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FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

1 0111111 0	For An A	Authorized Con	Offi	Office Use Only		
NAME OF COMMITTEE (in formall)	TYPE OR PRIN	•	kample: If typing, type ver the lines.	12FE4M5		
John Mills for C	ongress		1 1 1 1 1 1 1			
ADDRESS (number and	1940 Boardwa	lk Drive				
▼						
Check if diffe than previous reported. (AC	ly Miramar Beac	h 		FL 325	50	
2. FEC IDENTIFIC	ATION NUMBER ▼	CITY A		STATE A	ZIP CODE ▲	
C C00565366		3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT	
4. TYPE OF REP	ORT (Choose One)	(b) 12-Day PRI	E-Election Report for th	e:		
April 15 (Quarterly Report (Q1)	Ш	Primary (12P)	General (12G)	Runoff (12R)	
			Convention (12C)	Special (12S)		
	Quarterly Report (Q2)	Election or	M M / D D	/ Y Y Y Y	in the State of	
January 3	31 Year-End Report (YE)	(c) 30-Day PO	ST-Election Report for	the:		
			General (30G)	Runoff (30R)	Special (30S)	
Termination	on Report (TER)	Election or	M M / D D	/ Y " Y " Y	in the State of	
5. Covering Period	M M / D D 0	Y Y Y Y Y 2017	through	M / D D / Y	2017	
I certify that I have exa	amined this Report and to Adams, Chris Treasurer		nowledge and belief it	is true, correct and co	mplete.	
Signature of Treasurer	Adams, Christopher, , ,		[Electronically Filed]	Date 04	17 Y Y Y Y 2018	
NOTE: Submission of fa	lse, erroneous, or incomple	ete information may	subject the person signi	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 FEC Form 3 (Revised 05/2016)

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2017

09

Write o	or Type	Com	nittee	Name
Johr	า Mills	for	Con	gress

2017 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 805.00 (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 876.34 8801.49 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 876.34 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 18257.25 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

Write or Type Committee Name

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

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Rep	port Covering the Period: From:		09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. (CONTRIBUTIONS (other than loans) FROM:		
((a) Individuals/Persons Other Than		
	Political Committees (i) Itemized (use Schedule A)	0.00	300.00
	(ii) Unitemized	0.00	505.00
	(iii) TOTAL of contributions from individuals	0.00	805.00
(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	805.00
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3. I	LOANS:		
((a) Made or Guaranteed by the Candidate	1026.34	9234.94
((b) All Other Loans	0.00	0.00
((c) TOTAL LOANS (add Lines 13(a) and (b))	1026.34	9234.94
	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS	0.00	0.00
	Dividends, Interest, etc.)	0.00	0.00
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)	1026.34	10039.94

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	876.34	8801.49
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19	LOAN REPAYMENTS:		
10.	(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)	876.34	8801.49
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	rting period	273.13
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	1026.34
25.	SUBTOTAL (add Line 23 and Line 24)		1299.47
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	876.34
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		423.13

SCHEDULE A (FEC Form 3)

PAGE 5 OF FOR LINE NUMBER: 19 (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 21 City State Zip Code Transaction ID: SA13A.4711 FL 32550 Miramar Beach FEC ID number of contributing Amount of Each Receipt this Period C00565366 federal political committee. 126.34 Name of Employer Occupation Memo Item Receipt For: 2018 Election Cycle-to-Date On Demand Primary General 126.34 Other (specify) Full Name (Last, First, Middle Initial) MILLS, Ralph, John, , III Date of Receipt Mailing Address 1940 Boardwalk Drive 2017 07 26 City State Zip Code Transaction ID: SA13A.4357 Miramar Beach FL 32550 FEC ID number of contributing С H6FL01143 Amount of Each Receipt this Period federal political committee. 150.00 Name of Employer Occupation Requested Requested Memo Item Receipt For: 2018 Election Cycle-to-Date **Demand Loan from Candidate ✗** Primary General 8145.97 Other (specify) ▼ Full Name (Last, First, Middle Initial) MILLS, Ralph, John, , III Date of Receipt Mailing Address 1940 Boardwalk Drive 13 Zip Code City State Transaction ID: SA13A.4358 FL Miramar Beach 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 Other (specify) 8895.97 1026.34 SUBTOTAL of Receipts This Page (optional).....

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

1026.34

SCHEDULE B (FEC Form 3)

6 19 FOR LINE NUMBER: PAGE 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 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: 375.00 House Disbursement For: 2018 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 09 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: House Disbursement For: 2018 Senate Primary General Transaction ID: SB17.4360 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) C. Office Depot Date of Disbursement Mailing Address 34940 Emerald Coast Pkwy 2017 City State Zip Code **FEC Identification Number** Destin 32541 Purpose of Disbursement Office Supplies C00565366 001 Candidate Name Amount of Each Disbursement this Period Category/ John Mills for Congress Type Disbursement For: 2018 126.34 Office Sought: House Senate Primary General Transaction ID: SB17.4710 President Other (specify) Memo Item State: FL District: SUBTOTAL of Disbursements This Page (optional)..... 876.34 TOTAL This Period (last page this line number only)..... 876.34

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

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FOR LINE NUMBER: (check only one)

13a

				Detailed out	illillary i age			13b
AME OF COMMITTEE (In Full) John Mills for Congress					Transaction	on ID : SC/10.4711		
John Mills for Congress Mailing Address 1940 Boardwalk Drive	, First, Mi	ddle Initial)		_ M	flemo Item	Election: 2018 Primary General Other (specify)		
City Miramar Beach		State	ZIP Cod 32550	е		Personal Funds of t	the Can	didate
Original Amount of Loan Cumulative Payment To 126.34			yment To [Date 0.00	Baland	ce Outstanding at Close	of This 126.34	
TERMS Date Incurred M09M / D21D / Y Z017	Y	M M / D D	Date Due		iterest Rate none, enter 0))	eured:	x No
List All Endorsers or Guarantors		to Loan Source						
1. Full Name (Last, First, Middle	Initial)			Name of Emplo	oyer			
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		, , , , , ,		
2. Full Name (Last, First, Middle	Initial)	'		Name of Emplo	oyer			
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		, , , , ,		
3. Full Name (Last, First, Middle	Initial)			Name of Emplo	oyer			
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		, , , , , ,		
4. Full Name (Last, First, Middle	Initial)	'		Name of Emplo	oyer			
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		y y y y y		
SUBTOTALS This Period This Page FOTALS This Period (last page in the	is line onl	у)			•	7 7 7	126.34	
Carry outstanding balance only to I	INE 3, Sci	hedule D, for this	s line. If n	o Schedule D.	carry forwa	ard to appropriate line o	f Sumr	nary.

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

PAGE 8
FOR LINE NUMBER: (check only one)

13a

					13b			
NAME OF COMMITTEE (In Full) John Mills for Congress			Tran	nsaction ID : SC/10.4106				
LOAN SOURCE Full Name (Last, First, Middle Initial) Memo Item Election: 2014								
MILLS, Ralph, John, , III	due ililiai)		∐ Memo I	Item Election: 2014 X Primary General				
Mailing Address 1940 Boardwalk Drive				Other (specify) ▼				
City				✗ Personal Funds of the Can	didate			
Miramar Beach	FL	32550						
Original Amount of Loan Cumulative Payment To D				Balance Outstanding at Close of This	_			
5000.00	9	7	0.00	5000.00				
TERMS Date Incurred	D	ate Due	Interest (If none,					
^M 06 ^M / ^D 24 ^D / ^Y Ž01 ^Ž ^Y	M M / D D	/ Y Y	YY	0.00 % (apr) Yes	x No			
List All Endorsers or Guarantors (if any) t	o Loan Source							
1. Full Name (Last, First, Middle Initial)		1	Name of Employer					
Mailing Address	Mailing Address			Occupation				
		A	Amount					
City	ZIP Code		Guaranteed Outstanding:	. , . ,				
2. Full Name (Last, First, Middle Initial)	2. Full Name (Last, First, Middle Initial)				Name of Employer			
Mailing Address		(Occupation					
			Amount					
City	ZIP Code		Guaranteed Outstanding:	<u> </u>				
3. Full Name (Last, First, Middle Initial)		1	Name of Employer					
Mailing Address		(Occupation					
			Amount					
City	ZIP Code		Guaranteed Outstanding:					
4. Full Name (Last, First, Middle Initial)		1	Name of Employer					
Mailing Address	(Occupation						
		1	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. Sci	adula D for this	s line If no	Schadula D. carry	forward to appropriate line of Summ	man/			

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

FOR LINE NUMBER: (check only one)

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OF

NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC/10.4116
LOAN SOURCE Full Name (Last, First, MILLS, Ralph, John, , III	Middle Initial)	Memo Item Election: Primary General
Mailing Address 1940 Boardwalk Drive		Other (specify)
City	State	ZIP Code
Miramar Beach	FL	32550
Original Amount of Loan	Cumulative Pay	
4234.94	2	0.00 4234.94
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M07 ^M / D18 ^D / Y Ž014 Y	M M / D D	% (apr) Yes X No
List All Endorsers or Guarantors (if an	**	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
Cit.	e ZIP Code	Amount Guaranteed
City	e ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Stat	e ZIP Code	Amount Guaranteed
,	e ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Stat	e ZIP Code	Amount Guaranteed
4. Full Name (Last, First, Middle Initial)	211 0000	Outstanding: Name of Employer
Mailing Address		Occupation
City	e ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (option	nal)	
		, , , , , , , , , , , , , , , , , , , ,
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)

13a

OF

				130		
AME OF COMMITTEE (In Full) ohn Mills for Congress			-	Fransaction ID: SC/10.4197		
LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III Mailing Address 1940 Boardwalk Drive	First, Mid	ddle Initial)	☐ Mem	Description: Primary General Other (specify) ▼		
City		State	IP Code			
Miramar Beach		FL	32550	Personal Funds of the Candidate		
Original Amount of Loan		Cumulative Pay	ent To Date	Balance Outstanding at Close of This Perio		
1000	0.00	2	0.00	1000.00		
TERMS Date Incurred		D		est Rate Secured: ne, enter 0)		
M09 ^M / D08 ^D / Y Ž01Š	Y	M M / D D	/	% (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 Employe	r		
Mailing Address			Occupation			
	Τ_	T	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	yy		
2. Full Name (Last, First, Middle In	itial)	•	Name of Employe	Name of Employer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	, ,		
3. Full Name (Last, First, Middle In	itial)		Name of Employe	Name of Employer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle In	itial)		Name of Employe	r		
Mailing Address			Occupation			
011	lo. :		Amount			
City	State	ZIP Code	Guaranteed Outstanding:			
SUBTOTALS This Period This Page (1000.00		
OTALS This Period (last page in this						
Carry outstanding balance only to LI	NE 3, Sch	nedule D, for this	ne. If no Schedule D, ca	rry forward to appropriate line of Summary.		

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

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OF

				130		
AME OF COMMITTEE (In Full) ohn Mills for Congress				Transaction ID : SC/10.4299		
LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III Mailing Address 1940 Boardwalk Drive	First, Mid	ddle Initial)		Memo Item Election: 2016 x Primary General Other (specify) ▼		
City		State	ZIP Code			
Miramar Beach		FL	32550	Personal Funds of the Candidat		
Original Amount of Loan		Cumulative Pay	nent To Date	Balance Outstanding at Close of This Perio		
3850).64		C	0.00 3850.64		
TERMS Date Incurred		D	te Due	Interest Rate Secured: (If none, enter 0)		
M01 ^M / D02 ^D / Y Ž016	Y	M M / D D	/ Y Y Y Y	% (apr) Yes X N		
List All Endorsers or Guarantors	(if any) t	o Loan Source				
1. Full Name (Last, First, Middle I	nitial)		Name of	f Employer		
Mailing Address			Occupation	ion		
	T		Amount Guarantee	and		
City	State	ZIP Code	Outstandi			
2. Full Name (Last, First, Middle In	itial)	1	Name of	Name of Employer		
Mailing Address			Occupation	ion		
City	State	ZIP Code	Amount Guarantee Outstandi			
3. Full Name (Last, First, Middle In	itial)		Name of	Name of Employer		
Mailing Address			Occupation	ion		
Cit.	Ctata	ZID Code	Amount Guarantee	ped .		
City	State	ZIP Code	Outstandi	ding:		
4. Full Name (Last, First, Middle In	itial)		Name of	f Employer		
Mailing Address			Occupation	ion		
City	State	ZIP Code	Amount Guarantee Outstandi			
SUBTOTALS This Period This Page (s line only	y) ······				
Carry outstanding balance only to LI	NE 3, Sch	nedule D, for this	line. If no Schedu	ule D, carry forward to appropriate line of Summary.		

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

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OF

		130		
NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC/10.4337		
Ğ	1 11 1 11 11 15	··		
LOAN SOURCE Full Name (Last, First, Mic MILLS, Ralph, John, , III	idle 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 Pullus of the Candidate		
Original Amount of Loan	Cumulative Pay			
345.33	9	0.00 345.33		
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)		
M06 ^M / D30 ^D / Y Ž016 Y	M M / D D	/ Y Y Y Y O.00		
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)		345.33		
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

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OF

	ME OF COMMITTEE (In Full) hn Mills for Congress				Trans	action ID : SC/10.4342	
	LOAN SOURCE Full Name (Last, First, Middle Initial) MILLS, Ralph, John, , III Mailing Address 1940 Boardwalk Drive					Election: 2018 X Primary General	
						Other (specify)	
	City		State	ZIP Cod	de	Personal Funds of the Candidate	
	Miramar Beach FL 32			32550			
	Original Amount of Loan		Cumulative Pag	yment To	Date Ba	alance Outstanding at Close of This Period	
	7 7	1500.00	7		0.00	1500.00	
-	TERMS Date Incurred		C	Date Due	Interest Ra (If none, en		
	M07M / P18P / Y	ž016 ^Y	M M / D D	/ Y [Děmaňd ^Y	0.00 % (apr) Yes X No	
	List All Endorsers or Guarar	ntors (if any) to	o Loan Source				
	1. Full Name (Last, First, Mic	ddle Initial)			Name of Employer		
	Mailing Address				Occupation		
-	City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
-	2. Full Name (Last, First, Middle Initial)				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9 9	
7	3. Full Name (Last, First, Mid	dle Initial)	'		Name of Employer Occupation		
	Mailing Address						
		1_	T		Amount Guaranteed		
	City	State	ZIP Code		Outstanding:	9	
-	4. Full Name (Last, First, Mid-	dle Initial)			Name of Employer		
	Mailing Address				Occupation Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9 9	
su	BTOTALS This Period This P	age (optional)				1500.00	
	TALS This Period (last page i					1300.00	
_							
Ca	rry outstanding balance only	to LINE 3, Sch	edule D, for this	s line. If 1	no Schedule D, carrv fo	rward to appropriate line of Summary.	

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

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19

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

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19

Transaction ID: SC/10.4344 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 ^D23^D 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)..... 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

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OF

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	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 Occupation Amount		
	Mailing Address						
	City	State	ZIP Code		Guaranteed Outstanding:	9 9	
	3. Full Name (Last, First, Middle In	itial)			Name of Employer Occupation		
	Mailing Address						
					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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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

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FOR LINE NUMBER: (check only one)

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		Detailed Guillinary Fage	13b		
AME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID :	SC/10.4358		
LOAN SOURCE Full Name (Last, First, Mic MILLS, Ralph, John, , III Mailing Address 1940 Boardwalk Drive	ddle Initial)	Ge	n: 2018 mary neral her (specify) ▼		
City Miramar Beach	State FL	32550 X Pe	ersonal Funds of the Candidate		
Original Amount of Loan 750.00	Cumulative Pay	ent To Date Balance Outs 0.00	standing at Close of This Period 750.00		
TERMS Date Incurred M09M / P13P / Y Z017 Y	D D D	Interest Rate (If none, enter 0)	Secured: % (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	Mailing Address		Occupation		
City	ZIP Code	Amount Guaranteed Outstanding:	7		
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 State	ZIP Code	Amount Guaranteed Outstanding:	, , , , ,		
SUBTOTALS This Period This Page (optional)			750.00		
FOTALS This Period (last page in this line only	v)		18257.25		
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	ne. If no Schedule D, carry forward to a	appropriate line of Summarv.		

NAME OF COMMITTEE (In Full)

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

Excluding Loans

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

PAGE 19 OF FOR LINE NUMBER: (check only one)

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Y	10

John	Mills	for	Congress
			<u> </u>

John Mills for	Congress			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose): Legal and Reporting Services	
Law Office of James C. Thomas III			Legal and Reporting Services	
Mailing Address 7509 NW Suite 300	Tiffany Springs Pkwy			
City	State	Zip Code		
Kansas City	MO	64153		
Outstanding Balance Beg	inning This Period		Transaction ID : SD10.4354	
	375.00			
Amount Incurred	This Period	Payment This Period	Outstanding Balance at Close of This Period	
	0.00	375.00	0.00	
D. F. II M. (I		,	, ,	
B. Full Name (Last, First, M	liddle Initial) of Debtor or Cre	aitor	Nature of Debt (Purpose):	
Martin Address				
Mailing Address				
City	State	Zip Code		
Outstanding Palance Pag	inning This David		_1	
Outstanding Balance Beg	inning this Period			
, , , , ,				
Amount Incurred	This Period	Payment This Period	Outstanding Balance at Close of This Period	
C Full Name (Last First M	Middle Initial) of Debtor or Cr			
C. Tull Name (Last, Flist, F	vildule illitially of Debtor of Cr	Nature of Debt (Purpose):		
A4 ''' A 1 1				
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beg	inning This Period		<u> </u>	
Amount Incurred	This Period	Payment This Period	Outstanding Balance at Close of This Period	
7 Indan Indang	THIS I SHOU	r dymone mile r ened	Culturaling Bularios at Gioss St. Tills 1 dilea	
7		9 9	, , , , , , , , , , , , , , , , , , , ,	
1) SUBTOTALS This Period 1	0.00			
2) TOTALS This Period (last	page this line number only)	0.00		
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				