PAGE 1 / 47

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

For An	Offic	Office Use Only		
NAME OF COMMITTEE (in full)  TYPE OR PRII  COMMITTEE (in full)	NT ▼ Example: If typing, over the lines.	type 12FE4M5		
John Mills for Congress			ı	
<u> </u>				
ADDRESS (number and street)	alk Drive			
Check if different than previously reported. (ACC)	ch	FL 3255	50	
S FEO IDENTIFICATION NUMBER W	CITY ▲	STATE ▲	ZIP CODE ▲	
2. FEC IDENTIFICATION NUMBER ▼  C C00565366	3. IS THIS X NEW (N)	OR AMENDED (A)	STATE ▼ DISTRICT	
4. TYPE OF REPORT (Choose One)	(b) 10 Day BRE Floation Report	for the		
(a) Quarterly Reports:	(b) 12-Day <b>PRE</b> -Election Report	for the:		
April 15 Quarterly Report (Q1)	Primary (12P)	General (12G)	Runoff (12R)	
April 13 Quarterly Neport (Q1)	Convention (120	Special (12S)		
July 15 Quarterly Report (Q2)				
October 15 Quarterly Report (Q3)	Election on	28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	in the FL State of	
January 31 Year-End Report (YE)	(c) 30-Day <b>POST</b> -Election Repor	t for the:		
_			0	
-	General (30G)	Runoff (30R)	Special (30S)	
Termination Report (TER)	Election on	D D / Y Y Y Y	in the State of	
5. Covering Period 07 01 01	/ Y Y Y Y Y Y 2018 through	M M / D D / Y 08 08	y y y 2018	
I certify that I have examined this Report and a		ief it is true, correct and cor	mplete.	
Type or Print Name of Treasurer				
Adams, Christopher, , Signature of Treasurer	, [Electronically File	d] Date	16 Y Y Y Y Y 2018	
NOTE: Submission of false, erroneous, or incomp	lete information may subject the person	signing this Report to the pe	enalties of 52 U.S.C. §30109	
Office		_	TO FORM 6	
Use Only			FEC FORM 3 (Revised 05/2016)	

#### **SUMMARY PAGE**

of Receipts and Disbursements

PAGE 2 / 47

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
John Mills for Congress

2018 2018 08 80 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) 260.00 805.00 (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) 260.00 805.00 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 5644.66 8801.49 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 5644.66 8801.49 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 884.13 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 38063.53 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

FEC Form 3 (Revised 05/2016)

PAGE 3 / 47

Write or Type Committee Name

John Mills for Congress

07 08 01 2018 80 2018 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 100.00 300.00 (i) Itemized (use Schedule A)...... 505.00 160.00 (ii) Unitemized ..... (iii) TOTAL of contributions 260.00 805.00 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..... (d) TOTAL CONTRIBUTIONS (other than loans) 805.00 260.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the 4000.00 9234.94 Candidate..... 920.16 0.00 (b) All Other Loans..... TOTAL LOANS 4920.16 9234.94 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) ..... 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) ..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 5180.16 10039.94 (Carry Total to Line 24, page 4).....

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 47

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
17.	OPERATING EXPENDITURES	5644.66	8801.49		
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		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	0.00		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00		
21.	OTHER DISBURSEMENTS	0.00	0.00		
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	5644.66	8801.49		
	III. CASH S	UMMARY			
23.	CASH ON HAND AT BEGINNING OF REPO	DRTING PERIOD	1348.63		
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	5180.16		
25.	SUBTOTAL (add Line 23 and Line 24)		6528.79		
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	5644.66		
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	NG PERIOD	884.13		

#### SCHEDULE A (FEC Form 3)

Use separate schedule(s) for each category of the

FOR LINE NUMBER:						PAGE	5	OF	47
(check only one)									
	X	11a		11b		11c	11	d	
		12		13a		13b	14	. [	15

ITEMIZED RECEIPTS **Detailed Summary Page** 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) Linker, James, G, , Date of Receipt Mailing Address 4201 Bonway Dr 2018 80 City State Zip Code Transaction ID: SA11AI.4827 FL 32504 Pensacola FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 100.00 Name of Employer Occupation Retired Retired Memo Item Receipt For: 2018 Election Cycle-to-Date x Primary General 285.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 100.00 SUBTOTAL of Receipts This Page (optional)..... 100.00 TOTAL This Period (last page this line number only).....

PAGE 6 OF 47 FOR LINE NUMBER: 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 2018 05 City State Zip Code Transaction ID: SA13A.4841 FL 32550 Miramar Beach FEC ID number of contributing Amount of Each Receipt this Period C00565366 federal political committee. 2000.00 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand Primary General 17695.51 Other (specify) ▼ Full Name (Last, First, Middle Initial) John Mills for Congress Date of Receipt Mailing Address 1940 Boardwalk Drive 2018 07 05 City State Zip Code Transaction ID: SA13A.4842 Miramar Beach FL 32550 FEC ID number of contributing С C00565366 Amount of Each Receipt this Period federal political committee. 2000.00 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand **✗** Primary General 19695.51 Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify)

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

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

4000.00

4000.00

#### SCHEDULE A (FEC Form 3)

PAGE OF 47 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the ITEMIZED RECEIPTS 11a 11b 11d 11c **Detailed Summary Page x** 13b 12 13a 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) Start Skydiving, LLC Date of Receipt Mailing Address 1711 Runway Drive 2018 02 City State Zip Code Transaction ID: SA13B.4843 OH 45042 Middletown FEC ID number of contributing Amount of Each Receipt this Period C federal political committee. 920.16 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand Primary General 920.16 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 920.16 SUBTOTAL of Receipts This Page (optional)..... 920.16

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

## SCHEDULE B (FEC Form 3)

PAGE 8 OF 47 FOR LINE NUMBER: (check only one) Use separate schedule(s) for each category of the

IT _	EMIZED DISBURSEMENTS		for each category Detailed Summar		X	17 20a	18 20b		19a 20c	19b 21	
	ny information copied from such Reports and State for commercial purposes, other than using the nar										
$\rangle$	NAME OF COMMITTEE (In Full)  John Mills for Congress										
A.	Full Name (Last, First, Middle Initial)  eMage Signs & Graphics  Mailing Address 20 N. Main St				Date of Disbursement  O7 02 2018						
	City  Middleown  Purpose of Disbursement Banner  Candidate Name  John Mills for Congress	State OH	Zip Code 45042	004 Category/ Type	С	C0056	ation Numb 65366 ach Disburs	_	ent this P	eriod	
	Office Sought:    X   House   Disburser     X     Senate   President	,,,,,,		saction Memo Ite	<b>ID</b> : <b>SB17.</b> 4	1850	920.10 )	3			
В.	Full Name (Last, First, Middle Initial) Hill, Jeffrey, , ,  Mailing Address Requested		Date M 07	M /	ursement	Y	ý 2018	Y			
	City  Purpose of Disbursement Website Design  Candidate Name  John Mills for Congress  Office Sought:  x House Senate President  State: FL District: 01	Zip Code  2018  General acify)	001 Category/ Type	Amou	C0056 unt of Ea	ach Disburs	seme	ent this P 2000.00	-		
C.	Full Name (Last, First, Middle Initial)  Hill, Jeffrey, , ,  Mailing Address Requested				Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City  Purpose of Disbursement Website Design  Candidate Name  John Mills for Congress  Office Sought:  x House Senate President  State: FL District: 01	Amou Trans	C0056	ach Disburs D: SB17.4	seme	ent this P 2000.00	-				
	SUBTOTAL of Disbursements This Page (optional).  TOTAL This Period (last page this line number only				<b>H</b>	7		<del>-</del>	4920.10	5	
	, , , , , , , , , , , , , , , , , , ,							_			

#### SCHEDULE B (FEC Form 3)

**PAGE** 9 47 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20b 20c

ITEMIZED DISBURSEMENTS 19b 20a 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 Law Office of James C. Thomas III 2018 Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300 City State Zip Code **FEC Identification Number** MO Kansas City 64153 Purpose of Disbursement Legal and Reporting Services Candidate Name Amount of Each Disbursement this Period Category/ Type 315.00 Office Sought: House Disbursement For: Senate Primary General Transaction ID: SB17.4823 Other (specify) President Memo Item District: State: Full Name (Last, First, Middle Initial) Law Office of James C. Thomas III Date of Disbursement Mailing Address 7509 NW Tiffany Springs Pkwy 2018 06 Suite 300 City State Zip Code **FEC Identification Number** MO Kansas City 64153 Purpose of Disbursement Legal and Reporting Services Candidate Name Amount of Each Disbursement this Period Category/ Type 409.50 Disbursement For: Office Sought: House Senate Primary General Transaction ID: SB17.4825 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 724.50 TOTAL This Period (last page this line number only)..... 5644.66

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

FOR LINE NUMBER: (check only one)

PAGE 10

13a

			Detailed Garrinary 1	ago	13b		
NAME OF COMMITTEE (In Full)  John Mills for Congress			Trans	saction ID : SC/10.4711			
•							
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo Ite	em Election: 2018			
John Mills for Congress			rimary Primary				
				General			
Mailing Address 1940 Boardwalk Drive				Other (specify)			
City	State	ZIP Code	)	Personal Funds of the	Condidata		
Miramar Beach	FL	32550		Personal Funds of the	- Candidate		
Original Amount of Loan	Original Amount of Loan Cumulative Payment To				This Period		
126.34	126.34				26.34		
TERMS Date Incurred	7	Date Due	Interest R	Rate Secur	ed:		
			(If none, er	nter 0)	eu.		
M09 <sup>M</sup> / P21 <sup>D</sup> / Y Ž017 Y	M M / D D	/ Y11/0	08/2018 <sup>Y</sup>	0.00 % (apr) Y	es 🗶 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				
		-	Amount				
City	ZIP Code		Guaranteed Outstanding:	- y - y x			
2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation Amount				
		-					
City State	ZIP Code		Guaranteed Outstanding:	7 7 7 7			
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 State	ZIP Code		Guaranteed Outstanding:	7 7 7 7			
	1	<u> </u>					
SUBTOTALS This Period This Page (optional)				1	26.34		
TOTALS This Period (last page in this line only	y)		······	7 7 7			
Carry outstanding balance only to LINE 3, Sci	hedule D, for this	s line. If no	Schedule D, carry fo	orward to appropriate line of	Summarv.		

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

FOR LINE NUMBER: (check only one)

PAGE 11

13a

OF

						130			
	ME OF COMMITTEE (In Full) ohn Mills for Congress				Trans	action ID : SC/10.4742			
	LOAN SOURCE Full Name (Last, John Mills for Congress	First, Mic	ldle Initial)		☐ Memo Iter	m Election: 2018  x Primary			
-						General			
	Mailing Address 1940 Boardwalk Drive					Other (specify)   ———————————————————————————————————			
City			State	ZIP Co	de	X Personal Funds of the Candidate			
}	Miramar Beach		FL	32550					
	Original Amount of Loan		Cumulative Pay	yment To	Date Ba	alance Outstanding at Close of This Period			
	303	3.01	2	,	0.00	303.01			
	TERMS Date Incurred		D	ate Due	Interest Ra (If none, en				
	<sup>M</sup> 10 <sup>M</sup> / <sup>D</sup> 04 <sup>D</sup> / Y Ž017	Y	M M / D D	/ Y11	/ŏ8/2ŏ18 <sup>Y</sup>	0.00 % (apr) Yes X No			
Ī	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	, , ,			
Ì	2. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7			
	3. Full Name (Last, First, Middle In	itial)	•		Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9 9			
	4. Full Name (Last, First, Middle In	itial)	,		Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7			
			'						
SI	JBTOTALS This Period This Page (	optional)			<u> </u>	303.01			
TC	OTALS This Period (last page in this	line only	·)		······	, , , , , , , , ,			
С	arry outstanding balance only to LII	NE 3. Sch	nedule D. for this	s line. If	no Schedule D. carry fo	rward to appropriate line of Summary.			
ĺ	. ,,	, -,-							

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

FOR LINE NUMBER: (check only one)

PAGE 12

13a

OF

		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	☐ 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)

**PAGE** 

13 OF

13a

47

13b Transaction ID: SC/10.4744 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 35.00 0.00 35.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10<sup>M</sup> 0.00 <sup>D</sup>10<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 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)..... 35.00 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

FOR LINE NUMBER: (check only one)

PAGE 14

13a

OF

					, ,	130			
	ME OF COMMITTEE (In Full) ohn Mills for Congress				Transaction II	) : SC/10.4745			
	LOAN SOURCE Full Name (Last,	First, Mid	Idle Initial)		☐ Memo Item	tion: 2018 Primary			
	John Mills for Congress					General			
	Mailing Address 1940 Boardwalk Drive					Other (specify) ▼			
City			State	ZIP Cod 32550	de	Personal Funds of the Candidate			
	Miramar Beach		FL		Toronar Fariac or the Carialade				
	Original Amount of Loan Cumulative Pay			ment To		utstanding at Close of This Period			
	21	.63			0.00	21.63			
	TERMS Date Incurred		D	ate Due	Interest Rate (If none, enter 0)	Secured:			
	M10M / D12D / Y Ž01Ť	Υ	M M / D D	/ <sup>Y</sup> 11	/ŏ8/2ŏ18 <sup>Y</sup> 0.00	% (apr) Yes X No			
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I	` • •			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:				
	2. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation  Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7			
	3. Full Name (Last, First, Middle In	itial)			Name of Employer				
,	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	y			
	4. Full Name (Last, First, Middle In	itial)	•		Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9			
SI	JBTOTALS This Period This Page (	optional)			······································	21.63			
т	OTALS This Period (last page in this	line only	·) ·······		······	, , , , , , , , , , , , , , , , , , , ,			
С	arry outstanding balance only to LI	NE 3, Sch	edule D, for this	line. If	no Schedule D, carry forward to	o appropriate line of Summarv.			
, ~	,					, , , , , , , , , , , , , , , , , , ,			

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

FOR LINE NUMBER: (check only one)

PAGE 15

13a

			Detailed Summar	y Page		13b		
NAME OF COMMITTEE (In Full) John Mills for Congress			Tra	nsaction	ID : SC/10.4746			
•				T				
LOAN SOURCE Full Name (Last, First, Mic	ldle Initial)		☐ Memo		ction: 2018			
John Mills for Congress				×	Primary General			
Mailing Address 1940 Boardwalk Drive					Other (specify) ▼			
City State ZIP C			9		Personal Funds of the	Condidate		
Miramar Beach			Personal Funds of the t	Januluale				
Original Amount of Loan Cumulative Payment To I				Balance	Outstanding at Close of T	his Period		
7.95			0.00		, ,	7.95		
TERMS Date Incurred		ate Due	Interest (If none,	Rate enter 0)	Secureo	l <b>:</b>		
M10 <sup>M</sup> / D17 <sup>D</sup> / Y Ž017 Y	M M / D D	/ Y11/0	08/2018 <sup>Y</sup>	0.00	% (apr) Yes	x No		
List All Endorsers or Guarantors (if any) to	o Loan Source							
1. Full Name (Last, First, Middle Initial)			Name of Employer					
Mailing Address		1	Occupation					
			Amount					
City State	ZIP Code		Guaranteed Outstanding:	7		_		
2. Full Name (Last, First, Middle Initial)	2. Full Name (Last, First, Middle Initial)							
Mailing Address			Occupation					
			Amount					
City	ZIP Code		Guaranteed Outstanding:	7	7			
3. Full Name (Last, First, Middle Initial)			Name of Employer					
Mailing Address			Occupation					
			Amount			7		
City	ZIP Code		Guaranteed Outstanding:	7				
4. Full Name (Last, First, Middle Initial)			Name of Employer					
Mailing Address		- 1	Occupation					
			Amount					
City State	ZIP Code		Guaranteed Outstanding:	7	y			
SUBTOTALS This Period This Page (optional)						<b>7.95</b>		
and the second of the second o					7	.ອບ		
TOTALS This Period (last page in this line only	v)		······································		7 7			
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	s line. If no	Schedule D, carry	forward	to appropriate line of Su	ımmary.		

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

FOR LINE NUMBER: (check only one)

PAGE 16

13a

OF

						130			
	ME OF COMMITTEE (In Full) ohn Mills for Congress				Trans	action ID : SC/10.4747			
		F:							
	LOAN SOURCE Full Name (Last, John Mills for Congress	First, Mic	idle Initial)		☐ Memo Iter	x Primary			
	Mailing Address 1940 Boardwalk Drive					General Other (specify) ▼			
City			State	ZIP Co	de	M Demond Suide of the Oceandalase			
	Miramar Beach		FL	32550		Personal Funds of the Candidate			
	Original Amount of Loan		Cumulative Pay	ment To	Date Ba	alance Outstanding at Close of This Period			
	72	2.49	9		0.00	72.49			
	TERMS Date Incurred Date Due				Interest Ra (If none, en				
	M10 <sup>M</sup> / D30 <sup>D</sup> / Y 2017	Y	M M / D D	/ Y11	/ð8/2ð18 <sup>Y</sup>	0.00 % (apr) Yes X No			
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9			
	2. Full Name (Last, First, Middle In	itial)	·		Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9 9			
	3. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7			
	4. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7			
S	UBTOTALS This Period This Page (	optional)			······	72.49			
T	OTALS This Period (last page in this	line only	/)		······	, , , , , , , , , , , , , , , , , , , ,			
	Carry outstanding balance only to LII	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry fo	rward to appropriate line of Summary.			
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Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 17 C
FOR LINE NUMBER: (check only one)

13a 13b

			Detailed 3	Summary Pag	je			13b
AME OF COMMITTEE (In Full) John Mills for Congress				Transac	tion ID : S	C/10.4748		
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)			Memo Item	Election:			
John Mills for Congress					Gene	eral		
Mailing Address 1940 Boardwalk Drive					Othe	r (specify) $\P$	<i>r</i> 	
City	State	ZIP Code			<b>✗</b> Per	sonal Funds	of the Cau	ndidate
Miramar Beach	FL	32550						
Original Amount of Loan	Cumulative Pay	yment To Da	ute 0.00			anding at Cl	ose of This	
7 7	9	7	0.00		7	3		
TERMS Date Incurred		Date Due		Interest Rate (If none, enter	0)		Secured:	
M10M / D31D / Y 2017 Y	M M / D D	/ Y11/ŏ8	3/2018 <sup>Y</sup>		00 %	(apr)	Yes	<b>x</b> No
List All Endorsers or Guarantors (if any)	to Loan Source							
Full Name (Last, First, Middle Initial)			ame of Em	ployer				
Mailing Address		С	ccupation					
City State	ZIP Code		mount luaranteed					
	211 0000		utstanding:		7	7	-	
2. Full Name (Last, First, Middle Initial)			Name of Employer					
Mailing Address		С	Occupation					
City State	ZIP Code	Amount Guaranteed						
	Zii Oodc		utstanding:		7	7	-	
3. Full Name (Last, First, Middle Initial)		N	ame of Em	ployer				
Mailing Address		С	ccupation					
City State	ZIP Code		mount luaranteed					
	Zii Oode		utstanding:		7	7	-	
4. Full Name (Last, First, Middle Initial)		N	ame of Em	ployer				
Mailing Address		С	ccupation					
City State	ZIP Code		mount luaranteed					
Only Ottalio		С	utstanding:		7	7		
SUBTOTALS This Period This Page (optional)							106 F.	1
				_	7	7	196.54	4
<b>FOTALS</b> This Period (last page in this line onl	y)			▶		7		
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 18

13a 13b

OF

						130			
	ME OF COMMITTEE (In Full) ohn Mills for Congress				Trans	eaction ID : SC/10.4749			
	LOAN SOURCE Full Name (Last,	First, Mid	ldle Initial)		☐ Memo Ite				
	John Mills for Congress					Primary General			
	Mailing Address 1940 Boardwalk Drive					Other (specify) ▼			
	City State				de				
	Miramar Beach		FL	32550		Personal Funds of the Candidate			
	Original Amount of Loan Cumulative Pay			yment To	Date B	alance Outstanding at Close of This Period			
	, 41	.21			0.00	41.21			
	TERMS Date Incurred		D	ate Due	Interest Ra (If none, en				
	M11M / D01D / Y 2017	Y	M M / D D	/ Y1		0.00 % (apr) Yes X No			
	List All Endorsers or Guarantors	(if any) to	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)			Name of Employer				
	Mailing Address				Occupation  Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7			
	3. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9			
	4. Full Name (Last, First, Middle In	itial)	,		Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9 9 9 9			
SI	UBTOTALS This Period This Page (	optional)			<u> </u>	41.21			
T	OTALS This Period (last page in this	line only	·)		······	, , , , , , , , , , , , , , , , , , , ,			
c	Carry outstanding balance only to LII	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry fo	orward to appropriate line of Summary.			
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 19

13a

OF

					<u> </u>	130	
	ME OF COMMITTEE (In Full) ohn Mills for Congress				Trans	action ID : SC/10.4750	
	LOAN SOURCE Full Name (Last,	First, Mic	ldle Initial)		☐ Memo Ite		
	John Mills for Congress					Primary  General	
	Mailing Address 1940 Boardwalk Drive					Other (specify)	
				l === 0			
	City		State FL	ZIP Co 32550		Personal Funds of the Candidate	
	Miramar Beach FL 3255						
	Original Amount of Loan		Cumulative Pay	yment To		alance Outstanding at Close of This Period	
	804	.08	,		0.00	804.08	
	TERMS Date Incurred		D	ate Due	Interest Ra (If none, en		
	<sup>M</sup> 11 <sup>M</sup> / <sup>D</sup> 05 <sup>D</sup> / <sup>Y</sup> Ž017	Υ	M M / D D	/ <sup>Y</sup> 1		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  Occupation  Amount		
	Mailing Address						
	City	State	ZIP Code		Guaranteed Outstanding:	7 7	
	2. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation  Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
	3. Full Name (Last, First, Middle In	itial)			Name of Employer  Occupation  Amount		
	Mailing Address						
	City	State	ZIP Code		Guaranteed Outstanding:	7 7	
	4. Full Name (Last, First, Middle In	itial)			Name of Employer  Occupation		
	Mailing Address						
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , ,	
		•	•		_		
S	UBTOTALS This Period This Page (	optional)			<u> </u>	804.08	
T	OTALS This Period (last page in this	line only	y)		······	, , , , , , , , , , , , , , , , , , , ,	
	Carry outstanding balance only to LII	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry fo	orward to appropriate line of Summary.	
	<u> </u>						

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

FOR LINE NUMBER: (check only one)

PAGE 20

13a

OF

		100
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4751
ū	iddla Initial	
LOAN SOURCE Full Name (Last, First, M John Mills for Congress	iddie initial)	☐ Memo Item
Mailing Address 1940 Boardwalk Drive		General 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
19.08		0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D08D / 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 Guaranteed
City	ZIP Code	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
	T	Amount Guaranteed
City	ZIP Code	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)		19.08
TOTALS This Period (last page in this line on	ly)	······································
Carry outstanding balance only to LINE 3, So	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 21

13a

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:
SUBTOTALS This Period This Page (optiona	N.	
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.

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

FOR LINE NUMBER: (check only one)

PAGE 22

13a

			Detailed Guiriniary I	age	13b	
NAME OF COMMITTEE (In Full) John Mills for Congress			Trans	saction ID : SC/10.4753		
•						
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)		☐ Memo Ite			
John Mills for Congress				Primary		
Mailing Address				General Other (specify) ▼		
Mailing Address 1940 Boardwalk Drive				Other (specify)		
City Miramar Beach	State FL	ZIP Code	)	Personal Funds of the	Candidate	
Milamar beach		32330				
Original Amount of Loan	Cumulative Pa	yment To D	ate B	alance Outstanding at Close of	This Period	
6.00			0.00 6.00			
3 3	9	7		9 9	4	
TERMS Date Incurred		Date Due	Interest R (If none, er	nter 0)	d:	
M12M / D21D / Y Ž01Ť Y	M M / D D	/ Y11/d	08/2018 <sup>Y</sup>	0.00 % (apr) Ye	s 🗷 No	
List All Endorsers or Guarantors (if any)	to Loan Source					
1. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address		(	Occupation			
			A ma a unit			
City State	ZIP Code		Amount Guaranteed			
City	ZIF Code	(	Outstanding:	, , , , , , , , , , , , , , , , , , , ,		
Full Name (Last, First, Middle Initial)  Mailing Address			Name of Employer			
			Occupation			
		7	Amount			
City State	ZIP Code		Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)	<b>'</b>	ı	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)					6.00	
TOTALS This Period (last page in this line onl				7 7	0.00	
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 23

13a

		Detailed Guillinary I	13b			
NAME OF COMMITTEE (In Full)		Trans	saction ID : SC/10.4754			
John Mills for Congress						
LOAN SOURCE Full Name (Last, First,	Middle Initial)	☐ Memo Ite	Election: 2018			
John Mills for Congress			<b>x</b> Primary			
			General			
Mailing Address 1940 Boardwalk Drive			Other (specify) ▼			
	1 -	I ·				
City	State	ZIP Code	Personal Funds of the Candidate			
Miramar Beach	FL	32550	i elsonal i unus of the Candidate			
Original Amount of Loan	Cumulative Pa	yment To Date B	Balance Outstanding at Close of This Period			
308.00		0.00	200.00			
308.00		0.00	308.00			
TERMS Date Incurred	[	Date Due Interest F				
M12M / D22D / Y Ž01Ť Y	M M / D D	(If none, el	0.00			
12 22 2017		11/06/2016	% (apr) Yes X No			
List All Endorsers or Guarantors (if an	y) to Loan Source					
1. Full Name (Last, First, Middle Initial)		Name of Employer				
		On a supertion				
Mailing Address		Occupation	Occupation			
		Amount				
City State	zIP Code	Guaranteed				
		Outstanding:	, , , , , , , , , , , , , , , , , , , ,			
2. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation	Occupation			
ag / taass		·				
		Amount				
City	ZIP Code	Guaranteed Outstanding:	9 9			
3. Full Name (Last, First, Middle Initial)		Name of Employer				
o. Fair Marrio (East, Friet, Middle Iritial)		rtaine er <u>inipie</u> yer				
Mailing Address		Occupation	Occupation			
		Amount				
City State	ziP Code	Guaranteed				
Oity	ZIF Code	Outstanding:	7			
4. Full Name (Last, First, Middle Initial)		Name of Employer				
NA 111 A 1 1		0.00000011000				
Mailing Address		Occupation				
		Amount				
City State	ZIP Code	Guaranteed				
		Outstanding:				
SUBTOTALS This Period This Page (option	al)	·····	308.00			
			9 9 9			
TOTALS This Period (last page in this line	only)	······				
			, , , , , , , , , , , , , , , , , , , ,			
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D. carry for	orward to appropriate line of Summarv.			

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

FOR LINE NUMBER: (check only one)

PAGE 24

13a

OF

		130		
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4755		
LOAN SOURCE Full Name (Last, First, Mic	ldle Initial)	☐ Memo Item Election: 2018		
John Mills for Congress		x   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 Pay			
56.34		0.00 56.34		
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)		
M12 <sup>M</sup> / D24 <sup>D</sup> / Y Ž017 Y	M M / D D	/ Y11/08/2018		
List All Endorsers or Guarantors (if any) to	o 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		
City	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)		56.34		
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.		

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

FOR LINE NUMBER: (check only one)

PAGE

25 OF

13a 13b

47

Transaction ID: SC/10.4756 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 208.00 0.00 208.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 12M 0.00 <sup>D</sup>29<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)..... 208.00 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

PAGE 26
FOR LINE NUMBER: (check only one)

13a

OF

		100
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4678
LOAN SOURCE Full Name (Last, First, M	Middle Initial	
John Mills for Congress	iliddie 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
400.00		0.00 400.00
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M01 <sup>M</sup> / D17 <sup>D</sup> / Y Ž018 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 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
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Dega (entions	<b>\</b>	
SUBTOTALS This Period This Page (optional	)	400.00
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

27 OF

×	13a
	13h

47

Transaction ID: SC/10.4709 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 2231.10 0.00 2231.10 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D31 D M 03M Ž018 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)..... 2231.10 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

28 OF

13a 13b

47

Transaction ID: SC/10.4829 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 Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 150.67 0.00 150.67 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>20<sup>D</sup> M 04M Ž018 Y08/28/2018 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)..... 150.67 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 29

13a

OF

		13b		
AME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4815		
LOAN SOURCE Full Name (Last, First, M John Mills for Congress Mailing Address 1940 Boardwalk Drive	iddle 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 Pag	ment To Date Balance Outstanding at Close of This Period		
8500.00		700.00 7800.00		
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)		
MO4M / D24D / Y Ž018 Y	M M / D D	/ <sup>1</sup> 11/08/2018		
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		
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:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City	ZIP Code	Amount Guaranteed Outstanding:		
UBTOTALS This Period This Page (optional) 7800.00  OTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3, So	chedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.		
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

30 OF

**X** 13a 13b

47

Transaction ID: SC/10.4830 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 Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1475.00 0.00 1475.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 15D M 06M Ž018 Y08/28/2018 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)..... 1475.00 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

PAGE 31 OF FOR LINE NUMBER: (check only one)

13a

			130
AME OF COMMITTEE (In Full) Ohn Mills for Congress			Transaction ID : SC/10.4831
LOAN SOURCE Full Name (Last, John Mills for Congress	First, Mid	ddle Initial)	Memo Item 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
Original Amount of Loan		Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
600	0.00		0.00 600.00
TERMS Date Incurred		D	ate Due Interest Rate Secured: (If none, enter 0)
M06 <sup>M</sup> / D15 <sup>D</sup> / Y Ž018	Y	M M / D D	/ <sup>Y</sup> 08/Ž8/2Ŏ18 <sup>Y</sup> 0.00
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)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed
		Zii Gode	Outstanding:
3. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Ir	litial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (	ontional)		
			, , , , , , , , , , , , , , , , , , , ,
OTALS This Period (last page in this	s line only	/)	······································
Carry outstanding balance only to LI	NE 3, Scl	nedule 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

FOR LINE NUMBER: (check only one)

PAGE 32

13a

OF

		130
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID: SC/10.4832
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	☐ Memo Item
John Mills for Congress		x 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	yment To Date Balance Outstanding at Close of This Period
35.10		0.00
TERMS Date Incurred	Γ	late Due Interest Rate Secured: (If none, enter 0)
M06 <sup>M</sup> / D27 <sup>D</sup> / Y Ž018 Y	M M / D D	/ <sup>Y</sup> 08/ž8/2ŏ18 <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
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 State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	l)	35.10
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	schedule 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

FOR LINE NUMBER: (check only one)

PAGE 33

×	13a
	13b

			130
AME OF COMMITTEE (In Full) Ohn Mills for Congress			Transaction ID : SC/10.4841
LOAN SOURCE Full Name (Last, John Mills for Congress	First, Mid	ddle Initial)	Memo Item 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
Original Amount of Loan	0.00	Cumulative Pay	ayment To Date  Balance Outstanding at Close of This Period  2000.00
TERMS Date Incurred		D	Date Due Interest Rate Secured:
M07M / D05D / Y 2018	Y	M M / D D	(If none, enter 0)  0.00  % (apr)  Yes 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
Cit.	Ctata	ZID Code	Amount Guaranteed
City	State	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Ir	itial)		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:
4. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
City	Ctoto	ZIP Code	Amount Guaranteed
City	State	ZIP Code	Outstanding:
SUBTOTALS This Period This Page (	optional).		2000.00
OTALS This Period (last page in this	s line only	y)	
Carry outstanding halance only to LL	NE 3. Scl	nedule D. for this	is line. If no Schedule D, carry forward to appropriate line of Summary.
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Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 34
FOR LINE NUMBER: (check only one)

13a

OF

						130
	ME OF COMMITTEE (In Full) ohn Mills for Congress				Trans	saction ID : SC/10.4842
Ľ						
	LOAN SOURCE Full Name (Last,	First, Mic	ldle Initial)		☐ Memo Ite	
	John Mills for Congress					Primary
	Mailing Address					General
	Mailing Address 1940 Boardwalk Drive					Other (specify) ▼
			ZIP Co	Code Personal Funds of the Can		
	Miramar Beach		FL	32550		
	Original Amount of Loan		Cumulative Pay	yment To	Date B	alance Outstanding at Close of This Period
	2000	0.00			0.00	2000.00
	TERMS Date Incurred		D	Date Due	Interest R	
	<sup>M</sup> 07 <sup>M</sup> / <sup>D</sup> 05 <sup>D</sup> / <sup>Y</sup> Ž018́	Υ	M M / D D	/ You	(If none, er 8/28/2018 <sup>Y</sup>	0.00
	07 05 2016			00	0/20/2016	% (apr) Yes No
	List All Endorsers or Guarantors	(if any) to	o Loan Source			
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	9
	2. Full Name (Last, First, Middle In	itial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	
	3. Full Name (Last, First, Middle Initial)				Name of Employer	, , , , , , , , , , , , , , , , , , , ,
	3. Tuli Name (Last, Flist, Middle III	itiai)			reality of Employer	
	Mailing Address				Occupation	
		_			Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	7
	4. Full Name (Last, First, Middle In	itial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	. , . ,
		1			1	
SI	UBTOTALS This Period This Page (	optional)			······	2000.00
T	TOTALS This Period (last page in this line only)					
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l C	arry outstanding balance only to Li	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry fo	orward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE 35

13a

OF

		130
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4106
9		
LOAN SOURCE Full Name (Last, First, Mic MILLS, Ralph, John, , III	ldle Initial)	☐ Memo Item Election: 2014   ✓ Primary
Mailing Address 1940 Boardwalk Drive		General Other (specify) ▼
City	State	ZIP Code
Miramar Beach	FL	32550 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date  Balance Outstanding at Close of This Period
5000.00	7	0.00 5000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M06 <sup>M</sup> / D24 <sup>D</sup> / Y Ž014 Y	M M / D D	/
List All Endorsers or Guarantors (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:
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	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
	·	
SUBTOTALS This Period This Page (optional)		5000.00
TOTALS This Period (last page in this line only	y)	·······
Carry outstanding balance only to LINE 3, Sch	nedule 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 36

13a

OF

		100
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4116
LOAN SOURCE Full Name (Last, First, MILLS, Ralph, John, , III	Aiddle Initial)	Memo Item Election: Primary General
Mailing Address 1940 Boardwalk Drive	Other (specify)	
City Miramar Beach	State	ZIP Code 32550  Personal Funds of the Candidate
Original Amount of Loan		yment To Date Balance Outstanding at Close of This Period
4234.94	Odificiative 1 a	0.00 4234.94
TERMS Date Incurred	Г	Date Due Interest Rate Secured: (If none, enter 0)
M07M / D18D / Y Z014 Y	M M / D D	% (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	])	
TOTALS This Period (last page in this line o		, , , , ,
		7 7 7
Uarry outstanding balance only to LINE 3, S	cneaule 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

FOR LINE NUMBER: (check only one)

PAGE 37

13a 13b

OF

		100	
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4197	
LOAN SOURCE Full Name (Last, First MILLS, Ralph, John, , III	st, Middle 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		Payment To Date Balance Outstanding at Close of This Period	
1000.00		0.00 1000.00	
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)	
M09 <sup>M</sup> / D08 <sup>D</sup> / Y Ž01Š Y	M M / D	□ / Y Y Y Y Y Y No	
List All Endorsers or Guarantors (if a	.,		
Full Name (Last, First, Middle Initial	al)	Name of Employer	
Mailing Address		Occupation	
City	ate ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial	)	Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City	ate ZIP Code	Outstanding:	
3. Full Name (Last, First, Middle Initial)  Name of Employer			
Mailing Address		Occupation	
City	ate ZIP Code	Amount Guaranteed	
4. Full Name (Last, First, Middle Initial		Outstanding:  Name of Employer	
	)		
Mailing Address		Occupation	
City	ate ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (opti	onal)	1000.00	
TOTALS This Period (last page in this lin	e only)	7 7	
		7 7	
Carry outstanding balance only to LINE	ડ, Schedule D, for th	nis 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 38

13a

OF

		130
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4299
9		m
LOAN SOURCE Full Name (Last, First, Mid MILLS, Ralph, John, , III	ldle Initial)	☐ Memo Item Election: 2016   ✓ Primary
Mailing Address 1940 Boardwalk Drive		General Other (specify) ▼
City	State	ZIP Code  ** Personal Funds of the Candidate
Miramar Beach	FL	32550 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
3850.64		0.00 3850.64
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M01 <sup>M</sup> / D02 <sup>D</sup> / Y Ž016 Y	M M / D D	% (apr) Yes X No
List All Endorsers or Guarantors (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:
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	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		3850.64
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.

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

FOR LINE NUMBER: (check only one)

**PAGE** 

×	13a
	13b

47

OF

Transaction ID: SC/10.4337 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 Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 345.33 0.00 345.33 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D30 D M 06M 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)..... 345.33 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 40

13a

OF

		130		
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4342		
Ğ		Ι		
LOAN SOURCE Full Name (Last, First, Mic MILLS, Ralph, John, , III	ldle Initial)	☐ Memo Item		
Mailing Address 1940 Boardwalk Drive		General Other (specify) ▼		
City	State	ZIP Code		
Miramar Beach	FL	32550 Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
1500.00	7	0.00 1500.00		
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)		
M07 <sup>M</sup> / D18 <sup>D</sup> / Y Ž016 Y	M M / D D	<sup>/</sup> Děmaňd <sup>→</sup> 0.00 % (apr) Yes 🗶 No		
List All Endorsers or Guarantors (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:		
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 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:		
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3, Sch	nedule 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

41

×	13a
	13b

47

OF

Transaction ID: SC/10.4343 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 300.00 0.00 300.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D06D M09M ž016 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)..... 300.00 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

FOR LINE NUMBER: (check only one)

PAGE 42

×	13a
	13b

			100
NAME OF COMMITTEE (In Full John Mills for Congres	•		Transaction ID : SC/10.4344
LOAN SOURCE Full Name	e (Last. First. Mic	Idle Initial)	Memo Item Election: 2018
MILLS, Ralph, John,	•	Memo Item    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 Pa	ment To Date Balance Outstanding at Close of This Period
	500.00		0.00 500.00
TERMS Date Incurre	d	С	ate Due Interest Rate Secured: (If none, enter 0)
M09M / D23D / Y	ž016 <sup>Y</sup>	M M / D D	/ Poemand Y 0.00 % (apr) Yes X No
List All Endorsers or Gua	rantors (if any) to	o Loan Source	
1. Full Name (Last, First, I	Middle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, M	fiddle Initial)		Name of Employer
Mailing Address			Occupation
2::		710 0 1	Amount Guaranteed
City	State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
2:1	0	710.0.1	Amount Guaranteed
City	State	ZIP Code	Outstanding:
4. Full Name (Last, First, N	liddle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This	Page (optional)		500.00
TOTALS This Period (last pag	e in this line only	r)	······································
Carry outstanding balance on	ly to LINE 3, Sch	edule 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

FOR LINE NUMBER: (check only one)

PAGE

43

**X** 13a 13b

OF

47

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.

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

FOR LINE NUMBER: (check only one)

PAGE

44 OF

×	13a
	13b

47

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

FOR LINE NUMBER: (check only one)

PAGE 45

13a

OF

							130	
	COMMITTEE (In Full)				Т	ransact	tion ID : SC/10.4358	
						ı		
	OURCE Full Name (Last,	First, Mid	☐ Memo	o Item	Election: 2018			
MILLS	S, Ralph, John, , III					x Primary		
Mailing	 Δddress					General Other (specify) ▼		
1940 Boa	Mailing Address 1940 Boardwalk Drive						Other (specify) V	
City			State ZIP Code FL 32550			<b>✗</b> Personal Funds of the Candidate		
	Miramar Beach			32550				
Origina	al Amount of Loan		Cumulative Pay	yment To	Date	Balar	nce Outstanding at Close of This Period	
	750.00				0.00	L	750.00	
TERMS	Date Incurred	C	Date Due		st Rate			
M 09M	M09M / D13D / Y Z017 Y M M / D D / Y					0.0	% (apr) Yes X No	
List All Endorsers or Guarantors (if any) to Loan Source								
1. Full	Name (Last, First, Middle	Initial)			Name of Employer			
Maili	ing Address				Occupation			
					Amount			
City		State	ZIP Code		Guaranteed Outstanding:		, , , , , , , , , , , , , , , , , , , ,	
2. Full N	2. Full Name (Last, First, Middle Initial)							
Mailin	Mailing Address					Occupation  Amount		
City		State	ZIP Code		Guaranteed Outstanding:		7	
3. Full N	3. Full Name (Last, First, Middle Initial)							
Mailin	Mailing Address							
					Amount			
City		State	ZIP Code		Guaranteed Outstanding:		9-1-19-1-19-1	
4. Full N	4. Full Name (Last, First, Middle Initial)							
Mailing Address					Occupation			
					Amount			
City		State	ZIP Code		Guaranteed Outstanding:		7	
SUBTOTAL	SUBTOTALS This Period This Page (optional)							
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July Julo	Landing Dalance Unity to Li	0, 301	2, 101 1118	<del>.</del> 11 1	Jonedale D, Call	. , 101 11	a.a. to appropriate into or outilitially.	

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FOR LINE NUMBER: (check only one)

PAGE 46

13a

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		130						
NAME OF COMMITTEE (In Full)  John Mills for Congress		Transaction ID : SC/10.4811						
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LOAN SOURCE Full Name (Last, First, Mic	Idle Initial)	☐ Memo Item   Election: 2018   ▼ Primary						
MILLS, Ralph, John, , III		General						
Mailing Address 1940 Boardwalk Drive		Other (specify) ▼						
City	State	ZIP Code  Personal Funds of the Candidate						
Miramar Beach	FL	32550 Telsonal Funds of the Gandidate						
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period						
16.95		0.00						
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)						
M04 <sup>M</sup> / D07 <sup>D</sup> / Y Ž018 Y	M M / D D	/ Y11/08/2018						
List All Endorsers or Guarantors (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:						
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:						
SUBTOTALS This Period This Page (optional)								
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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FOR LINE NUMBER: (check only one)

PAGE

47 OF

	13a
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47

Transaction ID: SC/10.4843 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary Start Skydiving, LLC General Mailing Address 1711 Runway Drive Other (specify)  $\blacktriangledown$ City State ZIP Code Personal Funds of the Candidate ОН 45042 Middletown Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 920.16 0.00 920.16 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D02D M 07M Ž018 Y08/28/2018 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 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)..... 920.16 TOTALS This Period (last page in this line only) ..... 38063.53 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.