PAGE 1 / 18

FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

1 011111 0	For An A	Authorized Com	nmittee	Off	ice Use Only
NAME OF COMMITTEE (in	TYPE OR PRIN	•	kample: If typing, type ver the lines.	12FE4M5	
John Mills for (Congress				
			1 1 1 1 1 1 1		
ADDRESS (number an	1940 Boardwa	alk Drive			
▼			1 1 1 1 1 1 1		
Check if diff than previou reported. (A	usly Miramar Beac	:h		FL 325	550
2. FEC IDENTIFIC	CATION NUMBER ▼	CITY A		STATE ▲	ZIP CODE ▲
C C0056536		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REI	PORT (Choose One)	(b) 12-Day PRE	E-Election Report for th	ne:	
			Primary (12P)	General (12G)	Runoff (12R)
	Quarterly Report (Q1)		Convention (12C)	Special (12S)	
	Quarterly Report (Q2) r 15 Quarterly Report (Q3)	Election on	M M M / D D	/ Y " Y " Y " Y	in the State of
January	31 Year-End Report (YE)	(c) 30-Day PO \$	ST-Election Report for	the:	
			General (30G)	Runoff (30R)	Special (30S)
Termina	ation Report (TER)	Election on	M M / D D	/ Y " Y " Y " Y	in the State of
5. Covering Period	M M / D 01	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through	09 / D D / Y	2017
I certify that I have e	examined this Report and to Adams, Chris of Treasurer		nowledge and belief it	is true, correct and co	omplete.
Signature of Treasure	Adams, Christopher, , ,		[Electronically Filed]	Date 10	11 Y Y Y Y Y Y Y 2017
NOTE: Submission of	false, erroneous, or incomple	ete information may	subject the person sign	ing this Report to the p	enalties of 52 U.S.C. §30109
Office Use Only					FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name John Mills for Congress

2017 2017 09 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 805.00 (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) 0.00 805.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 750.00 8801.49 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 750.00 8801.49 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 423.13 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 18130.91 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 / 18

Write or Type Committee Name

John	Mills	for	Congress

07 2017 09 01 30 2017 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 0.00 300.00 (i) Itemized (use Schedule A)...... 505.00 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 805.00 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) 0.00 805.00 (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 900.00 9234.94 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 900.00 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) 900.00 10039.94 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 18

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	750.00	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
0.	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
1.	OTHER DISBURSEMENTS	0.00	0.00
2.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	750.00	8801.49
	III. CASH SU	JMMARY	
3.	CASH ON HAND AT BEGINNING OF REPOR	rting period	273.13
4	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	900.00
5.	SUBTOTAL (add Line 23 and Line 24)		1173.13
6.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	750.00
7.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	423.13

PAGE 5 OF FOR LINE NUMBER: 18 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) MILLS, Ralph, John, , III Date of Receipt Mailing Address 1940 Boardwalk Drive 26 City State Zip Code Transaction ID: SA13A.4357 FL 32550 Miramar Beach FEC ID number of contributing Amount of Each Receipt this Period C H6FL01143 federal political committee. 150.00 Name of Employer Occupation Requested Requested Memo Item Receipt For: 2018 Election Cycle-to-Date Demand Loan from Candidate **x** Primary General 8145.97 Other (specify) Full Name (Last, First, Middle Initial) MILLS, Ralph, John, , III Date of Receipt Mailing Address 1940 Boardwalk Drive 2017 09 13 City State Zip Code Transaction ID: SA13A.4358 Miramar Beach FL 32550 FEC ID number of contributing C H6FL01143 Amount of Each Receipt this Period federal political committee. 750.00 Name of Employer Occupation Requested Requested Memo Item Receipt For: 2018 Election Cycle-to-Date **Demand Loan from Candidate ✗** Primary General 8895.97 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).....

900.00

900.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

PAGE 6 FOR LINE NUMBER: Use separate schedule(s) (check only one) **x** 17 18 19a

18

for each category of the 19b Detailed Summary Page 20a 20b 20c 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 2017 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 C00565366 001 Candidate Name Amount of Each Disbursement this Period Category/ John Mills for Congress Type Office Sought: Disbursement For: 2018 375.00 House Senate Primary General Transaction ID: SB17.4359 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Law Office of James C. Thomas III Date of Disbursement Mailing Address 7509 NW Tiffany Springs Pkwy 2017 Suite 300 City State Zip Code **FEC Identification Number** MO Kansas City 64153 Purpose of Disbursement Legal and Reporting Services C00565366 001 Candidate Name Amount of Each Disbursement this Period Category/ John Mills for Congress Type 375.00 Office Sought: Disbursement For: House 2018 Senate Primary General Transaction ID: SB17.4360 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)..... 750.00 TOTAL This Period (last page this line number only)..... 750.00

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

PAGE 7
FOR LINE NUMBER: (check only one)

13a 13b

OF

										130
AME OF COMMITTEE (In Full) Ohn Mills for Congress					Trans	saction I	D : SC/10.41	06		
LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III Mailing Address 1940 Boardwalk Drive	First, Mic	ddle Initial)			Memo Ite		ction: 2014 Primary General Other (spec			
City		State	ZIP Code							
Miramar Beach		FL	32550			×	Personal F	unds of t	he Cand	lidate
Original Amount of Loan		Cumulative Pay	yment To D	ate	В	alance C	Outstanding	at Close	of This F	² eriod
5000	0.00	, ,		0.00)				5000.00	
TERMS Date Incurred		D	ate Due		Interest R			Seci	ured:	
M06 ^M / D24 ^D / Y Ž014	Υ	M M / D D	/ Y Y	YY	(ii fiolio, di	0.00	% (apr)		Yes 🗶	No
List All Endorsers or Guarantors	(if any) t	o Loan Source								
1. Full Name (Last, First, Middle I	nitial)		1	Name of Em	ployer					
Mailing Address			(Occupation						
	_			Amount	_	-			_	
City	State	ZIP Code		Guaranteed Dutstanding:		7	,	1 1		
2. Full Name (Last, First, Middle In	itial)		1	Name of Employer						
Mailing Address			(Occupation						
				Amount Guaranteed			$\overline{}$			
City	State	ZIP Code		Outstanding:		7	7			
3. Full Name (Last, First, Middle In	itial)		1	Name of Em	ıployer					
Mailing Address			(Occupation						
				Amount					一	
City	State	ZIP Code		Guaranteed Outstanding:		7	7			
4. Full Name (Last, First, Middle In	itial)	•	1	Name of Em	ıployer					
Mailing Address			(Occupation						
	12			Amount					$\overline{}$	
City	State	ZIP Code		Guaranteed Dutstanding:		7	7			
SUBTOTALS This Period This Page (···• [9	, 6	5000.00	
OTALS This Period (last page in this	s line only	/) ·····					7	7	-	
Carry outstanding balance only to LI	NE 3, Sch	nedule D, for this	s line. If no	Schedule	D, carry fo	orward t	o appropria	ite line o	f Summ	ary.

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

FOR LINE NUMBER: (check only one)

PAGE 8

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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	Γ	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

PAGE 9
FOR LINE NUMBER: (check only one)

X	13a
	13b

18

OF

Transaction ID: SC/10.4197 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Memo Item Primary MILLS, Ralph, John, , III General Mailing Address 1940 Boardwalk Drive Other (specify) City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) D08D M09M Ž015 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)..... 1000.00 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)

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OF

		100
NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC/10.4299
LOAN SOURCE Full Name (Last, First, MMILLS, Ralph, John, , III	fiddle 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
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3850.64	,	0.00 3850.64
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M01M / D02D / Y Z016 Y	M M / D D	/ Y Y Y Y Y No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
2. Full Name (Last, First, Middle Initial)		Outstanding: Name of Employer
2. Full Name (Last, First, Middle Illitial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	I	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
City State	ZIP Code	Amount Guaranteed
City	ZIF Code	Outstanding:
SUBTOTALS This Period This Page (optiona)	3850.64
TOTALS This Period (last page in this line or		, , , , ,
TOTALS THIS FERIOU (last page in this line of	ııy <i>)</i>	
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)

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X 13a 13b

OF

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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

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FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID: SC/10.4342
LOAN SOURCE Full Name (Last, First, Mi	ddla Initial\	
MILLS, Ralph, John, , III	adie initial)	☐ Memo Item Election: 2018 ▼ Primary General
Mailing Address 1940 Boardwalk Drive		Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Miramar Beach	FL	32550
Original Amount of Loan	Cumulative Pag	yment To Date Balance Outstanding at Close of This Period
1500.00		0.00 1500.00
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)
M07 ^M / D18 ^D / Y Ž016 Y	M M / D D	√ Poémaňd Y 0.00 M (apr) Yes No √
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	<u>.</u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		
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Carry outstanding balance only to LINE 3, Sc	hedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC/10.4343
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)	Memo Item Election: 2018
MILLS, Ralph, John, , III	adie ilitial)	Memo Item Clection: 2018
Mailing Address 1940 Boardwalk Drive		Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Miramar Beach	FL	32550
Original Amount of Loan	Cumulative Page	yment To Date Balance Outstanding at Close of This Period
300.00		0.00 300.00
TERMS Date Incurred		late Due Interest Rate Secured: (If none, enter 0)
M09 ^M / D06 ^D / Y Z016 Y	M M / D D	✓ Pěmaňd Ý 0.00 % (apr) Yes 🗶 No
List All Endorsers or Guarantors (if any) t	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	T	Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		
		, , , , , , , , , , , , , , , , , , , ,
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

					, ,	130		
	ME OF COMMITTEE (In Full) ohn Mills for Congress				Transaction II	D : SC/10.4344		
Ľ								
	LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III	First, Mic	ldle Initial)		x	tion: 2018 Primary		
						General		
	Mailing Address 1940 Boardwalk Drive					Other (specify) ▼		
	City		State FL	ZIP Cod	le	Personal Funds of the Candidate		
	Miramar Beach			32550	Data Balance C	Nutationalism at Olean of This Deviced		
	Original Amount of Loan		Cumulative Pay	ment 10	Date Balance C	Outstanding at Close of This Period		
	500	0.00	9		0.00	500.00		
	TERMS Date Incurred		D	ate Due	Interest Rate (If none, enter 0)	Secured:		
	M09M / D23D / Y Ž016	Y	M M / D D	/ Y [ěmaňd ^Ý 0.00	% (apr) Yes No		
	List All Endorsers or Guarantors	(if any) to	o Loan Source					
	Full Name (Last, First, Middle Initial)				Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	, , ,		
	2. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:			
	3. Full Name (Last, First, Middle In	itial)	•		Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:			
	4. Full Name (Last, First, Middle In	itial)	•		Name of Employer			
	Mailing Address				Occupation			
				Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9		
SI	UBTOTALS This Period This Page (optional)			<u> </u>	500.00		
т	OTALS This Period (last page in this	line only	·)			7		
	Carry outstanding balance only to LII	NE 3. Sch	nedule D. for this	line. If	no Schedule D. carry forward t	o appropriate line of Summary		
ı	and satisfaming salarioe only to Li	0, 001	2, 101 1118	,v. II I	Jonean D, carry forward t	appropriate into or outlinary.		

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

FOR LINE NUMBER: (check only one)

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OF

						130		
	ME OF COMMITTEE (In Full) ohn Mills for Congress				Transactio	on ID : SC/10.4351		
	LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III	First, Mic	ddle Initial)		- Memo item	Election: 2018 Primary		
	• • • • • • • • • • • • • • • • • • • •					General		
	Mailing Address 1940 Boardwalk Drive					Other (specify) ▼		
	City		State	ZIP Cod	de	Personal Funds of the Candidate		
	Miramar Beach		FL	32550				
	Original Amount of Loan		Cumulative Pay	ment To	Date Balanc	e Outstanding at Close of This Period		
	500	0.00	,		0.00	500.00		
	TERMS Date Incurred		D	ate Due	Interest Rate (If none, enter 0)	Secured:		
	^M 05 ^M / ^D 02 ^D / ^Y Ž01Ť	Υ	M M / D D	/ Y	pěmaňd ^Y 0.00	% (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:	7		
	2. Full Name (Last, First, Middle In	itial)	1		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:	9		
	4. Full Name (Last, First, Middle In	itial)	-		Name of Employer			
	Mailing Address				Occupation			
				Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9		
S	UBTOTALS This Period This Page (optional)			······································	500.00		
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 forwar	rd 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)

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ſ	X	13a
ſ		13b

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Transaction ID: SC/10.4357 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary MILLS, Ralph, John, , III General Mailing Address 1940 Boardwalk Drive Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 150.00 0.00 150.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D26^D 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)

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OF

		100							
NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC/10.4358							
· ·									
LOAN SOURCE Full Name (Last, First, Mi MILLS, Ralph, John, , III	☐ Memo Item Election: 2018 ✔ 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 Pa	yment To Date Balance Outstanding at Close of This Period							
750.00		0.00 750.00							
TERMS Date Incurred	Г	Pate Due Interest Rate Secured: (If none, enter 0)							
M09 ^M / P13 ^D / Y Z017 Y	M M / D D	/							
List All Endorsers or Guarantors (if any) to Loan Source									
1. Full Name (Last, First, Middle Initial)		Name of Employer							
Mailing Address		Occupation							
	ı	Amount Guaranteed							
City	ZIP Code	Outstanding:							
2. Full Name (Last, First, Middle Initial)		Name of Employer							
Mailing Address		Occupation							
City	ZID Code	Amount Guaranteed							
City State	ZIP Code	Outstanding:							
3. Full Name (Last, First, Middle Initial)		Name of Employer							
Mailing Address		Occupation							
011	710.0	Amount Guaranteed							
City	ZIP Code	Outstanding:							
4. Full Name (Last, First, Middle Initial)		Name of Employer							
Mailing Address		Occupation							
		Amount							
City	ZIP Code	Guaranteed Outstanding:							
SUBTOTALS This Period This Page (optional)		750.00							
TOTALS This Period (last page in this line onl	y)	18130.91							
Carry outstanding balance only to LINE 3, Sc	hedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.							

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

Exc

	big AND OBLIGATIONS				or each Dered line)	(check only one)	9		
	ACLUDING Loans num NAME OF COMMITTEE (In Full)						X 10		
	,								
J	ohn Mills for Congre	SS							
	A. Full Name (Last, First, Middle Initial) of De		Nature of Debt (Purpose):						
	Law Office of James C. Thomas III					Legal and Reporting Services			
ŀ	Mailing Address 7509 NW Tiffany Springs Pkv								
	Suite 300								
ĺ	City	State	Zip Code						
ļ	Kansas City	МО	64153						
	Outstanding Balance Beginning This Period	Outstanding Balance Beginning This Period					Transaction ID : SD10.4354		
	375.00	375.00							
	Amount Incurred This Period	iod Payment This Period			Outstanding Balance at Close of This Period				
				20	Guistarian	ng Balance at Close e			
	0.00	00	0.00						
ŀ	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor					T			
	B. Full Warte (East, Flist, Wildele Hillar) of Debtor of Oreditor					Nature of Debt (Purpose):			
	Mailing Address								
ŀ	City	State	Zip Code						
	o.i.y	Ciaio	2.0 0000						
Outstanding Balance Beginning This Period									
	Custaining Balance Beginning This Feriod								
						Outstanding Balance at Close of This Period			
	Amount Incurred This Period Payment This Period								
	C. Full Name (Last, First, Middle Initial) of De		Nature of Debt (Purpose):						
Mailing Address									
	City	State	Zip Code						
ŀ									
	Outstanding Balance Beginning This Period								
	Amount Incurred This Period	Outstandii	ng Balance at Close o	f This Period					
	7 7		7 7 7			7 7			
1)	1) SUBTOTALS This Period This Page (optional)						0.00		
2)	2) TOTALS This Period (last page this line number only)						0.00		
-)	2) TOTALS This Period (last page this line number only)								
3)	3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)								
4)	ADD 2) and 3) and carry forward to appropri	ate line of Su	ımmary Page (last page or	nly) 🕨		7	(A)		

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FOR LINE NUMBER:

(Use separate schedule(s)