Image#	2021	04129	44321	8486
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04/12/2021 13 : 20

PAGE 1 / 53

FEC FORM 3	AND DI		ECEIPTS EMENTS ommittee	Offi	ce Use Only
1. NAME OF COMMITTEE (in	TYPE OR PRIM full)	NT 🔻	Example: If typing, type over the lines.	e 12FE4M5	
John Mills for (Congress				
ADDRESS (number an	d street)				
▼ Check if dif					
than previou reported. (A				FL 325	66
2. FEC IDENTIFIC	CATION NUMBER V	CITY		STATE 🔺	ZIP CODE
C C0056536	6	3. IS THIS REPORT	× NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
4. TYPE OF REI (a) Quarterly Re	PORT (Choose One) eports:	(b) 12-Day P	RE-Election Report for t		
× April 15	Quarterly Report (Q1)		Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R)
	Quarterly Report (Q2) r 15 Quarterly Report (Q3)	Election	M M / D	D / Y Y Y Y	in the State of
January	v 31 Year-End Report (YE)	(c) 30-Day P	OST-Election Report for	r the:	
		0	General (30G)	Runoff (30R)	Special (30S)
Termina	tion Report (TER)	Election		D / Y Y Y Y Y	in the State of
5. Covering Period	01 / D1 D1	/ Y Y Y Y 2021	through	M M / D D / Y 03 31	y y y 2021
I certify that I have e Type or Print Name of	xamined this Report and t Adams, Chri of Treasurer		v knowledge and belief in	t is true, correct and co	mplete.
Signature of Treasure	Adams, Christopher, , ,	,	[Electronically Filed]	Date M M /	12 / Y Y Y Y 2021
NOTE: Submission of	false, erroneous, or incomp	lete information m	ay subject the person sig	ning this Report to the pe	enalties of 52 U.S.C. §30109
Office Use Only				F	FEC FORM 3 (Revised 05/2016)

Ima	age# 2	202104129443218487		
Г _		FEC Form 3 (Revised 05/2016)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 53
		or Type Committee Name n Mills for Congress		
F	leport	t Covering the Period: From:	01 / D D / Y Y Y Y 01 / 2021	To: 03 / 0 0 / 2021
6.	Not	Contributions (other than loans)	COLUMN A This Period	COLUMN B Election Cycle-to-Date
0.	(a)	Total Contributions (other than loans) (from Line 11(e))	0.00	805.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	805.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	767.10	8801.49
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	767.10	8801.49
8.		sh on Hand at Close of porting Period (from Line 27)	16.07	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	64172.49	

For further information contact:

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

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

	FEC Form 3 (Revised 05/2016)	ETAILED SUMMARY PAGE of Receipts	PAGE 3 / 53
	rite or Type Committee Name		
Re	eport Covering the Period: From:	M / D D / Y Y Y Y 01 2021 To:	M M / D D / Y Y Y Y Y 03 31 / 2021
	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	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 (e) TOTAL CONTRIBUTIONS	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
	LOANS: (a) Made or Guaranteed by the		
	Candidate	0.00	9234.94
	(b) All Other Loans(c) TOTAL LOANS	0.00	0.00
14	(add Lines 13(a) and (b)) OFFSETS TO OPERATING		3234,34
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00 7 7 7
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	10039.94

of Disbursements PAGE 4 / 53 FEC Form 3 (Revised 05/2016) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 767.10 8801.49 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 0.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 767.10 8801.49 (add Lines 17, 18, 19(c), 20(d), and 21)

DETAILED SUMMARY PAGE

III. CASH SUMMARY

Image# 202104129443218489

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		9		7	783.17
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		9		9	0.00
25.	SUBTOTAL (add Line 23 and Line 24)	Γ.	7		,	783.17
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		7		7	767.10
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7	16.07

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS Any information copied from such Reports and Sta or for commercial purposes, other than using the r NAME OF COMMITTEE (In Full) John Mills for Congress			y of the y Page used by any			
Full Name (Last, First, Middle Initial) A. Law Office of James C. Thomas Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300 City	Date of Disbursement					
	MO sement For Primary Other (s	64153 : 2022 General pecify) ▼	001 Category/ Type	C C00565366 Amount of Each Disbursement this Period 234.50 Transaction ID : SB17.5023 Memo Item		
	State MO sement For	Zip Code 64153 : 2022	001 Category/ Type	Date of Disbursement M M / D J / Y Y Y Y FEC Identification Number C C00565366 Amount of Each Disbursement this Period 532.60 Transaction ID : SB17.5024		
President State: FL District: 01 Full Name (Last, First, Middle Initial) C. Mailing Address City Purpose of Disbursement Candidate Name	Other (s	Zip Code	Category/ Type	Memo Item Date of Disbursement M M / D D / Y Y Y FEC Identification Number C Amount of Each Disbursement this Period		
Office Sought: House Disburse Senate President State: District: SUBTOTAL of Disbursements This Page (optional TOTAL This Period (last page this line number or the senate of	-	General pecify) ▼				

.ge# 202104120440210401				-	PAGE 6 OF 53	
HEDULE C (FEC I ANS	Form 3)			Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full ohn Mills for Congres				Transaction ID : SC/1	0.4711	
LOAN SOURCE Full Name	•	Idle Initial)		Memo Item Election: 2		
Mailing Address 9059 Orlando Avenue					specify) 🔻	
City Navarre		State FL	ZIP Code 32566		al Funds of the Candidat	
Original Amount of Loan		Cumulative Pa	yment To D	ate Balance Outstandi	ing at Close of This Perio	
<u> </u>	126.34		7	0.00	126.34	
TERMS Date Incurre	d	Γ	Date Due	Interest Rate (If none, enter 0)	Secured:	
M09 ^M / D21 ^D / Y	Ž017 ^v	M M / D D	° ′ [°] 11/ἀ	8/2018 [×] 0.00 % (a	apr) Yes 🗶 N	
List All Endorsers or Guar		o Loan Source		have a f Frankrau		
1. Full Name (Last, First, I	Middle Initial)			lame of Employer		
Mailing Address				Decupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:		
2. Full Name (Last, First, N	1iddle Initial)			lame of Employer		
Mailing Address				Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:		
3. Full Name (Last, First, N	liddle Initial)			lame of Employer		
Mailing Address				Decupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:		
4. Full Name (Last, First, M	liddle Initial)			lame of Employer		
Mailing Address				Decupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:		
JBTOTALS This Period This					126.34	

/liddle Initial)	Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) 13a Transaction ID : SC/10.4742 Image: Science of Science
State	☐ Memo Item Election: 2018 ¥ Primary General Other (specify) ▼ ZIP Code ¥
State	ZIP Code
	ZIP Code
	Y Personal Funds of the Candidat
Cumulative Pa	/ment To Date Balance Outstanding at Close of This Perio
] [,	0.00 303.01
	ate Due Interest Rate Secured: (If none, enter 0)
M M / D I	⁷ ^Y 11/Ŏ8/2Ŏ18 ^Y 0.00 % (apr) Yes ✗ №
to Loan Source	
	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
I	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
nly)	s line. If no Schedule D, carry forward to appropriate line of Summary.
	M M to Loan Io ZIP Code ZIP ZIP ZIP ZIP ZIP ZIP ZIP Code I) Number of the second secon

				PAGE 8 OF 53		
CHEDULE C (FEC Form 3) DANS		fc	Use separate schedule(s) for each category of the Detailed Summary Page			
ME OF COMMITTEE (In Full)			Transad	ction ID : SC/10.4743		
LOAN SOURCE Full Name (Last, First, M John Mills for Congress	iddle Initial)		Memo Item	x Primary		
Mailing Address 9059 Orlando Avenue				General Other (specify) ▼		
City Navarre	State	ZIP Code 32566		 Personal Funds of the Candidate 		
Original Amount of Loan	Cumulative Pa		Bala	ance Outstanding at Close of This Perio		
4.24			0.00	4.24		
TERMS Date Incurred		ate Due	Interest Rate (If none, ente			
^M 10 ^M / ^D 05 ^D / ^Y Ž017 ^Y	M M / D	[/] ^Y 11/Ŏ8/2Ŏ		.00 % (apr) Yes 🗶 No		
List All Endorsers or Guarantors (if any)	to Loan Source					
1. Full Name (Last, First, Middle Initial)		Nam	e of Employer			
Mailing Address		Осси	ipation			
City State ZIP Code			Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Nam	e of Employer			
Mailing Address		Осси	Ipation			
City State	ZIP Code		anteed	· · · · · · · · · · · · · · · · · · ·		
3. Full Name (Last, First, Middle Initial)		Nam	Name of Employer			
Mailing Address		Осси	Ipation			
City State ZIP Code			unt anteed tanding:			
4. Full Name (Last, First, Middle Initial)		Nam	e of Employer			
Mailing Address		Осси	Ipation			
City State	ZIP Code		unt anteed tanding:	y y		
UBTOTALS This Period This Page (optional)			·····•	4.24		

CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag	he (check only one) X 13a
AME OF COMMITTEE (In Full) ohn Mills for Congress				tion ID : SC/10.4744
LOAN SOURCE Full Name (Last, First, Mid John Mills for Congress	ddle Initial)		Memo Item	Election: 2018 Primary General
Mailing Address 9059 Orlando Avenue				Other (specify)
City Navarre	State FL	ZIP Code 32566	e	X Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio
TERMS Date Incurred M 10 ^M / P 10 ^D / Y Ž017 Y	M M / D D	Date Due	Interest Rate (lf none, enter 08/2018 ^Y 0.	00 0 (()) 1 () ()
List All Endorsers or Guarantors (if any) t 1. Full Name (Last, First, Middle Initial)	to Loan Source		Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y, , , , , , , , , , , , , , , , , , ,
2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation Amount	
City State	ZIP Code		Guaranteed	9 9 9 9 9 9
3. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	City State ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 y 1
UBTOTALS This Period This Page (optional).	y)			35.00

CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page				
JAME OF COMMITTEE (In Full) John Mills for Congress			Transac	tion ID : SC/10.4745			
LOAN SOURCE Full Name (Last, First, Mid John Mills for Congress	ddle Initial)		Memo Item	Election: 2018 X Primary General			
Mailing Address 9059 Orlando Avenue				Other (specify) v			
City Navarre	State FL	ZIP Code 32566	9	X Personal Funds of the Candidate			
Original Amount of Loan 21.63	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perioc 21.63			
TERMS Date Incurred M 10 ^M / D 12 ^D / Y Ž017 Y	M M / D D	Date Due	Interest Rate (If none, enter 0.0	0)			
List All Endorsers or Guarantors (if any) t 1. Full Name (Last, First, Middle Initial)	o Loan Source		Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	лу			
2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation Amount				
City State	ZIP Code		Guaranteed Outstanding:	y			
3. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	y y			
4. Full Name (Last, First, Middle Initial)	ł		Name of Employer				
Mailing Address			Occupation				
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1			
SUBTOTALS This Period This Page (optional).	y)			21.63			

HEDULE C (FEC	CHEDULE C (FEC Form 3)			Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Fu					ge 13b ction ID : SC/10.4746	
ohn Mills for Congres						
LOAN SOURCE Full Nam John Mills for Congl	•	dle Initial)		🗌 Memo Item	Election: 2018 X Primary General	
Mailing Address 9059 Orlando Avenue					Other (specify) ▼	
City		State	ZIP Code	e		
Navarre		FL	32566		Personal Funds of the Candidate	
Original Amount of Loan	7.95	Cumulative Pay	yment To D	Date Bala	ance Outstanding at Close of This Peric 7.95	
TERMS Date Incurre	ed	D	ate Due	Interest Rate	e Secured:	
^M 10 ^M / ^D 17 ^D / ^Y	2017		′ ¥11/Č	00/2010	r 0) .00 % (apr) Yes X No	
List All Endorsers or Gua	· · · · ·	Loan Source				
1. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ate ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, M	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, M	/liddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
JBTOTALS This Period This					7.95	

HEDULE C (FEC Form 3) ANS		Use separate sche for each category Detailed Summary	of the (check only one) × 13a			
ME OF COMMITTEE (In Full)			Tran	nsaction ID : SC/10.4747		
LOAN SOURCE Full Name (Last, First John Mills for Congress	st, Middle Initi	al)	🗌 Memo It	em Election: 2018		
			General			
Mailing Address 9059 Orlando Avenue				Other (specify)		
City	State		P Code	Personal Funds of the Candidate		
Navarre	FL	3	2566			
Original Amount of Loan	Cumu	lative Payme	nt To Date	Balance Outstanding at Close of This Perio		
72.49		9	0.00	72.49		
TERMS Date Incurred		Date	Due Interest I (If none, e			
M10 ^M / D30 ^D / Y Ž017 Y	MM	/ D D /	^v 11/Ŏ8/2Ŏ18 ^v	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if	any) to Loan	Source				
1. Full Name (Last, First, Middle Initia	al)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
City St	State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initia	l)		Name of Employer			
Mailing Address			Occupation			
0.1			Amount Guaranteed			
City St	ate ZIP (Jode				
3. Full Name (Last, First, Middle Initia)		Name of Employer			
Mailing Address			Occupation			
City	ate ZIP (Code	Amount Guaranteed			
4. Full Name (Last, First, Middle Initia			Outstanding:			
	l)					
Mailing Address			Occupation			
City	ate ZIP (Code	Amount Guaranteed Outstanding:	y		
JBTOTALS This Period This Page (opti	onal)		······	, 72.49		

					PAGE 13 OF 53	
CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page			
ME OF COMMITTEE (In Full)				Transac	ction ID : SC/10.4748	
LOAN SOURCE Full Name (La John Mills for Congress		ddle Initial)		🗌 Memo Item	Election: 2018 X Primary General	
Mailing Address 9059 Orlando Avenue					Other (specify)	
City Navarre		State FL	ZIP Code 32566	9	Personal Funds of the Candidate	
Original Amount of Loan	196.54	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Peric 196.54	
TERMS Date Incurred M10 ^M / D31 ^D / Y Z0	1Ž Y	M M / D D	Date Due	50/2010		
List All Endorsers or Guarante 1. Full Name (Last, First, Mido		o Loan Source		Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middl	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Middl	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	g	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
UBTOTALS This Period This Pag					7 7 7	

HEDULE C (FEC Form 3) ANS		Use separate scl for each categor Detailed Summar	y of the (check only one) X 13a		
ME OF COMMITTEE (In Full)		Tr	ansaction ID : SC/10.4749		
LOAN SOURCE Full Name (Last, First, Mi John Mills for Congress	ddle Initial)	🗌 Memo	x Primary		
Mailing Address 9059 Orlando Avenue			General Other (specify) ▼		
City	State	ZIP Code	Personal Funds of the Candidate		
Navarre	FL	32566			
Original Amount of Loan	Cumulative Pa	ent To Date	Balance Outstanding at Close of This Period		
41.21		0.00	41.21		
TERMS Date Incurred		e Due Interes	t Rate Secured:		
M11 ^M / D01 ^D / Y Ž017 Y	M M / D I	[/] ^Y 11/Ŏ8/2Ŏ18 ^Y	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address		Occupation	Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	y 1 y 1 y 1 y 1 y		
2. Full Name (Last, First, Middle Initial)	I	Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	y		
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	Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:			
UBTOTALS This Period This Page (optional)		••••••	41.21		

CHEDULE C (FEC Form 3) DANS		Use separate schedu for each category of Detailed Summary Pa	the (check only one) × 13a	
ME OF COMMITTEE (In Full)		Transa	action ID : SC/10.4750	
LOAN SOURCE Full Name (Last, First John Mills for Congress	, Middle Initial)	Memo Iten	x Primary	
Mailing Address 9059 Orlando Avenue			General Other (specify) ▼	
City	State	ZIP Code	Personal Funds of the Candidate	
Navarre		32566		
Original Amount of Loan 804.08	Cumulative Pa	nent To Date Ba	alance Outstanding at Close of This Perio 804.08	
TERMS Date Incurred	9	te Due Interest Ra	ate Secured:	
M11M / D05D / Y Ž017 Y	M M / D	(If none, ent		
List All Endorsers or Guarantors (if a	ny) to Loan Source			
1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address		Occupation		
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	Guaranteed	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	y	
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation	Occupation	
City Sta	te ZIP Code	Amount Guaranteed Outstanding:		
UBTOTALS This Period This Page (optic	nal)	······	804.08	

•		-		PAGE 16 OF 53
CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page	
ME OF COMMITTEE (In Full)			Transact	tion ID : SC/10.4751
LOAN SOURCE Full Name (Last, First, Mid John Mills for Congress	ddle Initial)		Memo Item	Election: 2018
Mailing Address 9059 Orlando Avenue				General Other (specify) ▼
City Navarre	State FL	ZIP Code 32566		× Personal Funds of the Candidat
Original Amount of Loan	Cumulative Pa	yment To Dat	te Bala	nce Outstanding at Close of This Peric
19.08	9	<u> </u>	0.00	19.08
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter	
M11M / D08D / Y Ž017 Y	M M / D D	′ [×] 11/Ŏ8	/2Ď18 [×] 0.0	
List All Endorsers or Guarantors (if any) t	to Loan Source		ame of Employer	
1. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			ccupation	
City State	State ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Na	ame of Employer	
Mailing Address		0	ccupation	
City State	State ZIP Code		mount uaranteed utstanding:	y
3. Full Name (Last, First, Middle Initial)		Na	ame of Employer	
Mailing Address		0	ccupation	
City State	State ZIP Code		mount uaranteed utstanding:	y
4. Full Name (Last, First, Middle Initial)	I	Na	ame of Employer	
Mailing Address			Occupation	
City State	ZIP Code		mount uaranteed utstanding:	9 1 9 1 9 1
UBTOTALS This Period This Page (optional).			L	19.08 7 7

lage# 20210412	3443210302					PAGE 17 OF 53	
CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page			
	MITTEE (In Full) or Congress				Transad	ction ID : SC/10.4752	
LOAN SOUP	RCE Full Name (Last, First	st, Mido	dle Initial)		Memo Item	Election: 2018	
John Mills	s for Congress					X Primary General	
Mailing Addr 9059 Orlando	ess Avenue					Other (specify)	
City			State	ZIP Coc	le		
Navarre			FL	32566		Personal Funds of the Candidate	
Original An	ount of Loan	I	Cumulative Pay	yment To	Date Bala	ance Outstanding at Close of This Perio	
	93.73				0.00	93.73	
TERMS	Date Incurred		D	ate Due	Interest Rate (If none, enter		
M11M /	D08D / Y Ž017 Y	М	M / D D	/ ¥11/	-	00 % (apr) Yes 🗶 No	
List All End	orsers or Guarantors (if a	any) to	Loan Source				
1. Full Nam	e (Last, First, Middle Initia	al)			Name of Employer		
Mailing Address					Occupation		
City	State ZIP Code				Amount Guaranteed Outstanding:		
2. Full Name	e (Last, First, Middle Initial	I)			Name of Employer		
Mailing A	ddress				Occupation		
				-	Amount		
City	St	State ZIP Code			Guaranteed	g	
3. Full Name	e (Last, First, Middle Initial	I)	·		Name of Employer		
Mailing A	ddress				Occupation		
					Amount		
City	St	ate	ZIP Code		Guaranteed Outstanding:	9 9	
4. Full Name (Last, First, Middle Initial)				Name of Employer			
Mailing Address				Occupation			
City	St	ate	ZIP Code		Amount Guaranteed Outstanding:		
	his Period This Page (opti eriod (last page in this lin					93.73	
Carry outstand	ing balance only to LINE	3, Sche	dule D, for this	s line. If n	o Schedule D, carry for	ward to appropriate line of Summary	

age# 20210+1234+3210303						
CHEDULE C (FEC Form 3) DANS				Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Fu				Transaction ID : SC/10.4753		
LOAN SOURCE Full Nam John Mills for Cong	•	Idle Initial)		Memo Item Election: 2018		
Mailing Address 9059 Orlando Avenue				Other (specify) ▼		
City Navarre		State FL	ZIP Code 32566	e Personal Funds of the Candida		
Original Amount of Loan	6.00	Cumulative Pa	lyment To D	Date Balance Outstanding at Close of This Peri 0.00 6.00		
TERMS Date Incurre	ed		Date Due	Interest Rate Secured:		
M12M / D21D / Y	Ž017 ^v	M M / D D	° ′ ¥11/Č	(If none, enter 0) Ď8/2Ď18 ^Y 0.00 % (apr) Yes ★ N		
List All Endorsers or Gua	irantors (if any) to	o Loan Source				
1. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City State ZIP Code				Amount Guaranteed Outstanding:		
2. Full Name (Last, First, M	Aiddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, N	Aiddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, M	Aiddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
UBTOTALS This Period This				7 7 7		

3)			Use separate schedule	PAGE 19 OF 53
CHEDULE C (FEC Form 3) DANS				the (check only one) × 13a
			Transad	ction ID : SC/10.4754
irst, Mido	dle Initial)		☐ Memo Item	x Primary
				General Other (specify) ▼
	State FL		9	 Personal Funds of the Candidate
	Cumulative Pa		Date Bala	ance Outstanding at Close of This Perio
00			0.00	308.00
	I	Date Due		
Y		⁷ 11/0	Ď8/2Ď18 [⊻] 0.	.00 % (apr) Yes X No
f any) to	Loan Source	1		
tial)			Name of Employer	
			Occupation	
State ZIP Code			Guaranteed	y
al)			Name of Employer	
			Occupation	
State	ZIP Code		Guaranteed	· · · · · · · · · · · · · · · · · · ·
ial)			Name of Employer	
			Occupation	
State	e ZIP Code		Guaranteed	-y - 1 - y - 1 - w - 1
4. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation	
State	ZIP Code		Guaranteed	
				308.00
	D0 Y Image: state st	Cumulative Pa Cumulative Pa 20 V M M / P f any) to Loan Source tial) State ZIP Code ial) State ZIP Code ial) State ZIP Code otional)	State ZIP Code FL 32566 Cumulative Payment To D Date Due Y M <m< td=""> Y M<m< td=""> Y M<m< td=""> f any) to Loan Source tial) State ZIP Code ial) State ZIP Code</m<></m<></m<>	irst, Middle Initial)

CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page		
AME OF COMMITTEE (In Full) ohn Mills for Congress			Transac	tion ID : SC/10.4755	
LOAN SOURCE Full Name (Last, First, Mic John Mills for Congress	Idle Initial)		🗌 Memo Item	Election: 2018 x Primary General	
Mailing Address 9059 Orlando Avenue				Other (specify) v	
City Navarre	State FL	ZIP Code 32566	e	X Personal Funds of the Candidate	
Original Amount of Loan 56.34	Cumulative Pay	yment To D	Date Bala 0.00	nce Outstanding at Close of This Perior 56.34	
TERMS Date Incurred M12 ^M / P24 ^D / Y Ž017 Y	M M / D D	Date Due	Interest Rate (If none, enter 08/2018 [×] 0.0		
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	o Loan Source		Name of Employer		
Mailing Address			Occupation		
City State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation Amount		
City State	ZIP Code		Guaranteed	· · · · · · · · · · · · · · · · · · ·	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x x 1	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City	ZIP Code		Amount Guaranteed Outstanding:	y y	
UBTOTALS This Period This Page (optional)	ı)			56.34	

	Use separate sche for each category Detailed Summary	of the (check only one) X 13a		
	Trai	nsaction ID : SC/10.4756		
liddle Initial)	🗌 Memo I	tem Election: 2018 Primary General		
		Other (specify) ▼		
State FL	ZIP Code 32566	Personal Funds of the Candidate		
Cumulative Pa	nent To Date	Balance Outstanding at Close of This Perio		
] ,	0.00	208.00		
	te Due Interest (If none,			
M M / D I	[/] ^Y 11/Ŏ8/2Ŏ18 ^Y	0.00 % (apr) Yes X No		
to Loan Source				
	Name of Employer	Name of Employer		
	Occupation			
ZIP Code	Amount Guaranteed Outstanding:	Guaranteed		
	Name of Employer			
	Occupation	Occupation		
ZIP Code	Amount Guaranteed Outstanding:	y 1 9 9 1 1 9 1		
	Name of Employer			
	Occupation			
ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · ·		
I	Name of Employer			
	Occupation	Occupation		
ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · ·		
)	······	208.00		
	FL Cumulative Payr Da M<	for each category Detailed Summary Tra Aiddle Initial) Image: Memory of the sympet is a sympet i		

.ge# 202104120440210001					PAGE 22 OF 53	
CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full)				Transac	ction ID : SC/10.4678	
LOAN SOURCE Full Name of John Mills for Congress	•	Idle Initial)		Memo Item	x Primary	
Mailing Address 9059 Orlando Avenue					General Other (specify) ▼	
City Navarre		State FL	ZIP Code 32566	•	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	yment To D	ate Bala	ance Outstanding at Close of This Peric	
	400.00			0.00	400.00	
TERMS Date Incurred		C	Date Due	Interest Rate (If none, enter		
M01M / D17D / Y	ž018 ^v	M M / D D	′ [×] 11/č	8/2Ŏ18 ^Ÿ 0.	.00 % (apr) Yes X No	
List All Endorsers or Guaran		o Loan Source	1 -			
1. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Dccupation		
City	State ZIP Code			Amount Guaranteed Dutstanding:	y	
2. Full Name (Last, First, Mid	Idle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:		
3. Full Name (Last, First, Mid	Idle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	y y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:		
JBTOTALS This Period This P					400.00	

HEDULE C (FEC Form 3))				PAGE 23 OF 53	
ANS				Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full) bhn Mills for Congress				Transac	ction ID : SC/10.4709	
LOAN SOURCE Full Name (Last, Fir John Mills for Congress	rst, Midd	le Initial)		Memo Item	Election: 2018 X Primary General	
Mailing Address 9059 Orlando Avenue					Other (specify) ▼	
City Navarre	S	State FL	ZIP Code 32566	9	Personal Funds of the Candidat	
Original Amount of Loan		Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Peric	
, , , , , , , , , , , , , , , , , , , ,)	7		0.00	2231.10	
TERMS Date Incurred		[Date Due	Interest Rate (If none, enter		
M03 ^M / D31 ^D / Y Ž018 Y M M / D D / Y1				Ó8/2Ŏ18 ^Ÿ 0.	00 % (apr) Yes X No	
List All Endorsers or Guarantors (if	any) to	Loan Source				
1. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City S	State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initia	al)	1		Name of Employer		
Mailing Address				Occupation		
City	tate	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Middle Initia	al)	1		Name of Employer		
Mailing Address				Occupation		
City S	tate	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City S	tate	ZIP Code		Amount Guaranteed Outstanding:	y y	
JBTOTALS This Period This Page (opt					2231.10	

HEDULE C (FEC Form 3)					
ANS		for each category of	Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full)		Transa	action ID : SC/10.4829		
LOAN SOURCE Full Name (Last, First, John Mills for Congress	Middle Initial)	Memo Iter	n Election: 2018		
Mailing Address 9059 Orlando Avenue			Other (specify) ▼		
City Navarre	State FL	ZIP Code 32566	Personal Funds of the Candidate		
Original Amount of Loan	Cumulative P	nent To Date Ba	alance Outstanding at Close of This Perio		
150.67		0.00	150.67		
TERMS Date Incurred		te Due Interest Ra (If none, ent			
M04 ^M / D20 ^D / Y Ž018 Y	M M / D	[/] [¥] 08/28/2018 [¥]	0.00 % (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	Name of Employer		
Mailing Address		Occupation			
City Stat	e ZIP Code	Amount Guaranteed Outstanding:	Guaranteed		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City Stat	e ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation	Occupation		
City Stat	e ZIP Code	Amount Guaranteed Outstanding:	y		
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation	Occupation		
City Stat	e ZIP Code	Amount Guaranteed Outstanding:			
JBTOTALS This Period This Page (optior	nal)	······	150.67		

HEDULE C (FEC Form 3) ANS						PAGE 25 OF 53
ANS		Use separate schedule(s) for each category of the Detailed Summary Page				
ME OF COMMITTEE (In Full)				Ті	ansactio	on ID : SC/10.4815
LOAN SOURCE Full Name (Last, Firs John Mills for Congress	t, Middle Initi	al)			tem	Election: 2018 x Primary General
Mailing Address 9059 Orlando Avenue					Other (specify)	
City Navarre	State FL		ZIP Code 32566	;		Personal Funds of the Candidate
Original Amount of Loan	Cumu	lative Pay	ment To D	ate	Baland	ce Outstanding at Close of This Peric
8500.00		7	7	700.00		7800.00
TERMS Date Incurred		Da	ate Due		st Rate e, enter 0) Secured:
M04M / D24D / Y Ž01Ř Y M M / D D / Y1				08/2Ŏ18 ^Ÿ	0.00	
List All Endorsers or Guarantors (if a	any) to Loan	Source				
1. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City Sta	State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial))		1	Name of Employer		
Mailing Address			(Occupation		
City Sta	ate ZIP (ZIP Code		Amount Guaranteed Dutstanding:		y
3. Full Name (Last, First, Middle Initial))		1	Name of Employer		
Mailing Address			(Occupation		
City Sta	ate ZIP (ZIP Code		Amount Guaranteed Outstanding:		y
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City Sta	ate ZIP (Code	(Amount Guaranteed Dutstanding:		y 1 1 y 1 1 x 1
JBTOTALS This Period This Page (optic	onal)			•		7800.00

				r	PAGE 26 OF 53	
HEDULE C (FEC	Form 3)			Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Ful	,			Transa	ction ID : SC/10.4830	
LOAN SOURCE Full Nam	e (Last, First, Mid	dle Initial)		Memo Item	Election: 2018	
John Mills for Congr	ess				Primary General	
Mailing Address 9059 Orlando Avenue					Other (specify)	
Sity State ZIP Co				e		
Navarre		FL	32566		Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pag	yment To D	Date Bal	ance Outstanding at Close of This Perio	
<u> </u>	1475.00		7	0.00	1475.00	
TERMS Date Incurre	ed	C	Date Due	Interest Rat		
M06 ^M / D15 ^D / Y Ž018 Y M M / D D / Y04				(If none, ente Ž8/2Ŏ18 ^Y 0	.00	
List All Endorsers or Gua	rantors (if any) to	b Loan Source				
1. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	- y	
2. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		
3. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	- y - 1 - y - 1 - w - 1	
JBTOTALS This Period This					1475.00	
					7 7 7	

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CHEDULE C (FEC Form 3) DANS				Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full)				Transa	ction ID : SC/10.4831	
LOAN SOURCE Full Name	•	Idle Initial)		🗌 Memo Item	Election: 2018 X Primary General	
Mailing Address 9059 Orlando Avenue					Other (specify)	
City Navarre		State FL	ZIP Code 32566	;	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	yment To D	ate Bala	ance Outstanding at Close of This Perio	
<u> </u>	600.00			0.00	600.00	
TERMS Date Incurred		C	Date Due	Interest Rat (If none, ente		
M06M / D15D / Y	ž018 ^Y	M M / D D	[/] ^Y 08/2	8/2Ŏ18 ^Ÿ 0	.00 % (apr) Yes 🗴 No	
List All Endorsers or Guara		o Loan Source				
1. Full Name (Last, First, Mi	ddle Initial)		ľ	Name of Employer		
Mailing Address			(Occupation		
City	City State ZIP Code			Amount Guaranteed Dutstanding:	-y	
2. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y	
3. Full Name (Last, First, Mic	Idle Initial)		1	Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7 1 7 1 1 A 1	
JBTOTALS This Period This P DTALS This Period (last page					600.00	

			PAGE 28 OF 53		
HEDULE C (FEC Form 3) ANS		for each categor	Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full)		Tra	ansaction ID : SC/10.4832		
LOAN SOURCE Full Name (Last, First, N John Mills for Congress	1iddle Initial)	Memo	Item Election: 2018		
Mailing Address 9059 Orlando Avenue			Other (specify) ▼		
City Navarre	State FL	ZIP Code 32566	Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	nent To Date	Balance Outstanding at Close of This Perio		
35.10		0.00	35.10		
TERMS Date Incurred	[te Due Interes (If none	t Rate Secured: a, enter 0)		
M06 ^M / D27 ^D / Y Ž018 Y	M M / D C	[/] ^Y 08/Ž8/2Ŏ18 ^Y	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	ZIP Code	Amount Guaranteed Outstanding:	y		
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation	Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed		
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation	Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:			
UBTOTALS This Period This Page (optional)	· · · · · · · · · · · · · · · · · · ·	35.10		

Use separate schedule(s for each category of the Detailed Summary Page Transaction Memo Item	e (check only one) X 13a	
☐ Memo Item	Election: 2018 Primary General	
	X Primary General	
de		
de		
	Personal Funds of the Candidate	
Date Balan	nce Outstanding at Close of This Perio	
0.00	2000.00	
Interest Rate (If none, enter (Secured:	
3/Ž8/2Ŏ18 [×] 0.0	0 % (apr) Yes X No	
Name of Employer		
Occupation		
Amount Guaranteed Outstanding:		
Name of Employer		
Occupation		
Amount Guaranteed Outstanding:	g 1 1 g 1 1 m 1	
Name of Employer		
Occupation		
Amount Guaranteed Outstanding:		
Name of Employer		
Occupation		
Amount Guaranteed Outstanding:	9 9 9 9 9 9	
-	Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Occupation Amount Guaranteed	

	dle Initial) State		Use separate schedule for each category of t Detailed Summary Pag Transac	he (check only one) × 13a		
	· · · · · · · · · · · · · · · · · · ·			Election: 2018		
	· · · · · · · · · · · · · · · · · · ·		🗌 Memo Item			
	State			General		
	State			Other (specify)		
	FL	ZIP Code 32566	e	Personal Funds of the Candidate		
	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio		
00			0.00	2000.00		
	C	Date Due	Interest Rate (If none, enter			
M07 ^M / D05 ^D / Y Ž018 Y M M / D D / Y0				00 % (apr) Yes X No		
if any) to	Loan Source					
1. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
State ZIP Code			Amount Guaranteed Outstanding:			
tial)	•		Name of Employer			
			Occupation			
State	ZIP Code		Guaranteed	· · · · · · · · · · · · · · · · · · ·		
tial)			Name of Employer			
			Occupation			
State	ZIP Code		Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)						
Mailing Address			Occupation			
State	ZIP Code	(Guaranteed	y y		
				2000.00		
	itial) State tial) State tial) State tial) State tial) Internal	00 M M M / D M if any) to Loan Source ifial) State ZIP Code tial) State ZIP Code tial) State ZIP Code tial) State ZIP Code tial)	00 Date Due Y M / D / Y08/2 if any) to Loan Source if any) to Loan Source / Y08/2 itial) Image: State ZIP Code / / State ZIP Code / / / Itial) / / / / / State ZIP Code / / / / Itial) / / / / / / State ZIP Code / / / / / / Itial) / <	00 Date Due Interest Rate (If none, enternation of the second of the se		

Middle Initial)	Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) 13a Transaction ID : SC/10.4874 Memo Item Election: 2020 ✓ Primary General Other (specify) ▼
	Memo Item Election: 2020 Primary General
	Meno item Primary General
State	
State	
FL	ZIP Code 32566 Personal Funds of the Candida
Cumulative Pa	rment To Date Balance Outstanding at Close of This Peri
	0.00 500.00
	ate Due Interest Rate Secured: (If none, enter 0)
M M / D	⁷ ^Y 03/Ĭ7/2Ŏ2O ^Y 0.00 % (apr) Yes ✗ №
y) to Loan Source	
	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
I	Name of Employer
	Occupation
ZIP Code	Amount Guaranteed Outstanding:
	500.00
	y) to Loan Source ZIP Code ZIP Code ZIP Code ZIP Code

				PAGE 32 OF 53	
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	e(S) FOR LINE NUMBER:	
IAME OF COMMITTEE (In Full) John Mills for Congress			Transac	tion ID : SC/10.4106	
LOAN SOURCE Full Name (Last, First, Mid MILLS, Ralph, John, , III	ddle Initial)		Memo Item	Election: 2014 Primary General	
Mailing Address 1940 Boardwalk Drive				Other (specify)	
City Miramar Beach	State FL	ZIP Code 32550	9	X Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pa	yment To D	Pate Bala	nce Outstanding at Close of This Period	
5000.00		7	0.00	5000.00	
TERMS Date Incurred M06M / P24P / Y Z014 Y	M M / D D	Date Due	Interest Rate (If none, enter		
List All Endorsers or Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	g	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	City State ZIP Code			y y	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1	
SUBTOTALS This Period This Page (optional).			H	5000.00	

					PAGE 33 OF 53		
CHEDULE C (FEC Fo DANS	rm 3)			Use separate schedule(s) for each category of the Detailed Summary Page			
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transac	ction ID : SC/10.4116		
LOAN SOURCE Full Name (I MILLS, Ralph, John, ,		Idle Initial)		🗌 Memo Item	Election: Primary General		
Mailing Address 1940 Boardwalk Drive					Other (specify)		
City Miramar Beach					Personal Funds of the Candidate		
Original Amount of Loan	Original Amount of Loan 4234.94				nce Outstanding at Close of This Perio 4234.94		
TERMS Date Incurred	014 ^Y		Date Due	Interest Rate (If none, enter			
					% (apr) Yes ✗ №		
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)				Name of Employer			
Mailing Address				Occupation			
City	City State ZIP Code				y y		
2. Full Name (Last, First, Middle Initial)				Name of Employer			
Mailing Address			_	Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y		
3. Full Name (Last, First, Mide	dle Initial)			Name of Employer			
Mailing Address				Occupation			
City	City State ZIP Code				y 1 1 y 1 1 x 1		
4. Full Name (Last, First, Middle Initial)				Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y		
UBTOTALS This Period This Pa OTALS This Period (last page i					4234.94		

					PAGE 34 OF 53	
SCHEDULE C (FEC F .OANS	orm 3)			Use separate schedule(s) for each category of the Detailed Summary Page		
NAME OF COMMITTEE (In Full) John Mills for Congress				Transac	tion ID : SC/10.4197	
LOAN SOURCE Full Name MILLS, Ralph, John,	•	Idle Initial)		🗌 Memo Item	Election: Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify) V	
City Miramar Beach					X Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pay	yment To D	Date Bala	nce Outstanding at Close of This Perioc	
7 7	1000.00		7	0.00 Interest Rate	1000.00	
M09 ^M / D08 ^D / Y	TERMS Date Incurred Date Due M09M / P08D / Y M M / D / Y				0) Secured:	
List All Endorsers or Guar	antors (if any) to	a Loan Source				
List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address			_	Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
SUBTOTALS This Period This				H	1000.00	
Carry outstanding balance on	y to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.	

.ge# 202104120440210020						
CHEDULE C (FEC Form 3) DANS				Use separate schedule(s for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transactio	on ID : SC/10.4299	
LOAN SOURCE Full Name MILLS, Ralph, John,	•	ddle Initial)		Memo Item	Election: 2016 x Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify) ▼	
City Miramar Beach		State FL	ZIP Code 32550	,	Personal Funds of the Candidat	
Original Amount of Loan		Cumulative Payment To Date		ate Balanc	e Outstanding at Close of This Perio	
y	3850.64	,		0.00	3850.64	
TERMS Date Incurred		C	Date Due	Interest Rate (If none, enter 0)	Secured:	
M01M / D02D / Y	Ž016 ^Y	M M / D D) / Y Y	YY	% (apr) Yes ✗ №	
List All Endorsers or Guara		o Loan Source				
1. Full Name (Last, First, M	iddle Initial)		'	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:		
2. Full Name (Last, First, Mic	ddle Initial)		1	Name of Employer		
Mailing Address				Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:		
3. Full Name (Last, First, Mid	ddle Initial)	I	1	Name of Employer		
Mailing Address				Dccupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:		
4. Full Name (Last, First, Middle Initial)			1	Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	, , , , , , , , , , , , , , , , , , ,	
JBTOTALS This Period This F					3850.64	

HEDULE C (FEC Form	3)			Use separate schedul for each category of t Detailed Summary Pag	the (check only one) × 13a	
ME OF COMMITTEE (In Full)				Transad	ction ID : SC/10.4337	
LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III	First, Mic	Idle Initial)		🗌 Memo Item	Election: 2016 X Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City Miramar Beach		State FL	ZIP Code 32550	e	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Payment To Date		Date Bala	ance Outstanding at Close of This Perio	
34	5.33			0.00	345.33	
TERMS Date Incurred		C	Date Due	Interest Rate (If none, ente		
M06 ^M / D30 ^D / Y Ž016	Y	M M / D D	/ Y	Y Y Y O	.00 % (apr) Yes X No	
List All Endorsers or Guarantors		o Loan Source		Name of Employer		
1. Full Name (Last, First, Middle Initial)						
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
2. Full Name (Last, First, Middle II	nitial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · ·	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
JBTOTALS This Period This Page					345.33	

.g				r	
CHEDULE C (FEC Form 3) OANS			Use separate schedul for each category of Detailed Summary Pa	the (check only one) × 13a	
ME OF COMMITTEE (In Full)				Transa	ction ID : SC/10.4342
LOAN SOURCE Full Name MILLS, Ralph, John,	•	Idle Initial)		Memo Item	Election: 2018 X Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify)
City Miramar Beach		State FL	ZIP Cod 32550	e	Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pay	yment To D	Date Bal	ance Outstanding at Close of This Perio
· · · · · · ·	1500.00			0.00	1500.00
TERMS Date Incurred	Ł	C	Date Due	Interest Rat (If none, ente	
M07 ^M / D18 ^D / Y	Ž016 ^Y	M M / D D	/ Y De	ěmaňd ^v 0	0.00 ₩ (apr) Yes ¥ No
List All Endorsers or Guar	() ,	o Loan Source	T		
1. Full Name (Last, First, N	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, M	iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
3. Full Name (Last, First, M	iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	g
UBTOTALS This Period This					7 7 1500.00 7 7 7 7

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CHEDULE C (FEC Form 3) OANS			Use separate schedu for each category of Detailed Summary P	the (check only one) × 13a		
ME OF COMMITTEE (In Full)				Trans	action ID : SC/10.4343	
LOAN SOURCE Full Name (La MILLS, Ralph, John, , II		ddle Initial)		Memo Iter	n Election: 2018	
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City Miramar Beach		State FL	ZIP Cod 32550	е	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	yment To [Date Ba	lance Outstanding at Close of This Perio	
<u> </u>	300.00			0.00	300.00	
TERMS Date Incurred M09 ^M / D06 ^D / Y 20	1Ğ ^Y	M M / D D	Date Due	cinana		
List All Endorsers or Guarante	ors (if any) t	o Loan Source				
1. Full Name (Last, First, Midd				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y y y y	
3. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
UBTOTALS This Period This Pag		y)			300.00	

.ge# 20210-120-1002-1002-1						
CHEDULE C (FEC Form 3) OANS			Use separate schedul for each category of Detailed Summary Pa	the (check only one) × 13a		
ME OF COMMITTEE (In Full)				Transa	ction ID : SC/10.4344	
LOAN SOURCE Full Name MILLS, Ralph, John,	•	Idle Initial)		Memo Item	Election: 2018 Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City Miramar Beach		State FL	ZIP Cod 32550	e	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pag	yment To E	Date Bal	ance Outstanding at Close of This Perio	
	500.00			0.00	500.00	
TERMS Date Incurred	1	C	Date Due	Interest Rat (If none, ente	er O)	
^M 09 ^M / ^D 23 ^D / ^Y	Ž016 ^Y	M M / D D	/ Y De	ěmaňd ^v 0	0.00 % (apr) Yes ✗ №	
List All Endorsers or Guar	antors (if any) to	o Loan Source				
1. Full Name (Last, First, N	1iddle Initial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		
2. Full Name (Last, First, Mi	iddle Initial)	·		Name of Employer		
Mailing Address				Occupation		
City	State	7IP Code		Amount Guaranteed Outstanding:	y	
3. Full Name (Last, First, Mi	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Mi	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	g	
JBTOTALS This Period This DTALS This Period (last page	,				500.00	

age# 20210-120-10020				r		
CHEDULE C (FEC Form 3) OANS			Use separate schedul for each category of Detailed Summary Pa	the (check only one) × 13a		
ME OF COMMITTEE (In Full)				Transa	ction ID : SC/10.4351	
LOAN SOURCE Full Name MILLS, Ralph, John,	•	Idle Initial)		Memo Item	Election: 2018 Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City Miramar Beach		State FL	ZIP Code 32550	e	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pay	yment To D	Date Bal	ance Outstanding at Close of This Perio	
	500.00			0.00	500.00	
TERMS Date Incurred	I	C	Date Due	Interest Rat (If none, ente		
M05M / D02D / Y	ž017 ^v	M M / D D	/ Y De	ěmaňd ^v 0	.00 (apr) Yes X No	
List All Endorsers or Guara	antors (if any) te	o Loan Source				
1. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code G		Amount Guaranteed Outstanding:	y	
3. Full Name (Last, First, Mi	ddle Initial)	·		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
UBTOTALS This Period This OTALS This Period (last page	in this line only)		······	500.00	

CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	he (check only one) × 13a	
ME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4357	
LOAN SOURCE Full Name (Last, First, Mi MILLS, Ralph, John, , III	iddle Initial)		Memo Item	Election: 2018 X Primary General	
Mailing Address 1940 Boardwalk Drive				Other (specify)	
City Miramar Beach	State FL	ZIP Code 32550	9	X Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pa	/ment To D	Date Bala	nce Outstanding at Close of This Perio	
150.00		,	0.00	150.00	
TERMS Date Incurred	[ate Due	Interest Rate (If none, enter		
M07 ^M / ^D 26 ^D / ^Y Ž017 ^Y	M M / D C	/ Y Y		00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code	(Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
City State	State ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
City State	ZIP Code	Amount Guaranteed Outstanding:		y	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y y	
I		I	······		

					PAGE 42 OF 53
CHEDULE C (FEC Form 3) OANS			Use separate schedul for each category of t Detailed Summary Pa	e(s) he (check only one)	
ME OF COMMITTEE (In Full ohn Mills for Congres	,			Transad	ction ID : SC/10.4358
LOAN SOURCE Full Name MILLS, Ralph, John,	•	Idle Initial)		🗌 Memo Item	Election: 2018 X Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify)
City Miramar Beach		State FL	ZIP Code 32550	9	Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Perio
	750.00			0.00	750.00
TERMS Date Incurred	d	I	Date Due	Interest Rat (If none, ente	
M09 ^M / D13 ^D / Y	2017		D / Y .	Y Y Y O	.00 % (apr) Yes X No
List All Endorsers or Guar 1. Full Name (Last, First, M		o Loan Source		Name of Employer	
• • •	viddie milial)				
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, M	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, M	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, First, M	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
JBTOTALS This Period This DTALS This Period (last pag					750.00

age# 202104120440210020				
CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page	
ME OF COMMITTEE (In Full)				Transaction ID : SC/10.4811
LOAN SOURCE Full Name (Las MILLS, Ralph, John, , III		ddle Initial)		Memo Item Election: 2018 Memo Item Filection: 2018 General General
Mailing Address 1940 Boardwalk Drive				Other (specify)
City Miramar Beach		State FL	ZIP Code 32550	e Personal Funds of the Candid
Original Amount of Loan		Cumulative Pa	yment To D	Date Balance Outstanding at Close of This Per
<u> </u>	16.95	· · · · ·		0.00 16.95
TERMS Date Incurred		C	Date Due	Interest Rate Secured: (If none, enter 0)
M04M / D07D / Y 201	ŘΥ	M M / D D	° ′ [°] 11/ἀ	08/2018 [×] 0.00 % (apr) Yes ✗
List All Endorsers or Guaranton		o Loan Source		Name of Fundame
1. Full Name (Last, First, Middle	e Initial)			Name of Employer
Mailing Address				Occupation
City	State ZIP Code			Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle	Initial)			Name of Employer
Mailing Address				Occupation
City	State	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:
UBTOTALS This Period This Page OTALS This Period (last page in t				7 7 7

					PAGE 44 OF 53
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	e(S) FOR LINE NUMBER:	
NAME OF COMMITTEE (In Full John Mills for Congres	,			Transac	tion ID : SC/10.4899
LOAN SOURCE Full Name MILLS, Ralph, John,	•	Idle Initial)		🗌 Memo Item	Election: Primary General
Mailing Address 1940 Boardwalk Drive					Other (specify)
City Miramar Beach		State FL	ZIP Code 32550	9	Personal Funds of the Candidate
Original Amount of Loan	300.00	Cumulative Pay	yment To D	Date Bala	nce Outstanding at Close of This Period 300.00
TERMS Date Incurred			ate Due	Interest Rate	e Secured:
M07M / D12D / Y	Ž019 ^Y	M M / D D	/ Y	(If none, enter	
List All Endorsers or Guar	rantors (if any) to	o Loan Source			
1. Full Name (Last, First, N			1	Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, M	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
3. Full Name (Last, First, M	liddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y y y y
4. Full Name (Last, First, M	liddle Initial)	1		Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
SUBTOTALS This Period This				H	300.00 7 7
Carry outstanding balance on	ly to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.

CHEDULE C (FEC Form 3) OANS		Use separate schedule(s) for each category of the Detailed Summary Page			
NAME OF COMMITTEE (In Full) John Mills for Congress			Transac	tion ID : SC/10.4900	
LOAN SOURCE Full Name (Last, First, Mic MILLS, Ralph, John, , III	Idle Initial)		🗌 Memo Item	Election: Primary General	
Mailing Address 1940 Boardwalk Drive				Other (specify) v	
City Miramar Beach	State FL	ZIP Code 32550	9	Personal Funds of the Candidate	
Original Amount of Loan 1200.00	Cumulative Pay	yment To D	Date Bala	nce Outstanding at Close of This Period 1200.00	
TERMS Date Incurred M07 ^M / P18 ^D / Y Ž019 Y	D	Date Due	Interest Rate (If none, enter 0.		
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	o Loan Source		Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	•		Name of Employer		
Mailing Address			Occupation Amount		
City State	ZIP Code		Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y y	
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only Carry outstanding balance only to LINE 3, Sch)			1200.00	

CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page		
IAME OF COMMITTEE (In Full) John Mills for Congress			Transac	tion ID : SC/10.4901	
LOAN SOURCE Full Name (Last, First, Mic MILLS, Ralph, John, , III	ddle Initial)		🗌 Memo Item	Election: Primary General	
Mailing Address 1940 Boardwalk Drive				Other (specify) v	
City Miramar Beach	State FL	ZIP Code 32550	9	Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pa	yment To D	0.00 Bala	nce Outstanding at Close of This Perioc 1500.00	
TERMS Date Incurred M09 ^M / P10 ^D / Y Ž019 Y	M M / D D	Date Due	Interest Rate (If none, enter	0) 00 0/ ()) / () / ()	
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	o Loan Source		Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation Amount		
City State	ZIP Code		Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	g	
SUBTOTALS This Period This Page (optional) TOTALS This Period (last page in this line only Carry outstanding balance only to LINE 3, Sch	/)			1500.00	

					PAGE 47 OF 53	
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of th Detailed Summary Pag		
ME OF COMMITTEE (In Full)				Transac	tion ID : SC/10.4929	
LOAN SOURCE Full Name MILLS, Ralph, , , III	e (Last, First, Mid	dle Initial)		🗌 Memo Item	Election: 2020 X Primary General	
Mailing Address 9059 Orlando Avenue					Other (specify)	
City Navarre		State FL	ZIP Code 32566)	Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	ayment To D	ate Bala	nce Outstanding at Close of This Perio	
	1500.00		<u>,</u>	0.00	1500.00	
TERMS Date Incurred		/ M / D	Date Due	Interest Rate (If none, enter 0.	00 0 1 1 1 1 1 1 1	
List All Endorsers or Guar	antors (if any) to	Loan Source	!			
1. Full Name (Last, First, N	/liddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Outstanding:	y	
2. Full Name (Last, First, M	iddle Initial)		1	Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, M	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, M	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
UBTOTALS This Period This					1500.00	

5				PAGE 48 OF 53	
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	(s) FOR LINE NUMBER:	
AME OF COMMITTEE (In Full) ohn Mills for Congress			Transac	tion ID : SC/10.4936	
LOAN SOURCE Full Name (Last, First, Mic MILLS, Ralph, , , III	Idle Initial)		Memo Item	Election: 2020 X Primary General	
Mailing Address 9059 Orlando Avenue				Other (specify) v	
City Navarre	State FL	ZIP Code 32566	9	Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pay	yment To D	Date Bala	nce Outstanding at Close of This Period	
12000.00	· · · · ·		0.00	12000.00	
TERMS Date Incurred	D	Date Due	Interest Rate (If none, enter		
^M 04 ^M / ^D 17 ^D / ^Y Ž02Ŏ ^Y	M M / D D) / Y Y	Y Y Y	% (apr) Yes X No	
List All Endorsers or Guarantors (if any) to	o Loan Source	I .			
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1	
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line only Carry outstanding balance only to LINE 3, Sch)			12000.00	

				PAGE 49 OF 53		
SCHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	(s) FOR LINE NUMBER:		
NAME OF COMMITTEE (In Full) John Mills for Congress			Transac	tion ID : SC/10.4966		
LOAN SOURCE Full Name (Last, First, Mid MILLS, Ralph, , , III	ddle Initial)		Memo Item Election: 2020			
Mailing Address 9059 Orlando Avenue				Other (specify)		
City Navarre	State FL	ZIP Code 32566	9	Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pay	yment To D	Date Bala	nce Outstanding at Close of This Period		
5359.12	7	7	0.00	5359.12		
TERMS Date Incurred	D	ate Due	Interest Rate (If none, enter	0)		
^M 07 ^M / ^D 10 ^D / ^Y Ž02Ŭ ^Y	M M / D D	/ Y Y	Y Y Y 0.0			
List All Endorsers or Guarantors (if any) t	o Loan Source					
1. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address	Mailing Address			Occupation		
City State	City State ZIP Code		Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address	Mailing Address			Occupation		
City State	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:	7 7 7 7		
SUBTOTALS This Period This Page (optional).			H	5359.12		
Carry outstanding balance only to LINE 3, Scl	hedule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.		

-					PAGE 50 OF 53	
CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	e(s) FOR LINE NUMBER:		
ME OF COMMITTEE (In Full)				Transac	tion ID : SC/10.4992	
LOAN SOURCE Full Name (Las MILLS, Ralph, , , III	st, First, Mic	ddle Initial)		Memo Item	Election: 2020 X Primary General	
Mailing Address 9059 Orlando Avenue					Other (specify)	
City Navarre		State FL	ZIP Code 32566	e	Personal Funds of the Candidate	
Original Amount of Loan	195.00	Cumulative Pa	lyment To D	Date Bala	nce Outstanding at Close of This Perio 1495.00	
TERMS Date Incurred	93.00		Date Due	Interest Rate	<u> </u>	
M08 ^M / D04 ^D / Y Ž02	Ŏ Ÿ	M M / D E	[/] ^Y 12/3	(If none, enter 31/2020 ^Y 0.		
List All Endorsers or Guaranto	rs (if any) t	o Loan Source				
1. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation Amount Guaranteed Outstanding:		
City	State ZIP Code					
2. Full Name (Last, First, Middle	Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
3. Full Name (Last, First, Middle	Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle	Initial)			Name of Employer		
Mailing Address			Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
UBTOTALS This Period This Page					1495.00 7 7	

-					PAGE 51 OF 53	
CHEDULE C (FEC Form 3) OANS			Use separate schedul for each category of t Detailed Summary Pa	the (check only one) × 13a		
ME OF COMMITTEE (In F ohn Mills for Congre	,			Transa	ction ID : SC/10.4983	
LOAN SOURCE Full Na MILLS, Ralph, , , II	• · · ·	dle Initial)		Memo Item	Election: 2020	
Mailing Address 9059 Orlando Avenue					Other (specify)	
City Navarre		State FL	ZIP Code 32566	9	Personal Funds of the Candidate	
Original Amount of Loan	1500.00	Cumulative Pa	ayment To D	0.00	ance Outstanding at Close of This Perio 1500.00	
TERMS Date Incu	-	9	Date Due	Interest Rat	e Secured:	
^M 08 ^M / ^D 05 ^D /	Y Ž02Ŏ Y	M M / D	^D [/] ^Y 12/3	(If none, ente §1/2Ŏ20 ^Y 0	.00	
List All Endorsers or G	uarantors (if any) to	o Loan Source				
1. Full Name (Last, First	, Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
2. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First,	Middle Initial)	-!		Name of Employer		
Mailing Address			Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 1 9 1 1 X 1	
JBTOTALS This Period Th					, 1500.00	

				PAGE 52 OF 53		
SCHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	(s) FOR LINE NUMBER:		
NAME OF COMMITTEE (In Full) John Mills for Congress			Transac	tion ID : SC/10.5016		
LOAN SOURCE Full Name (Last, First, Mir MILLS, Ralph, , , III	ddle Initial)		Memo Item Election: 2022 Memo Item Frimary General			
Mailing Address 9059 Orlando Avenue				Other (specify) v		
City Navarre	State FL	ZIP Code 32566	9	Personal Funds of the Candidate		
Original Amount of Loan 1500.00	Cumulative Pay	yment To D	Date Bala	nce Outstanding at Close of This Period 1500.00		
TERMS Date Incurred		Date Due	Interest Rate	<u> </u>		
M11M / D19D / Y Ž02Ŏ Y	M M / D D	/ Y	(If none, enter			
List All Endorsers or Guarantors (if any) t	to Loan Source					
1. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address	Mailing Address			Occupation		
City State	City State ZIP Code		Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address	Mailing Address			Occupation		
City State	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:	y		
SUBTOTALS This Period This Page (optional)			• C	1500.00		
TOTALS This Period (last page in this line onl	y)			63997.49		
Carry outstanding balance only to LINE 3, Sc	hedule D, for this	s line. If no	o Schedule D, carry forw	ard to appropriate line of Summary.		

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full) John Mills for Congres	SS		(Use separate schedule(s) for each numbered line)	PAGE53OF53FOR LINE NUMBER: (check only one)9¥10
A. Full Name (Last, First, Middle Initial) of De Law Office of James C. Thoma		ditor		ebt (Purpose): Reporting Services
Mailing Address 7509 NW Tiffany Springs Pkv Suite 300	wy			
City Kansas City	As City MO 64153			
Outstanding Balance Beginning This Period			Transactio	on ID : SD10.5026
0.00				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
175.00		0.0	00	, 175.00
B. Full Name (Last, First, Middle Initial) of Det	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of De	Nature of D	ebt (Purpose):		
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Period Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
1) SUBTOTALS This Period This Page (optional)		···· •	175.00
2) TOTALS This Period (last page this line num	···· •	175.00		
3) TOTAL OUTSTANDING LOANS from Schedu		63997.49		
4) ADD 2) and 3) and carry forward to appropri	nly) 🕨	64172.49		

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