, Ralph, John, , III										
Α.	Mailing Address 1940 Boardwalk Drive			Date of Receipt							
	Boardwark Drive			07 12 2019							
	City	State	Zip Code								
	Miramar Beach	FL	32550	Transaction ID : SA13A.4899							
			02000								
	FEC ID number of contributing	С не	FL01143	Amount of Each Receipt this Period							
	federal political committee.	U ne									
	Name of Employer	Occupation	-								
	Name of Employer	Occupation Requested		9 9 9							
	Requested	•		Memo Item							
	Receipt For:	Election C	ycle-to-Date 🔻								
	Primary General		9212.92	1							
	Other (specify)		9212.92								
	Full Name (Last, First, Middle Initial)										
В.	MILLS, Ralph, John, , III			Date of Receipt							
	Mailing Address 1940 Boardwalk Drive	M M / D D / Y Y Y Y									
				07 18 2019							
	City	State	Zip Code	Transaction ID : SA13A.4900							
	Miramar Beach	FL	32550								
	FEC ID number of contributing	0									
	federal political committee.	Сны	FL01143	Amount of Each Receipt this Period							
				1200.00							
	Name of Employer	Occupation	ר	, , , ,							
	Requested	Requested		Mama Itam							
	Receipt For:	Election C	ycle-to-Date 🕳	Memo Item							
	Primary General		· · · · · · · · · ·	1							
	Other (specify) v	1	10412.92								
			, , , , , , , , , , , , , , , , , , , ,								
	Full Name (Last, First, Middle Initial)										
C.	MILLS, Ralph, John, , III			Date of Receipt							
0.	Mailing Address 1940 Boardwalk Drive			M M / D D / Y Y Y Y							
				09 10 2019							
	City	State	Zip Code	Transaction ID : SA13A.4901							
	Miramar Beach	FL	32550								
	FEC ID number of contributing										
	federal political committee.	С н6	FL01143	Amount of Each Receipt this Period							
				4500.00							
	Name of Employer	Occupation	า	1500.00							
	Requested	Requested									
	Receipt For:	Election C	ycle-to-Date	Memo Item							
	Primary General		· · · · · · · · · · · · · · · · · · ·								
	Other (specify)		11912.92								
			9 9 9								
Г											
	SUBTOTAL of Receipts This Page (optional)			3000.00							
F				, ,							
1	OTAL This Period (last page this line number of	onlv)		3000.00							
1.1				, , , , , , , , , , , , , , , , , , , ,							

IT An				y of the ry Page used by any	FOR LINE NUMBER: PAGE 6 OF 53 (check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Image: Check only one) Image: Check only one) Image: Image: Check only one) Image: Check only one) Ima
or	for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) John Mills for Congress	ame and a	address of any pol	itical committ	ee to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Law Office of James C. Thomas I Mailing Address 7509 NW Tiffany Springs Pkwy	11			Date of Disbursement
	City Kansas City	State MO	Zip Code 64153		FEC Identification Number
	Purpose of Disbursement Payment of incurred expense	inio	04133	001	C
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period
	Office Sought: House Disburse Senate President State: District:	ement For Primary Other (s	: ☐ General pecify) ▼		1112.45 Transaction ID : SB17.4890 Memo Item
В.	Full Name (Last, First, Middle Initial) Law Office of James C. Thomas I Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300	11			Date of Disbursement
	City Kansas City Purpose of Disbursement	State MO	Zip Code 64153		FEC Identification Number
	Payment of incurred expense Candidate Name			001 Category/ Type	
	Office Sought: House Disburse Senate President State: District:	ement For Primary Other (s	: ☐ General pecify) ▼		162.50 Transaction ID : SB17.4893 Memo Item
C.	Full Name (Last, First, Middle Initial) Law Office of James C. Thomas I	11			Date of Disbursement
	Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300				
	City Kansas City	State MO	Zip Code 64153		FEC Identification Number
	Purpose of Disbursement Payment of incurred expense Candidate Name			001 Category/ Type	Amount of Each Disbursement this Period
	Office Sought: House Disburse Senate President State: District:	ement For Primary Other (s	General	JF-	162.50 Transaction ID : SB17.4895 Memo Item
_	SUBTOTAL of Disbursements This Page (optional				

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate scl for each categor Detailed Summa	y of the ry Page	FOR LINE NUMBER: (check only one) PAGE 7 OF 53 X 17 18 19a 19b 20a 20b 20c 21
	for commercial purposes, other than using the NAME OF COMMITTEE (In Full) John Mills for Congress				person for the purpose of soliciting contributions ee to solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Law Office of James C. Thomas				Date of Disbursement
	Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300 City Kansas City	State MO	Zip Code 64153		FEC Identification Number
	Purpose of Disbursement Payment of incurred expense			001	C
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period
	Senate President	rsement For Primary Other (s			422.50 Transaction ID : SB17.4897 Memo Item
в.	State: District: Full Name (Last, First, Middle Initial) Mailing Address				Date of Disbursement
	City	State	Zip Code		FEC Identification Number
	Purpose of Disbursement			_ · · ·	C
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period
	Office Sought: House Disbur Senate President State: District:	rsement For Primary Other (s			Memo Item
c.	Full Name (Last, First, Middle Initial)				Date of Disbursement
	Mailing Address				
	City	State	Zip Code		FEC Identification Number
Purpose of Disbursement				Category/ Type	C Amount of Each Disbursement this Period
	Senate President	rsement For Primary Other (s	General		Memo Item
	State: District: SUBTOTAL of Disbursements This Page (option	nal)			► 422.50
-	FOTAL This Period (last page this line number of	only)			

IT	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS		Use separate scl for each categor Detailed Summar	y of the ry Page	FOR LINE NUMBER: PAGE 8 OF 53 (check only one) 17 18 19a ¥ 19b 20a 20b 20c 21
	ny information copied from such Reports and Stat for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) John Mills for Congress				
Α.	Full Name (Last, First, Middle Initial) Start Skydiving, LLC Mailing Address 1711 Runway Drive				Date of Disbursement
	City Middletown Purpose of Disbursement	State OH	Zip Code 45042		FEC Identification Number
	Candidate Name John Mills for Congress			004 Category/ Type	C C00565366 Amount of Each Disbursement this Period
	Office Sought: X House Disburse Senate Y President State: FL District: 01		2020		920.16 Transaction ID : SB19B.4889 Memo Item
В.	Full Name (Last, First, Middle Initial) Mailing Address				Date of Disbursement
	City Purpose of Disbursement	State	Zip Code		FEC Identification Number
	Candidate Name			Category/ Type	
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (sp	General Decify) ▼		Memo Item
c.	Full Name (Last, First, Middle Initial)				Date of Disbursement
	City	State	Zip Code		FEC Identification Number
	Purpose of Disbursement				
		ement For:		Category/ Type	Amount of Each Disbursement this Period
_	State: District:	Primary Other (sp	General Decify) ▼		Memo Item
	SUBTOTAL of Disbursements This Page (optional)			920.16
	TOTAL This Period (last page this line number on	lly)			920.16

age# 201310143103040037				PAGE 9 OF 53		
HEDULE C (FEC Form 3) ANS		for eac	Use separate schedule(s) for each category of the Detailed Summary Page			
ME OF COMMITTEE (In Full)			Transactio	on ID : SC/10.4711		
LOAN SOURCE Full Name (Last, First, M John Mills for Congress	iddle Initial)		Memo Item	Election: 2018 X Primary General		
Mailing Address 1940 Boardwalk Drive				Other (specify) V		
City Miramar Beach	State FL	ZIP Code 32550		Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	ment To Date	Balano	ce Outstanding at Close of This Perio		
126.34	,	0	.00	126.34		
TERMS Date Incurred	I	ate Due	Interest Rate (If none, enter 0	Secured:		
^M 09 ^M / ^D 21 ^D / ^Y Ž017 ^Y	M M / D I	[/] ^Y 11/Ŏ8/2Ŏ18 ^Y	0.00			
List All Endorsers or Guarantors (if any)	to Loan Source					
1. Full Name (Last, First, Middle Initial)		Name of E	Employer			
Mailing Address		Occupatio	n			
City State	ZIP Code	Amount Guarantee Outstandir		y		
2. Full Name (Last, First, Middle Initial)		Name of I	Employer			
Mailing Address		Occupatio	n			
City State	ZIP Code	Amount Guarantee Outstandir		y		
3. Full Name (Last, First, Middle Initial)		Name of E	Name of Employer			
Mailing Address		Occupatio	n			
City State	ZIP Code		Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of E	Employer			
Mailing Address		Occupatio	n			
City State	ZIP Code	Amount Guarantee Outstandir		y 1 1 y 1 1 x 1		
UBTOTALS This Period This Page (optional)	, 		·····	126.34		

				PAGE 10 OF 53	
CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4742	
LOAN SOURCE Full Name (Last, Firs John Mills for Congress	t, Middle Initial)		Memo Item	Election: 2018 X Primary General	
Mailing Address 1940 Boardwalk Drive				Other (specify)	
City Miramar Beach	State FL	ZIP Code 32550		X Personal Funds of the Candidat	
Original Amount of Loan 303.01	Cumulative Pa	yment To Date	Bala	nce Outstanding at Close of This Peric 303.01	
TERMS Date Incurred M10 ^M / 04 ^D / Y 2017 Y		Date Due	Interest Rate (If none, enter 8 ^Y 0.0		
List All Endorsers or Guarantors (if a 1. Full Name (Last, First, Middle Initia		Name	of Employer		
Mailing Address	·	Occup	pation		
City Sta	te ZIP Code	Amour Guara Outsta	nteed	y y	
2. Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Оссир			
City Sta	ate ZIP Code	Amour Guara Outsta	nteed	y y	
3. Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Оссир			
City Sta	te ZIP Code	Amou Guara Outsta			
4. Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	pation		
City Sta	te ZIP Code	Amour Guara Outsta		y	
UBTOTALS This Period This Page (option DTALS This Period (last page in this line			— H	303.01	

CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th	PAGE 11 OF 53 FOR LINE NUMBER: (check only one)	
ME OF COMMITTEE (In Full)			Transaction ID : SC/10.4743		
ohn Mills for Congress					
LOAN SOURCE Full Name (Last, First, Mic John Mills for Congress	Idle Initial)		Memo Item	Election: 2018 Y Primary General	
Mailing Address 1940 Boardwalk Drive				Other (specify)	
City Miramar Beach	State FL	ZIP Code 32550	e	Personal Funds of the Candidate	
Original Amount of Loan Cumulative Payment To			Date Bala	nce Outstanding at Close of This Perio	
TERMS Date Incurred M10 ^M / D05 ^D / Y Ž017 Y	M M / D D	Date Due	Interest Rate (If none, enter 08/2018 ^Y 0.	0) 00 0/ / N V V V V	
List All Endorsers or Guarantors (if any) t	o Loan Source			,	
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	e ZIP Code		Amount Guaranteed Outstanding:	g 1 1 g 1 1 a 1	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	State ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line only				4.24 7 7 7 7	

0					PAGE 12 OF 53	
CHEDULE C (FEC Form 3) DANS				Use separate schedule for each category of t Detailed Summary Pag		
ME OF COMMITTEE (In Ful ohn Mills for Congres	,			Transac	ction ID : SC/10.4744	
LOAN SOURCE Full Nam John Mills for Congr	•	dle Initial)		Memo Item	Election: 2018	
Mailing Address 1940 Boardwalk Drive					General Other (specify) ▼	
		2 1. 1				
City Miramar Beach		State FL	ZIP Code 32550)	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	ayment To D	ate Bala	ance Outstanding at Close of This Perio	
<u> </u>	35.00		7	0.00	35.00	
TERMS Date Incurre	d		Date Due	Interest Rate (If none, enter		
M10 ^M / D10 ^D / Y	ž017 ^v	M M / D I	[/] ^Y 11/Č			
List All Endorsers or Gua		o Loan Source				
1. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	· · · · · · · ·	
2. Full Name (Last, First, N	liddle Initial)		1	Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	7 7	
3. Full Name (Last, First, N	1iddle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	9	
4. Full Name (Last, First, N	1iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
UBTOTALS This Period This				······	35.00	

				PAGE 13 OF 53	
SCHEDULE C (FEC Form 3) LOANS			Use separate schedule for each category of th Detailed Summary Pag	(S) FOR LINE NUMBER:	
NAME OF COMMITTEE (In Full) John Mills for Congress			Transac	tion ID : SC/10.4745	
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		Memo Item	Election: 2018	
John Mills for Congress				X Primary General	
Mailing Address 1940 Boardwalk Drive				Other (specify) V	
City	State	ZIP Code	e		
Miramar Beach FL 32550				Y Personal Funds of the Candidate	
Original Amount of Loan	Original Amount of Loan Cumulative Payment To			nce Outstanding at Close of This Period	
21.63			0.00	21.63	
TERMS Date Incurred	C	ate Due	Interest Rate (If none, enter		
M10 ^M / D12 ^D / Y Ž017 Y	M M / D D	′ [×] 11/č	Ŏ8/2Ŏ18 ^Ŷ 0.0		
List All Endorsers or Guarantors (if any) t	to Loan Source				
1. 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 State	ZIP Code		Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	City State ZIP Code		Guaranteed Outstanding:	7 7 7 7	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City	ZIP Code		Amount Guaranteed Outstanding:	y y	
SUBTOTALS This Period This Page (optional).	y)			, 21.63	
Carry outstanding balance only to LINE 3, Sci	hedule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.	

5				PAGE 14 OF 53	
CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full) ohn Mills for Congress			Transac	tion ID : SC/10.4746	
LOAN SOURCE Full Name (Last, First, Mic John Mills for Congress	Idle Initial)		Memo Item	Election: 2018	
Mailing Address 1940 Boardwalk Drive				General Other (specify) ▼	
City	State	ZIP Code	e		
Miramar Beach FL 32550				Personal Funds of the Candidate	
Original Amount of Loan Cumulative Payment To			Date Bala	nce Outstanding at Close of This Perio	
7.95	9		0.00	7.95	
TERMS Date Incurred	D	ate Due	Interest Rate (If none, enter		
M10 ^M / D17 ^D / Y Ž017 Y	M M / D D	′ ^Y 11/Č	Ŏ8/2Ŏ18 ^Ÿ 0.0		
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	City State ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1	
UBTOTALS This Period This Page (optional))			7.95	

				PAGE 15 OF 53		
SCHEDULE C (FEC Form 3) LOANS			Use separate schedule for each category of th Detailed Summary Pag	(S) FOR LINE NUMBER:		
NAME OF COMMITTEE (In Full) John Mills for Congress			Transac	tion ID : SC/10.4747		
LOAN SOURCE Full Name (Last, First, M	iddle Initial)		Memo Item	Election: 2018		
John Mills for Congress				X Primary General		
Mailing Address 1940 Boardwalk Drive				Other (specify) V		
City	State	ZIP Code	9			
Miramar Beach FL 32550				Y Personal Funds of the Candidate		
Original Amount of Loan	Original Amount of Loan Cumulative Payment To			nce Outstanding at Close of This Period		
72.49			0.00	72.49		
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter			
^M 10 ^M / ^D 30 ^D / ^Y Ž017 ^Y	M M / D D	′ [×] 11/ἀ	Ŏ8/2Ŏ18 ^Ÿ 0.0			
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 State	State 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:	7		
4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1		
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line on	ly)			, 72.49		
Carry outstanding balance only to LINE 3, So	chedule D, for this	s line. If no	o Schedule D, carry forw	ard to appropriate line of Summary.		

luge# 201010140100	0-010-				PAGE 16 OF 53	
CHEDULE C (FEC Form 3) DANS				Use separate schedule(s) for each category of the Detailed Summary Page		
ame of committ ohn Mills for C	()			Transac	ction ID : SC/10.4748	
LOAN SOURCE John Mills for	Full Name (Last, First, Mic r Congress	ddle Initial)		Memo Item	Election: 2018 Primary General	
Mailing Address 1940 Boardwalk D	rive				Other (specify) ▼	
City Miramar Beach		State FL	ZIP Code 32550	e	Personal Funds of the Candidate	
Original Amount	Original Amount of Loan Cumulative Payment To			Date Bala	ance Outstanding at Close of This Perio	
,	196.54	,		0.00	196.54	
TERMS D	ate Incurred	C	Date Due	Interest Rate (If none, enter		
^M 10 ^M / ^D 3	1 ^D [/] ^Y Ž017 ^Y	M M / D D	/ ^Y 11/0	Ŏ8/2Ŏ18 ^Ÿ 0.	00 % (apr) Yes 🗶 No	
List All Endorse	rs or Guarantors (if any) t	o Loan Source				
1. Full Name (La	1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Addre	ess			Occupation		
City	State	State ZIP Code			Amount Guaranteed Outstanding:	
2. Full Name (Las	st, First, Middle Initial)			Name of Employer		
Mailing Addres	SS			Occupation		
City	State	e ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Las	st, First, Middle Initial)			Name of Employer		
Mailing Addres	SS			Occupation		
City	State	State ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Addres	SS			Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9	
	eriod This Page (optional).			L	196.54	
Carry outstanding t	palance only to LINE 3, Sch	nedule D, for this	s line. If n	o Schedule D, carry forv	vard to appropriate line of Summa	

	Use separate sched for each category o Detailed Summary F	of the (check only one) × 13a	
	Trans	saction ID : SC/10.4749	
Middle Initial)	☐ Memo Ite	em Election: 2018	
		Other (specify) ▼	
State FL	ZIP Code 32550	Personal Funds of the Candidate	
Cumulative Pa	nent To Date B	alance Outstanding at Close of This Peric	
	0.00	41.21	
I	te Due Interest R (If none, er		
M M / D I	[/] ^Y 11/Ŏ8/2Ŏ18 ^Y	0.00 % (apr) Yes X No	
) to Loan Source			
	Name of Employer	Name of Employer	
	Occupation		
ZIP Code	Guaranteed		
	Name of Employer		
	Occupation		
ZIP Code	Amount Guaranteed Outstanding:		
	Name of Employer		
	Occupation		
State ZIP Code		y y	
	Name of Employer		
	Occupation		
ZIP Code	Amount Guaranteed Outstanding:	y y	
	······································	41.21	
	FL Cumulative Payr Da M <m< td=""> / Da M<m< td=""> / Da ZIP Code ZIP Code ZIP Code</m<></m<>	for each category of Detailed Summary I Trans Middle Initial) Image: Memory I State ZIP Code FL 32550 Cumulative Payment To Date Date Due Interest Ferrit (If none, et al.) Mim 0 0.00 Date Due Interest Ferrit (If none, et al.) Mim 0 0 Vi to Loan Source Name of Employer Occupation Amount ZIP Code Occupation Amount Guaranteed Outstanding: Occupation	

3)				
			Use separate schedule(s) for each category of the Detailed Summary Page	
			Transac	ction ID : SC/10.4750
rst, Mido	dle Initial)		🗌 Memo Item	Election: 2018 X Primary General
				Other (specify) ▼
	State FL	ZIP Code 32550	e	Personal Funds of the Candidate
Original Amount of Loan Cumulative Payment To			Date Bala	ance Outstanding at Close of This Peric
8			0.00	804.08
	D	ate Due	Interest Rate (If none, enter	
Y	M / D D	′ ^v 11/0	Ŏ8/2Ŏ18 ^Ÿ 0.	00 % (apr) Yes 🗴 No
any) to	Loan Source			
1. Full Name (Last, First, Middle Initial)			Name of Employer	
			Occupation	
State ZIP Code			Amount Guaranteed Outstanding:	
al)			Name of Employer	
			Occupation	
State	e ZIP Code		Guaranteed	y y
al)			Name of Employer	
			Occupation	
State ZIP Code			Guaranteed	y y
4. Full Name (Last, First, Middle Initial)			Name of Employer	
			Occupation	
State	ZIP Code		Guaranteed	y y
				7 7 7 804.08 7 7 7
	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	Cumulative Pay Cumula	State ZIP Code FL 32550 Cumulative Payment To D 8 Date Due * M <m< td=""> / Date Due * M<m< td=""> / Date Due * M<m< td=""> / Date Due * M<m< td=""> / M<m< td=""> / Date Due * M<m< td=""> / M<m< td=""> / M<m< td=""> / Date Due * M<m< td=""> / M M M M M M M M M M M M M M M M M</m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<></m<>	State ZIP Code FL 32550 Cumulative Payment To Date Bala 8 0.00 Date Due Interest Rate (If none, enter Y M M / D / Y M Y M M / D / Y M M / D / Y M M / D / Y M M / D / Y 1/08/2018 Interest Rate (If none, enter (If none, enter (If none, enter any) to Loan Source Name of Employer Occupation Amount Guaranteed Outstanding: al) Name of Employer Occupation Amount Guaranteed Outstanding: al) Name of Employer Occupation Amount Amount Guaranteed Outstanding: Interest Rate al) Name of Employer Occupation Amount Amount

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CHEDULE C (FEC Form 3) DANS				Use separate schedule for each category of the Detailed Summary Pag	e(s) FOR LINE NUMBER:	
ME OF COMMITTEE (In Full)				Transac	ction ID : SC/10.4751	
LOAN SOURCE Full Name (Las	st, First, Mic	Idle Initial)		Memo Item	Election: 2018	
John Mills for Congress					General	
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City		State	ZIP Code	Э		
Miramar Beach		FL	32550		Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	ayment To D	Date Balance Outstanding at Close of This Period		
<u> </u>	19.08			0.00	19.08	
TERMS Date Incurred		[Date Due	Interest Rate (If none, enter		
M11M / D08D / Y Ž01	Ť Y	M M / D C	° 11/0	Ď8/2Ď18 ^Υ 0.	00 % (apr) Yes X No	
List All Endorsers or Guaranto		o Loan Source				
1. Full Name (Last, First, Middle	e 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	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	State	ZIP Code		Guaranteed Outstanding:	g. 1. 1. g. 1. 1. a. 1.	
JBTOTALS This Period This Page DTALS This Period (last page in t				·····	19.08	

CHEDULE C (FEC Form 3) DANS		Use separate so for each catego Detailed Summa	ry of the (check only one) X 13a		
ME OF COMMITTEE (In Full)		т	ransaction ID : SC/10.4752		
LOAN SOURCE Full Name (Last, First, M John Mills for Congress	iddle Initial)		Ditem Election: 2018		
Mailing Address 1940 Boardwalk Drive			Other (specify) ▼		
City Miramar Beach	State FL	ZIP Code 32550	Personal Funds of the Candidat		
Original Amount of Loan	Cumulative Pa	nent To Date	Balance Outstanding at Close of This Perio		
93.73		0.00	93.73		
TERMS Date Incurred			st Rate Secured: e, enter 0)		
M11M / D08D / Y Ž017 Y	M M / D I	[/] ^Y 11/Ŏ8/2Ŏ18 ^Y	0.00 % (apr) Yes 🗶 No		
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · ·		
3. Full Name (Last, First, Middle Initial)	I	Name of Employer	Name of Employer		
Mailing Address		Occupation			
City State	State ZIP Code				
4. Full Name (Last, First, Middle Initial)	·	Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · ·		
UBTOTALS This Period This Page (optional)		······	93.73		

te schedule(s) tegory of the mmary Page FOR LINE NUMBER: (check only one)		
Iemo Item Election: 2018		
Image: Secured: Image: Secured: Image: Secured: Image: Secured:		
General Other (specify) ▼ X Personal Funds of the Candidate Balance Outstanding at Close of This Period 6.00 terest Rate Secured:		
Other (specify) ▼ ✓ Personal Funds of the Candidate Balance Outstanding at Close of This Period 6.00 terest Rate Secured:		
Balance Outstanding at Close of This Period 6.00 terest Rate Secured:		
Balance Outstanding at Close of This Period 6.00 terest Rate Secured:		
terest Rate Secured:		
terest Rate Secured:		
none, enter 0)		
0.00 % (apr) Yes X No		
Name of Employer		
byer		
Guaranteed Outstanding:		
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Dyer		
Dyer		
olo		

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CHEDULE C (FEC Form 3) DANS				Use separate schedule for each category of t Detailed Summary Pag	e(s) FOR LINE NUMBER: he (check only one) X 13a
ME OF COMMITTEE (In Ful ohn Mills for Congres				Transad	ction ID : SC/10.4754
LOAN SOURCE Full Nam	e (Last, First, Mic	Idle Initial)		Memo Item	Election: 2018
John Mills for Congr	ess				X Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify)
City		State	ZIP Code	9	
Miramar Beach		FL	32550		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Perio
<u> </u>	308.00			0.00	308.00
TERMS Date Incurre	d		Date Due	Interest Rate	
M12M / D22D / Y	Ž017 ^v	M M / D	D / ¥11/0	00/2010	00 % (apr) Yes 🗶 No
List All Endorsers or Gua	rantors (if any) to	o Loan Source			
1. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
		1		Amount	
City	State	ZIP Code Guaranteed Outstanding:			y
2. Full Name (Last, First, N	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	7
3. Full Name (Last, First, N	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	- y
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
			_	Amount	
City	State	ZIP Code		Guaranteed Outstanding:	-y
JBTOTALS This Period This					308.00

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CHEDULE C (FEC Form 3) DANS		Use separate schedule for each category of the Detailed Summary Pag	e(s) FOR LINE NUMBER: he (check only one) X 13a			
AME OF COMMITTEE (In Full) John Mills for Congress			Transac	ction ID : SC/10.4755		
LOAN SOURCE Full Name (Last, First, Mid John Mills for Congress	ddle Initial)		🗌 Memo Item	Election: 2018 Primary General		
Mailing Address 1940 Boardwalk Drive				Other (specify) ▼		
City Miramar Beach	State FL	ZIP Code 32550	•	Y Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	yment To D	ate Bala	ance Outstanding at Close of This Period 56.34		
TERMS Date Incurred		Date Due		2 2 4		
^M 12 ^M / ^D 24 ^D / ^Y Ž017 ^Y	M M / D D	′ [×] 11/ð	(If none, enter 08/2018 [×] 0.			
List All Endorsers or Guarantors (if any) t	o Loan Source					
1. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address	Mailing Address			Occupation		
City State	State ZIP Code			y y		
2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	ZIP Code		Amount Guaranteed Outstanding:	g		
3. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	City State ZIP Code			y		
4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	ZIP Code		Amount Guaranteed Outstanding:	y y		
SUBTOTALS This Period This Page (optional).				56.34		

	orm 2)				PAGE 24 OF 53
CHEDULE C (FEC FO DANS	5111 5)		Use separate schedule for each category of t Detailed Summary Pag	he (check only one) X 13a	
ME OF COMMITTEE (In Full)				Transao	ction ID : SC/10.4756
LOAN SOURCE Full Name	•	dle Initial)		Memo Item	
John Mills for Congre	SS				Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify) ▼
City		State	ZIP Code	Э	
Miramar Beach		FL	32550		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Period
<u> </u>	208.00	7	7	0.00	208.00
TERMS Date Incurred		[Date Due	Interest Rate (If none, enter	
M12M / D29D / Y	ž017 ^Y	M M / D C	° 11/0		
List All Endorsers or Guara	ntors (if any) to	b Loan Source			
1. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
			-	Amount	
City	State	ZIP Code Guaranteed Outstanding:			y
2. Full Name (Last, First, Mic	Idle Initial)			Name of Employer	
Mailing Address				Occupation	
	1	-		Amount	
City	State	ZIP Code		Guaranteed Outstanding:	9 1 9 1 9 1 9 1
3. Full Name (Last, First, Mic	Idle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State ZIP Code			Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	7 7 7 7
JBTOTALS This Period This F					208.00

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CHEDULE C (FEC Form 3) DANS				Use separate schedule for each category of t Detailed Summary Pag	e(s) FOR LINE NUMBER: he (check only one)
ME OF COMMITTEE (In Ful ohn Mills for Congres				Transad	ction ID : SC/10.4678
LOAN SOURCE Full Nam	e (Last, First, Mid	dle Initial)		Memo Item	Election: 2018
John Mills for Congr	ess				Y Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify) ▼
City		State	ZIP Code	9	
Miramar Beach		FL	32550		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Period
7 7	400.00	2		0.00	400.00
TERMS Date Incurre	d	[Date Due	Interest Rate	
M01 ^M / D17 ^D / Y	Ž018 ^v	M M / D I	° 11/0	(If none, enter 08/2018 ^v 0.	.00
List All Endorsers or Gua	rantors (if any) to	b Loan Source			
1. Full Name (Last, First, I	Viddle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code Guaranteed Outstanding:			y
2. Full Name (Last, First, N	1iddle Initial)		1	Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	9 9 9 9 9 9
3. Full Name (Last, First, N	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State ZIP Code			Guaranteed Outstanding:	-y
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	- y
JBTOTALS This Period This					400.00

CHEDULE C (FEC Form 3) DANS		Use separate scheo for each category o Detailed Summary	of the (check only one) × 13a		
ME OF COMMITTEE (In Full)		Tran	saction ID : SC/10.4709		
LOAN SOURCE Full Name (Last, First, M John Mills for Congress	Middle Initial)	Memo Ite	em Election: 2018		
Mailing Address 1940 Boardwalk Drive			Other (specify)		
City Miramar Beach	State FL	ZIP Code 32550	Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	ment To Date E	Balance Outstanding at Close of This Perio		
2231.10		0.00	2231.10		
TERMS Date Incurred	I	ate Due Interest F (If none, e			
M03M / D31D / Y Ž018 Y	M M / D C	[/] ^Y 11/Ŏ8/2Ŏ18 ^Y	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any) to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed		
3. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address		Occupation	Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·		
UBTOTALS This Period This Page (optiona	' l()	······	2231.10		

ddle Initial)		Use separate schedule for each category of th Detailed Summary Pag Transac	he (check only one) × 13a		
-					
-		Memo Item	Election: 2018		
			Primary General		
			Other (specify)		
State FL	ZIP Code 32550)	Personal Funds of the Candidate		
Cumulative Pa	yment To Da	ate Bala	Ince Outstanding at Close of This Perio		
,		0.00	150.67		
C	Date Due	Interest Rate (If none, enter			
M M / D D	[/] ^v 08/ž	8/2Ŏ18 ^Ÿ 0.	00 % (apr) Yes X No		
o Loan Source					
	1	Name of Employer			
	(Occupation			
ZIP Code	0	Guaranteed	y		
	١	Name of Employer			
Mailing Address			Occupation		
ZIP Code		Guaranteed	y		
	١	Name of Employer			
	(Occupation			
e ZIP Code		Guaranteed	y y		
4. Full Name (Last, First, Middle Initial)					
Mailing Address					
ZIP Code	Amount Guaranteed Outstanding:		y y x .		
		H	150.67		
	M / D D O Loan Source ZIP Code ZIP Code ZIP Code ZIP Code ZIP Code ZIP Code ZIP Code	o Loan Source	(If none, enter (If noe, enter (If noe		

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CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of the Detailed Summary Pag	e(s) FOR LINE NUMBER: he (check only one)
ME OF COMMITTEE (In Full)				Transac	ction ID : SC/10.4815
LOAN SOURCE Full Name (L	ast, First, Mic	Idle Initial)		Memo Item	Election: 2018
John Mills for Congres	S				Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify) ▼
City		State	ZIP Code	Э	
Miramar Beach		FL	32550		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Period
	8500.00			700.00	7800.00
TERMS Date Incurred		[Date Due	Interest Rate	
M04 ^M / D24 ^D / Y Ž	018 ^Y	M M / D C	[/] ^Y 11/Č	(If none, enter)8/2018 ^Y 0.	
List All Endorsers or Guaran	tors (if any) to	o Loan Source)		
1. Full Name (Last, First, Mid	dle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	y
2. Full Name (Last, First, Mido	lle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	9 9 9 9 9
3. Full Name (Last, First, Mido	lle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State ZIP Code			Guaranteed Outstanding:	-y
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	y y y y
JBTOTALS This Period This Pa					7800.00

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CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of the Detailed Summary Pag	e(s) FOR LINE NUMBER: he (check only one)
ME OF COMMITTEE (In Full ohn Mills for Congres				Transac	ction ID : SC/10.4830
LOAN SOURCE Full Name	e (Last, First, Mid	Idle Initial)		Memo Item	Election: 2018
John Mills for Congr	ess				Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify) ▼
City		State	ZIP Code)	
Miramar Beach		FL	32550		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	ate Bala	ance Outstanding at Close of This Period
<u> </u>	1475.00			0.00	1475.00
TERMS Date Incurre	d		Date Due	Interest Rate (If none, enter	
M06 ^M / D15 ^D / Y	Ž018 ^Y	M M / D I	⁷ ⁴ 08/2		
List All Endorsers or Guar	rantors (if any) to	o Loan Source)		
1. Full Name (Last, First, N	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code Guaranteed Outstanding:			y
2. Full Name (Last, First, N	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Dutstanding:	9
3. Full Name (Last, First, N	liddle Initial)			Name of Employer	
Mailing Address			(Occupation	
				Amount	
City	State	State ZIP Code		Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	y
JBTOTALS This Period This				L	1475.00

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CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of th Detailed Summary Pag	e(s) FOR LINE NUMBER:
ME OF COMMITTEE (In Ful	,			Transac	tion ID : SC/10.4831
LOAN SOURCE Full Nam	e (Last, First, Mic	Idle Initial)		Memo Item	Election: 2018
John Mills for Congr	ess				Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify)
City		State	ZIP Code	9	
Miramar Beach		FL	32550		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	nce Outstanding at Close of This Perio
	600.00		7	0.00	600.00
TERMS Date Incurre	ed		Date Due	Interest Rate	
M06 ^M / D15 ^D / Y	Ž018 ^Y	M M / D	⁷ 08/2	20/2010	00 ●
List All Endorsers or Gua	rantors (if any) to	o Loan Source			
1. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State ZIP Code			Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
2. Full Name (Last, First, N	/liddle Initial)			Name of Employer	
Mailing Address				Occupation	
		1		Amount	
City	State	ZIP Code		Guaranteed Outstanding:	9 9 9 9 9
3. Full Name (Last, First, N	Aiddle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State ZIP Code			Guaranteed Outstanding:	9 1 9 1 m 1
4. Full Name (Last, First, N	Aiddle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	y y y
JBTOTALS This Period This					5 5 600.00

•					PAGE 31 OF 53
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of the Detailed Summary Pag	e(s) FOR LINE NUMBER: he (check only one)
ME OF COMMITTEE (In Fu	,			Transac	ction ID : SC/10.4832
LOAN SOURCE Full Nar	ne (Last, First, Mic	Idle Initial)		Memo Item	Election: 2018
John Mills for Cong	ress				Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify) ▼
City		State	ZIP Code	Э	
Miramar Beach		FL	32550		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Perio
	35.10		7	0.00	35.10
TERMS Date Incurr	red	I	Date Due	Interest Rate (If none, enter	
^M 06 ^M / ^D 27 ^D /	YŽ018 Y	M M / D C	08/2		
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	
				Amount	
City	State	ZIP Code Guaranteed Outstanding:			y
2. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	9 9 9 9
3. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	State ZIP Code		Guaranteed Outstanding:	- y
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	7 7 7
UBTOTALS This Period Thi					35.10

3					PAGE 32 OF 53	
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of t Detailed Summary Pag	e(s) he (check only one) × 13a		
ME OF COMMITTEE (In Ful ohn Mills for Congres				Transac	ction ID : SC/10.4841	
LOAN SOURCE Full Nam	e (Last, First, Mic	dle Initial)		Memo Item	Election: 2018	
John Mills for Congr	ess				Y Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City		State	ZIP Code	e		
Miramar Beach		FL	32550		Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Perio	
· · · · · · · · · · · · · · · · · · ·	2000.00			0.00	2000.00	
TERMS Date Incurre	d		Date Due	Interest Rate		
M07M / D05D / Y	Ž018 ^Y	M M / D I	[/] ^Y 08/2	20/2010	00 % (apr) Yes X No	
List All Endorsers or Gua	rantors (if any) t	o Loan Source				
1. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	g	
2. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	7	
3. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
			- .	Amount		
City	State ZIP Code			Guaranteed Outstanding:	- y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
			-	Amount		
City	State	ZIP Code		Guaranteed Outstanding:	-y	
JBTOTALS This Period This	1		I			

CHEDULE C (FEC OANS	Form 3)		Use separate schedule(s) for each category of the Detailed Summary Page			
NAME OF COMMITTEE (IN F	,			Transac	tion ID : SC/10.4842	
LOAN SOURCE Full Na		Idle Initial)		🗌 Memo Item	Election: 2018 X Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City Miramar Beach		State FL	ZIP Code 32550	e	Personal Funds of the Candidate	
Original Amount of Loan	2000.00	Cumulative Pa	yment To D	Date Bala 0.00	nce Outstanding at Close of This Perioc 2000.00	
TERMS Date Incu M07 ^M / 05 ^D /	Y Ž018 Y		Date Due	Interest Rate (If none, enter 28/2018 Y 0.0	0)	
List All Endorsers or Gu 1. Full Name (Last, First		o Loan Source		Name of Employer		
Mailing Address				Occupation		
City	State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
3. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
SUBTOTALS This Period Th				H	2000.00	
Carry outstanding balance	only to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.	

-					PAGE 34 OF 53
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of the Detailed Summary Pag	e(s) FOR LINE NUMBER: he (check only one)
ME OF COMMITTEE (In Full ohn Mills for Congres				Transac	ction ID : SC/10.4874
LOAN SOURCE Full Name	e (Last, First, Mid	dle Initial)		Memo Item	Election: 2020
John Mills for Congr	ess				Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify) ▼
City		State	ZIP Code	9	
Miramar Beach		FL	32550		Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Period
<u> </u>	500.00	7		0.00	500.00
TERMS Date Incurre	d	[Date Due	Interest Rate (If none, enter	
M03 ^M / D18 ^D / Y	Ž019 ^v	M M / D D	⁷ 03/1		
List All Endorsers or Guar	rantors (if any) to	b Loan Source			
1. Full Name (Last, First, I	Viddle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State			Guaranteed Outstanding:	y
2. Full Name (Last, First, N	liddle Initial)	1		Name of Employer	
Mailing Address				Occupation	
	1			Amount	
City	State	ZIP Code		Guaranteed Outstanding:	y y
3. Full Name (Last, First, N	1iddle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	State ZIP Code		Guaranteed Outstanding:	ay 1 ay 1 ay 1
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	ZIP Code		Guaranteed Outstanding:	g. 1. 1. g. 1. 1. a. 1.
JBTOTALS This Period This DTALS This Period (last pag					500.00

CHEDULE C	(FEC Form 3)			Use separate schedule(s) for each category of the Detailed Summary Page			
NAME OF COMMI [®] John Mills for	, ,			Transac	tion ID : SC/10.4106		
	E Full Name (Last, First, M ph, John, , III	Aiddle Initial)		Memo Item Election: 2014 Memo Item Frimary General			
Mailing Address 1940 Boardwalk	s Drive				Other (specify) v		
City Miramar Beach		State FL	ZIP Code 32550		X Personal Funds of the Candidate		
Original Amou		Cumulative Pa			nce Outstanding at Close of This Period		
TERMS	5000.00 Date Incurred	<u> </u>	Date Due	0.00 Interest Rate	5000.00 7 7 Secured:		
	24 ^D / Y Ž014 Y	M M / D D		(If none, enter Y Y Y O.			
List All Endors	ers or Guarantors (if any) to Loan Source					
1. Full Name (1. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Add	Iress			Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			
2. Full Name (L	ast, First, Middle Initial)			Name of Employer			
Mailing Addr	Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:			
3. Full Name (L	ast, First, Middle Initial)			Name of Employer			
Mailing Addr	ress			Occupation			
City	State	te ZIP Code		Amount Guaranteed Outstanding:			
4. Full Name (L	ast, First, Middle Initial)			Name of Employer			
Mailing Addr	ress			Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y		
	Period This Page (optiona od (last page in this line o				5000.00		
Carry outstanding	balance only to LINE 3, S	Schedule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.		

					PAGE 36 OF 53	
CHEDULE C (FEC Form DANS	3)			Use separate schedule for each category of the Detailed Summary Pag	e(s) FOR LINE NUMBER:	
AME OF COMMITTEE (In Full) ohn Mills for Congress				Transac	ction ID : SC/10.4116	
LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III	First, Mic	ddle Initial)		Memo Item Election: Primary General		
Mailing Address 1940 Boardwalk Drive					Other (specify) ▼	
City Miramar Beach		State FL	ZIP Cod 32550	e	Personal Funds of the Candidate	
Original Amount of Loan 423	4.94	Cumulative Pa	ayment To [Date Bala	ance Outstanding at Close of This Perio 4234.94	
TERMS Date Incurred			Date Due	Interest Rate (If none, enter		
					w (apr) Yes ₩ No	
List All Endorsers or Guarantors		o Loan Source		Name of Employer		
1. Full Name (Last, First, Middle Initial) Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed	7 7 7 7 7 7 7	
2. Full Name (Last, First, Middle Initial)				Outstanding: 1 1 1 1 1 Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Middle II	nitial)			Name of Employer		
Mailing Address			_	Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·	
4. Full Name (Last, First, Middle II	nitial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
UBTOTALS This Period This Page of OTALS This Period (last page in thi					4234.94	

CHEDULE C (FEC Form 3) OANS		Use separate schedule(s) for each category of the Detailed Summary Page		
NAME OF COMMITTEE (In Full) John Mills for Congress			Transac	tion ID : SC/10.4197
LOAN SOURCE Full Name (Last, First, Mic MILLS, Ralph, John, , III	Idle Initial)		🗌 Memo Item	Election: Primary General
Mailing Address 1940 Boardwalk Drive				Other (specify) v
City Miramar Beach	State FL	ZIP Code 32550	9	Y Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	yment To D	Date Bala	nce Outstanding at Close of This Perioc 1000.00
TERMS Date Incurred M09 ^M / P08 ^D / Y Ž015 Y	D D D	Date Due	Interest Rate (If none, enter	
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	o Loan Source		Name of Employer	
Mailing Address			Occupation Amount	
City State	State 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	
City State	ZIP Code		Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initial)	4. Full Name (Last, First, Middle Initial)			
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · ·
SUBTOTALS This Period This Page (optional))			1000.00 7 7 7

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page			
AME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4299	
LOAN SOURCE Full Name (Last, First, Mic MILLS, Ralph, John, , III	ddle Initial)		🗌 Memo Item	Election: 2016 X Primary General	
Mailing Address 1940 Boardwalk Drive				Other (specify) v	
City Miramar Beach	State FL	ZIP Code 32550	e	X Personal Funds of the Candidate	
Original Amount of Loan 3850.64	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Period 3850.64	
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter		
				% (apr) Yes X No	
List All Endorsers or Guarantors (if any) t 1. Full Name (Last, First, Middle Initial)	o Loan Source		Name of Employer		
Mailing Address			Occupation Amount		
City	State ZIP Code			Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial) Mailing Address			Name of Employer Occupation		
City State	e ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation Amount		
City State	ZIP Code		Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y	
SUBTOTALS This Period This Page (optional). TOTALS This Period (last page in this line only Carry outstanding balance only to LINE 3, Sch	/)			3850.64	

			PAGE 39 OF 53		
CHEDULE C (FEC Form 3) DANS	Use separate sch for each categor Detailed Summar	y of the (check only one) X 13a			
ME OF COMMITTEE (In Full)		Tra	ansaction ID : SC/10.4337		
LOAN SOURCE Full Name (Last, First, Mid MILLS, Ralph, John, , III	ddle Initial)		Item Election: 2016		
Mailing Address 1940 Boardwalk Drive			Other (specify) ▼		
City Miramar Beach	State FL	IP Code 32550	Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	ent To Date	Balance Outstanding at Close of This Period		
345.33		0.00	345.33		
TERMS Date Incurred	C	Due Interes	t Rate Secured:		
M06M / D30D / Y Ž016 Y	M M / D D	Y Y Y Y Y	0.00 % (apr) Yes ✗ №		
List All Endorsers or Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address		Occupation			
City State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·		
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 y 1 y 1 y 1 y 1 y		
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	y		
UBTOTALS This Period This Page (optional). OTALS This Period (last page in this line only			345.33		

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CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page	
ame of committee Iohn Mills for Co	. ,			Transad	ction ID : SC/10.4342
LOAN SOURCE FU	ull Name (Last, First, Mic John, , III	ddle Initial)		Memo Item	Election: 2018 X Primary General
Mailing Address 1940 Boardwalk Drive	9				Other (specify) ▼
City Miramar Beach		State FL	ZIP Code 32550	9	Personal Funds of the Candidat
Original Amount of	Loan	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio
	1500.00		,	0.00	1500.00
TERMS Date	Incurred	Γ	Date Due	Interest Rate (If none, ente	
^M 07 ^M / ^D 18 ^D	′ ^ү Ž01ӗ́ ^ү	M M / D D	/ Y De	ěmaňd ^v	.00 Yes X No
List All Endorsers	or Guarantors (if any) t	o Loan Source			
1. Full Name (Last,	First, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	State ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last,	First, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last,	First, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	State ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
	od This Page (optional). ast page in this line only				1500.00
Carry outstanding bala	ance only to LINE 3, Sci	nedule D, for thi	s line. If no	o Schedule D, carry for	ward to appropriate line of Summary.

9					PAGE 41 OF 53
CHEDULE C (FEC Form 3) OANS				Use separate schedu for each category of Detailed Summary Pa	the (check only one) × 13a
ME OF COMMITTEE (III	,			Transa	ction ID : SC/10.4343
LOAN SOURCE Full MILLS, Ralph, Jo	•	ddle Initial)		Memo Item	Election: 2018 X Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify)
City Miramar Beach		State FL	ZIP Code 32550)	Personal Funds of the Candidate
Original Amount of Lo	an	Cumulative Pa	avment To D	ata Bai	ance Outstanding at Close of This Peric
	300.00			0.00	
TERMS Date In	curred		Date Due	Interest Rat (If none, enter	
M09M / D06D	⁷ Ž01č ⁷	M M / D	D / Y De		0.00
List All Endorsers or		o Loan Source			
1. Full Name (Last, F	irst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, Fir	st, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount Guaranteed	
City	State	ZIP Code			9 9 9 1 9 1 1 m
3. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, Fir	rst, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y 1 y 1 x 1
JBTOTALS This Period					300.00

.ge# 201010140100040100					PAGE 42 OF 53
CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page	
ME OF COMMITTEE (In Full)				Transa	ction ID : SC/10.4344
LOAN SOURCE Full Name MILLS, Ralph, John,	•	Idle Initial)		Memo Item	Election: 2018 Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify)
City Miramar Beach		State FL	ZIP Code 32550	e	Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pag	yment To E	Date Bal	ance Outstanding at Close of This Perio
	500.00			0.00	500.00
TERMS Date Incurred	1	C	ate Due	Interest Rat (If none, ente	
^M 09 ^M / ^D 23 ^D / ^Y	Ž016 ^Y	M M / D D	/ Y De	ěmaňd ^v	0.00 % (apr) Yes 🗴 No
List All Endorsers or Guar	antors (if any) to	o Loan Source			
1. Full Name (Last, First, M	1iddle Initial)			Name of Employer	
Mailing Address				Occupation	
				Amount	
City	State	State ZIP Code		Guaranteed Outstanding:	
2. Full Name (Last, First, M	iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
3. Full Name (Last, First, M	iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
JBTOTALS This Period This DTALS This Period (last page	e in this line only)		······	500.00

			Use separate schedule(s) for each category of the Detailed Summary Page	
AME OF COMMITTEE (In Full) Iohn Mills for Congress				etion ID : SC/10.4351
LOAN SOURCE Full Name (Last, First, M MILLS, Ralph, John, , III	Niddle Initial)		Memo Item	Election: 2018
Mailing Address 1940 Boardwalk Drive				Other (specify)
City Miramar Beach	State FL	ZIP Code 32550	e	Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perioc
TERMS Date Incurred M05 ^M / D02 ^D / Y Ž017 Y	M M / D D	Date Due	Interest Rate (If none, enter èmaňd ^Y 0.0	
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to Loan Source		Name of Employer	
Mailing Address			Occupation	
City State	State ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation Amount	
City State	ZIP Code		Guaranteed	y
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y y
SUBTOTALS This Period This Page (optiona TOTALS This Period (last page in this line o Carry outstanding balance only to LINE 3, S	nly)			500.00

3					PAGE 44 OF 53
CHEDULE C (FEC Form 3) OANS			Use separate schedul for each category of t Detailed Summary Pa	e(s) he (check only one)	
ME OF COMMITTEE (In Full ohn Mills for Congres	,			Transad	ction ID : SC/10.4357
LOAN SOURCE Full Name MILLS, Ralph, John,	•	Idle Initial)		🗌 Memo Item	x Primary
Mailing Address 1940 Boardwalk Drive					General Other (specify) ▼
City Miramar Beach		State FL	ZIP Code 32550	9	Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Perio
	150.00			0.00	150.00
TERMS Date Incurred	d		Date Due	Interest Rat (If none, ente	
M07 ^M / D26 ^D / Y	2017		D / Y Y	Y Y Y O	.00 % (apr) Yes 🗴 No
List All Endorsers or Guar		o Loan Source		Name of Employer	
1. Full Name (Last, First, N	viddie miliai)				
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, M	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, M	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, First, M	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	7
JBTOTALS This Period This DTALS This Period (last pag					, , , , , , , , , , , , , , , , , , , ,

ddle Initial)	Date Due	Memo Item	Increase in the indentified in the indentinet in the indentified in the indentified in the inde
State FL Cumulative Pa	32550 ayment To Da Date Due	Memo Item	Election: 2018
State FL Cumulative Pa	32550 ayment To Da Date Due	te Balance 0.00 Interest Rate (If none, enter 0	 ✓ Primary General Other (specify) ▼ ✓ Personal Funds of the Candidate ce Outstanding at Close of This Perio 750.00 Secured:
FL Cumulative Pa	32550 ayment To Da Date Due	0.00 Interest Rate (If none, enter 0	Other (specify) ▼ ✓ Personal Funds of the Candidate ce Outstanding at Close of This Perio 750.00 Secured:
FL Cumulative Pa	32550 ayment To Da Date Due	0.00 Interest Rate (If none, enter 0	ce Outstanding at Close of This Perio 750.00 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
M M / D D	Date Due	0.00 Interest Rate (If none, enter 0	750.00 7 50.00 Secured:
M M / D D	0 / Y Y	Interest Rate (If none, enter 0 Y Y 0.00)) Secured:
M M / D D	0 / Y Y	(If none, enter 0	
to Loan Source		ame of Employer	
	IN:	ame of Employer	
		Name of Employer	
	0	ccupation	
State ZIP Code		Amount Guaranteed Outstanding:	
	N	ame of Employer	
ZIP Code	G	uaranteed	y
	N	ame of Employer	
	0	occupation	
ZIP Code	G	uaranteed	y
	N	ame of Employer	
	0	ccupation	
ZIP Code	G	uaranteed	y
			750.00
	ZIP Code ZIP Code ZIP Code	ZIP Code G ZIP Code G ZIP Code G ZIP Code G ZIP Code G ZIP Code G ZIP Code G X X X X X X X X X X X X X X X X X X X	ZIP Code Amount Quaranteed Outstanding: Name of Employer Occupation ZIP Code Amount Guaranteed Outstanding: ZIP Code Amount Guaranteed Outstanding: Amount Guaranteed Outstanding: Name of Employer Variation Name of Employer Occupation Amount Quaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Amount Guaranteed Outstanding: Name of Employer Amount Guaranteed Outstanding: Name of Employer

					PAGE 46 OF 53
SCHEDULE C (FEC Form 3) .OANS				Use separate schedule for each category of th Detailed Summary Pag	ie (check only one) X 13a
NAME OF COMMITTED	. ,			Transac	tion ID : SC/10.4811
LOAN SOURCE F MILLS, Ralph,	ull Name (Last, First, Mic	ddle Initial)		Memo Item	Election: 2018
					General Other (specify) ▼
Mailing Address 1940 Boardwalk Driv	re				
City Miramar Beach		State FL	ZIP Code 32550	e	Personal Funds of the Candidate
Original Amount o	f Loan	Cumulative Pay	yment To D	Date Bala	nce Outstanding at Close of This Period
	16.95			0.00	16.95
TERMS Dat	e Incurred	D	ate Due	Interest Rate (If none, enter	
M04 ^M / D07 ^D	0 [/] Y Ž018 Y	M M / D D	′ [×] 11/č	Ŏ8/2Ŏ18 ^Ÿ 0.0	
List All Endorsers	or Guarantors (if any) to	o Loan Source			
1. Full Name (Las	t, First, Middle Initial)			Name of Employer	
Mailing Address	5			Occupation	
City	State	State ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last,	First, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
3. Full Name (Last,	, First, Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	State ZIP Code		Amount Guaranteed Outstanding:	g
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · ·
TOTALS This Period	riod This Page (optional)	/)			, 16.95
Carry outstanding ba	lance only to LINE 3, Sch	nedule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.

5						
CHEDULE C (FEC Form 3) .OANS				Use separate schedule for each category of t Detailed Summary Pag	he (check only one) X 13a	
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transad	ction ID : SC/10.4899	
LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III	First, Mic	ddle Initial)		Memo Item	Election: Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City Miramar Beach		State FL	ZIP Code 32550	e	Personal Funds of the Candidat	
Original Amount of Loan		Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Peric	
300	.00			0.00	300.00	
TERMS Date Incurred		C	Date Due	Interest Rate (If none, enter		
M07 ^M / D12 ^D / Y Ž019	Y	M M / D D) / Y	Y Y Y O.	00 % (apr) Yes 🗶 No	
List All Endorsers or Guarantors		o Loan Source				
1. Full Name (Last, First, Middle I	nitial)			Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code			Amount Guaranteed Outstanding:	y y	
2. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Middle In	itial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
UBTOTALS This Period This Page (OTALS This Period (last page in this					300.00	

					PAGE 48 OF 53
SCHEDULE C (FEC Form 3) LOANS				Use separate schedule for each category of t Detailed Summary Pag	e(s) he (check only one)
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transad	ction ID : SC/10.4900
LOAN SOURCE Full Name MILLS, Ralph, John,	•	Idle Initial)		Memo Item	Election: Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify) ▼
City Miramar Beach		State FL	ZIP Code 32550	9	Personal Funds of the Candidate
Original Amount of Loan	1200.00	Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Perio 1200.00
TERMS Date Incurred			Date Due	Interest Rate (If none, enter Y Y Y 0.	r 0)
					% (apr) Yes ✗ No
List All Endorsers or Guara 1. Full Name (Last, First, M		o Loan Source		Name of Employer	
Mailing Address				Occupation	
City	State ZIP Code			Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address			_	Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Mi	ddle Initial)	I		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 1 1
UBTOTALS This Period This OTALS This Period (last page					1200.00

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page				
AME OF COMMITTEE (In Full) Iohn Mills for Congress			Transac	tion ID : SC/10.4901		
LOAN SOURCE Full Name (Last, First, Mic MILLS, Ralph, John, , III	ddle Initial)		Memo Item Election: Primary General			
Mailing Address 1940 Boardwalk Drive				Other (specify) v		
City Miramar Beach				Personal Funds of the Candidate		
Original Amount of Loan 1500.00	Cumulative Pa	yment To D	Date Balance Outstanding at Close of This Period 0.00 1500.00			
	M M / D D	Date Due	Interest Rate (If none, enter • • • • • • • • • • • • • • • • • • •	00 0/ ()) / × · · · · · · · · · · · · · · · · · ·		
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	o Loan Source		Name of Employer			
Mailing Address			Occupation			
City State	e ZIP Code		Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)	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			
City State	ZIP Code		Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	ZIP Code		Amount Guaranteed Outstanding:			
SUBTOTALS This Period This Page (optional)	/)			1500.00 7 7 7		

SCHEDULE C (FEC Form 3) LOANS				Use separate schedule(s) for each category of the Detailed Summary Page				
NAME OF COMMITTEE (In Full John Mills for Congres				Transac	tion ID : SC/10.4843			
LOAN SOURCE Full Name Start Skydiving, LLC	•	Idle Initial)		Memo Item Election: 2018 Primary General				
Mailing Address 1711 Runway Drive					Other (specify) ▼			
City Middletown					Personal Funds of the Candidate			
Original Amount of Loan	920.16	Cumulative Pay	yment To D	Date Balance Outstanding at Close of This Period 920.16 0.00				
TERMS Date Incurrent M07 ^M / P02 ^D / Y	d 2018 ^Y	M M / D D	Date Due	Interest Rate (If none, enter Ž8/2018 ^Y 0.0				
List All Endorsers or Guar 1. Full Name (Last, First, M	,	o Loan Source		Name of Employer				
Mailing Address				Occupation				
City	City State ZIP Code			Amount Guaranteed Outstanding:				
2. Full Name (Last, First, M	2. Full Name (Last, First, Middle Initial)				Name of Employer			
Mailing Address	Mailing Address			Occupation				
City	State	e ZIP Code		Amount Guaranteed Outstanding:				
3. Full Name (Last, First, M	3. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	e ZIP Code		Amount Guaranteed Outstanding:				
4. Full Name (Last, First, M	4. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
SUBTOTALS This Period This	Page (optional)			••••••••••••••••••••••••••••••••••••••	0.00			
TOTALS This Period (last page	e in this line only	()		• C	40643.37			
Carry outstanding balance on	ly to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forw	ard to appropriate line of Summary.			

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans			(Use separate schedule(s) for each numbered line)	PAGE51OF53FOR LINE NUMBER: (check only one)9X10
A. Full Name (Last, First, Middle Initial) of De Law Office of James C. Thoma	btor or Credito	r		ebt (Purpose): Reporting Services
Mailing Address 7509 NW Tiffany Springs Pky Suite 300	wy			
City Kansas City	State MO	Zip Code 64153		
Outstanding Balance Beginning This Period			Transacti	on ID : SD10.4876
1112.45		Payment This Period	Quitatandi	ng Palanaa at Class of This Daried
Amount Incurred This Period				ng Balance at Close of This Period
0.00		, 1112.4	C+	0.00
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Law Office of James C. Thomas III				ebt (Purpose): Reporting Services
Mailing Address 7509 NW Tiffany Springs Pky Suite 300	vy	1		
City Kansas City	State MO	Zip Code 64153		
Outstanding Balance Beginning This Period 162.50				on ID : SD10.4877
Amount Incurred This Period	F	Payment This Period		ng Balance at Close of This Period
0.00		, 162.9	50	0.00
C. Full Name (Last, First, Middle Initial) of De Law Office of James C. Thoma		r		ebt (Purpose): Reporting Services
Mailing Address 7509 NW Tiffany Springs Pkr Suite 300	wy			
City	State	Zip Code		
Kansas City	MO	64153		
Outstanding Balance Beginning This Period			Transact	ion ID : SD10.4879
162.50				
Amount Incurred This Period	F	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		162.5	50	0.00
1) SUBTOTALS This Period This Page (optional)		···· •	0.00
2) TOTALS This Period (last page this line num	ber only) ······		… ▶	
3) TOTAL OUTSTANDING LOANS from Schedu	ule C (last page	e only)		
4) ADD 2) and 3) and carry forward to appropri	ate line of Sum	nmary Page (last page of	nly) 🕨	g

FEC Schedule D (Form 3) (Revised 05/2016)

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans			(Use separate schedule(s) for each numbered line)	PAGE52OF53FOR LINE NUMBER: (check only one)9X10
A. Full Name (Last, First, Middle Initial) of De Law Office of James C. Thoma	btor or Credito	r		ebt (Purpose): Reporting Services
Mailing Address 7509 NW Tiffany Springs Pk Suite 300	wy			
City Kansas City	State MO	Zip Code 64153		
Outstanding Balance Beginning This Period 422.50			Transactio	on ID : SD10.4880
Amount Incurred This Period	F	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		422.5	50	0.00
B. Full Name (Last, First, Middle Initial) of Deb Law Office of James C. Thoma				ebt (Purpose): Reporting Services
Mailing Address 7509 NW Tiffany Springs Pky Suite 300	- i	1		
City Kansas City	State MO	Zip Code 64153		
Outstanding Balance Beginning This Period 162.50			Transactio	on ID : SD10.4881
Amount Incurred This Period	F	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	162.50
C. Full Name (Last, First, Middle Initial) of De Law Office of James C. Thoma		r		ebt (Purpose): Reporting Fees
Mailing Address 7509 NW Tiffany Springs Pk Suite 300	wy			
City Kansas City	State MO	Zip Code 64153		
Outstanding Balance Beginning This Period 0.00		1	Transact	ion ID : SD10.4903
Amount Incurred This Period	F	Payment This Period	Outstandi	ng Balance at Close of This Period
162.50		0.0	00	162.50
1) SUBTOTALS This Period This Page (optional)			325.00
2) TOTALS This Period (last page this line num	ber only)		···· •	7 7 7 7
3) TOTAL OUTSTANDING LOANS from Schedu	ule C (last page	only)	···· •	, , , , , , , , , , , , , , , , , , , ,
4) ADD 2) and 3) and carry forward to appropr	iate line of Sum	nmary Page (last page of	nly) 🕨	7 7 7

FEC	Schedule	D	(Form	3)	(Revised	05/2016)

SCHEDULE D (FEC Form 3)			(Use separate schedule(s)	PAGE 53 OF 53
EBIS AND OBLIGATIONS			for each numbered line)	(check only one) 9
NAME OF COMMITTEE (In Full) John Mills for Congre	SS			
A. Full Name (Last, First, Middle Initial) of De Law Office of James C. Thoma	btor or Credit	tor		ebt (Purpose): Reporting Fees
Mailing Address 7509 NW Tiffany Springs Pk Suite 300	wy			
City Kansas City	State MO	Zip Code 64153		
Outstanding Balance Beginning This Period			Transactio	on ID : SD10.4904
0.00 Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
325.00		0.	00	325.00
B. Full Name (Last, First, Middle Initial) of Del Law Office of James C. Thoma		or		ebt (Purpose): Reporting Fees
Mailing Address 7509 NW Tiffany Springs Pkv Suite 300	wy			
City Kansas City	State MO	Zip Code 64153		
Outstanding Balance Beginning This Period 0.00			Transactio	on ID : SD10.4905
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
162.50	L	0.	00	162.50
C. Full Name (Last, First, Middle Initial) of De	ebtor or Credi	tor	Nature of D	ebt (Purpose):
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period	1			
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
		9 9 9 9 9 9		-y
1) SUBTOTALS This Period This Page (optional)		···· •	487.50
2) TOTALS This Period (last page this line num	ber only)			812.50
3) TOTAL OUTSTANDING LOANS from Schedu	ule C (last pag	ge only)		40643.37
4) ADD 2) and 3) and carry forward to appropr	iate line of Su	ummary Page (last page o	nly) 🕨	41455.87

FEC Schedule D (Form 3) (Revised 05/2016)