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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3	For An A	Authorized Com	ımittee	Offic	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN	• =	kample: If typing, typ ver the lines.	pe 12FE4M5	
John Mills for Con	gress				ı
	1940 Boardwa	alk Drive			1
ADDRESS (number and stre	eet)				
▼ Check if differen	t				
than previously reported. (ACC)	Miramar Beac	ch		FL 325	50
		CITY ▲		STATE ▲	ZIP CODE ▲
2. FEC IDENTIFICATIO	ON NUMBER ▼				1
C C00565366		3. IS THIS REPORT	NEW (N) OF	AMENDED (A)	STATE ▼ DISTRICT
					•
4. TYPE OF REPOR	T (Choose One)	(b) 12-Day PRE	-Election Report for	· the·	
(a) Quarterly Reports	s:	(a) 12 Bay 1112			
X April 15 Qua	rterly Report (Q1)	Ш	Primary (12P)	General (12G)	Runoff (12R)
			Convention (12C)	Special (12S)	
July 15 Quar	terly Report (Q2)				
October 15 (Quarterly Report (Q3)	Election on	M M / D	D / Y " Y " Y " Y	in the State of
January 31 V	/ear-End Report (YE)	(a) 00 D D00			
Canada y C. 1	rour End Hoport (FE)	(c) 30-Day POS	ST -Election Report fo	or the:	
		ш	General (30G)	Runoff (30R)	Special (30S)
Termination F	Report (TER)	Election on	M M / D	D / Y Y Y Y	in the State of
5. Covering Period	M M / D D	/ Y Y Y Y Y Y Y Y 2019	through	M M / D D / Y	Y Y Y 2019
I certify that I have exami			nowledge and belief	it is true, correct and con	mplete.
Type or Print Name of Tre	Adams, Chri	siopner, , ,			
Signature of Treasurer	Adams, Christopher, , ,		[Electronically Filed]	Date Date	09 /
NOTE: Submission of falso	erroneous or incompl	ete information mov	subject the person of	igning this Report to the se	enalties of 52 U.S.C. §3010
Office	enoneous, or incomple	ete information may	Judgeof the person si	Igning this nepolitio the pe	
Use					FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
John Mills for Congress

2019 2019 03 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 0.00 8801.49 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 8801.49 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 777.63 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 40468.48 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name

.lohn	Mills	for	Congress
JUITI	1411119	101	Culidicas

01 03 01 2019 31 2019 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 300.00 (i) Itemized (use Schedule A)...... 505.00 0.00 (ii) Unitemized..... (iii) TOTAL of contributions 0.00 805.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs) 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 805.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 500.00 9234.94 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 500.00 9234.94 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 500.00 10039.94 (Carry Total to Line 24, page 4).....

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	0.00	8801.49
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed		
	by the Candidate		0.00
	(b) Of All Other Loans(c) TOTAL LOAN REPAYMENTS		0.00
	(add Lines 19(a) and (b))		0.00
20.	REFUNDS OF CONTRIBUTIONS TO (a) Individuals/Persons Other	0:	
	Than Political Committees		0.00
	(b) Political Party Committees (c) Other Political Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUI (add Lines 20(a), (b), and (c))	0.00	0.00
1.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and	21) • 0.00	8801.49
	III. C	ASH SUMMARY	
3.	CASH ON HAND AT BEGINNING C	OF REPORTING PERIOD	277.63
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)			
5.	SUBTOTAL (add Line 23 and Line	24)	777.63
6.	TOTAL DISBURSEMENTS THIS PE	RIOD (from Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF RI (subtract Line 26 from Line 25)	EPORTING PERIOD	777.63

SCHEDULE A (FEC Form 3)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 5 OF 46 (check only one)
ITEMIZED RECEIPTS	-	for each category of the	
TIENTIELD ILOCH IO		Detailed Summary Page	12 X 13a 13b 14 1
			person for the purpose of soliciting contributions tee 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			03 18 _ 2019 _
City	State	Zip Code	Transaction ID : SA13A.4874
Miramar Beach	FL	32550	
FEC ID number of contributing federal political committee.	C co	0565366	Amount of Each Receipt this Period
Name of Employer	Occupation	1	500.00
Receipt For: 2020	Flection C	ycle-to-Date _	Memo Item
Primary General	Ziootion o	yolo to bato 🔻	On Demand
Other (specify) ▼		20195.51	
Full Name (Last, First, Middle Initial) B.			Date of Receipt
Mailing Address			M M / D D / Y Y Y Y
City	State	Zip Code	
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer	Occupation	1	
Receipt For:	Flection C	ycle-to-Date _	Memo Item
Primary General Other (specify) ▼		7	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mailing Address	M M / D D / Y Y Y Y Y		
City	State	Zip Code	
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer	Occupation	1	
Receipt For: Primary General Other (specify)	Election C	ycle-to-Date	Memo Item

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

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

500.00

500.00

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

PAGE 6
FOR LINE NUMBER: (check only one)

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				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		_ 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 I 126.34			Date 0.00	Baland	ce Outstanding at Close	of This 126.34		
TERMS Date Incurred 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 7 OF
FOR LINE NUMBER:
(check only one)

X 13a 13b

							130
AME OF COMMITTEE (In Full) John Mills for Congress					Transa	ction ID : SC/10.4742	
LOAN SOURCE Full Name (Last, John Mills for Congress	First, Mi	ddle Initial)			Memo Item	Election: 2018 x Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify)		
City State ZIP Co			ZIP Code			X Personal Funds of the Ca	andidate
Miramar Beach FL 3255						Toronar Funds of the Oc	
Original Amount of Loan		Cumulative Page	yment To Da	te	Bala	ance Outstanding at Close of Thi	s Period
303	3.01		,	0.00		303.0)1
TERMS Date Incurred		С	Date Due		Interest Rat (If none, ente		
M10M / D04D / Y Ž017	Y	M M / D D	¹ 11/Ŏ8	/2Ŏ18 ^Ÿ	0	.00 % (apr) Yes	x No
List All Endorsers or Guarantors	(if any) t	to Loan Source					
1. Full Name (Last, First, Middle I	nitial)		N	ame of Em	nployer		
Mailing Address			0	ccupation			
0.4	01-1-	Ino a .		mount uaranteed			1
City	State	ZIP Code		utstanding:		y y	
2. Full Name (Last, First, Middle Ir	itial)		N	ame of Em	nployer		
Mailing Address				ccupation			
City	State	ZIP Code	G	mount uaranteed utstanding:		7 7]
3. Full Name (Last, First, Middle Ir	itial)		N	Name of Employer			
Mailing Address			0	ccupation			
City	State	ZIP Code	G	mount uaranteed utstanding:		g : g : a :	
4. Full Name (Last, First, Middle In	itial)		N	ame of Em	nployer		
Mailing Address				ccupation			
				mount			1
City	State	ZIP Code		uaranteed utstanding:		7	1
SUBTOTALS This Period This Page (optional).				····• \	303.0	01
TOTALS This Period (last page in this	s line onl	y)				, ,	
Carry outstanding balance only to LI	NE 3, Sc	hedule D, for this	s line. If no	Schedule	D, carry for	ward to appropriate line of Sun	nmary.

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

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FOR LINE NUMBER: (check only one)

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OF

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Transaction ID: SC/10.4743 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify) City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 4.24 0.00 4.24 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10^M 0.00 D05D Ž017 Y11/08/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 4.24 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC/10.4744
Ğ		T =
LOAN SOURCE Full Name (Last, First, M John Mills for Congress	liddie initial)	☐ Memo Item
Mailing Address 1940 Boardwalk Drive		General Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Miramar Beach	FL	32550
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
35.00		0.00 35.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M10 ^M / D10 ^D / Y Ž017 Y	M M / D D	/ Y11/Ŏ8/2Ŏ18
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	35.00
TOTALS This Period (last page in this line or	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

			130
AME OF COMMITTEE (In Full) Ohn Mills for Congress			Transaction ID : SC/10.4745
John Mills for Congress	First, Mid	ddle Initial)	Memo Item Election: 2018 *** Primary General Other (apacifu)
Mailing Address 1940 Boardwalk Drive			Other (specify) ———————————————————————————————————
City		State	ZIP Code Personal Funds of the Candidate
Miramar Beach		FL Down Latin a Day	32550 Polyage Contains and Classes (This Region
Original Amount of Loan	.63	Cumulative Pay	yment To Date Balance Outstanding at Close of This Period 0.00 21.63
TERMS Date Incurred		D	Date Due Interest Rate Secured: (If none, enter 0)
M10 ^M / D12 ^D / Y Ž017	Y	M M / D D	
List All Endorsers or Guarantors	(if any) t	o Loan Source	
1. Full Name (Last, First, Middle I	nitial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle In	itial)	1	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional).		21.63
OTALS This Period (last page in this	s line only	/)	————
Carry outstanding balance only to LI	NE 3, Scl	nedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID: SC/10.4746
9		
LOAN SOURCE Full Name (Last, First, M John Mills for Congress	ddle Initial)	☐ Memo Item
Mailing Address 1940 Boardwalk Drive		General Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Miramar Beach	FL	32550
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
7.95		0.00 7.95
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M10 ^M / D17 ^D / Y Ž017 Y	M M / D D	/ Y11/ŏ8/2ŏ18
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		7.95
TOTALS This Period (last page in this line on	ly)	
Carry outstanding balance only to LINE 3, So	hedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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				Detailed	Summary Pag	e	13b
AME OF COMMITTEE (In Full)				•	Transac	tion ID : SC/10.4747	•
John Mills for Congress							
LOAN SOURCE Full Name (Last, Fi	irst, Mid	dle Initial)			Memo Item	Election: 2018	
John Mills for Congress						Primary General	
Mailing Address 1940 Boardwalk Drive						Other (specify)	
1940 Boardwalk Drive							
City		State	ZIP Coc	le		M Barranal Francis of the C	No. 12 de 1
Miramar Beach		FL	32550			Personal Funds of the C	andidate
Original Amount of Loan		Cumulative Pay	ment To	Date		nce Outstanding at Close of Th	nis Period
72.4	19		,	0.00	0		.49
TERMS Date Incurred		D	ate Due		Interest Rate		:
M ₁₀ ^M / D ₃₀ D / Y Ž01Ť	Y !	M M / D D	/ Y11	/08/2018 ^Y	(If none, enter	00	
10 00 2011				00/2010		% (apr) Yes	× No
List All Endorsers or Guarantors (if		Loan Source					
1. Full Name (Last, First, Middle Ini	tial)			Name of Em	nployer		
Mailing Address				Occupation			
				Amount			_
City	State	ZIP Code		Guaranteed Outstanding	. L	7	_
2. Full Name (Last, First, Middle Initi	al)			Name of Employer			
Mailing Address				Occupation			
				Amount			_
City	State	ZIP Code		Guaranteed Outstanding		7	_
3. Full Name (Last, First, Middle Initi	al)			Name of Em	nployer		
Mailing Address				Occupation			
				Amount			_
City	State	ZIP Code		Guaranteed Outstanding		y	_
4. Full Name (Last, First, Middle Initi	al)			Name of Em	nployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding	. L	7 7	_
SUBTOTALS This Period This Page (optional)							
TOTALS This Period (last page in this I	ine only)			▶	9 9	
Carry outstanding balance only to LINI	E 3. Sch	edule D. for this	line. If r	o Schedule	D. carry forw	vard to appropriate line of Su	mmary
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Use separate schedule(s) for each category of the Detailed Summary Page

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Transaction ID: SC/10.4748 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 196.54 0.00 196.54 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10^M 0.00 D31 D Ž017 Y11/08/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 196.54 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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John Mills for Congress				Transa	action ID : SC/10.4749		
LOAN SOURCE Full Name (Last,	First, Midd	dle Initial)		Memo Item	Election: 2018		
John Mills for Congress	X Primary General						
Mailing Address 1940 Boardwalk Drive	Other (specify) ▼						
City	de	▼ Personal Funds of the Candidate					
Miramar Beach		FL	32550				
Original Amount of Loan		Cumulative Pay	ment To		lance Outstanding at Close of This Period		
, ,	.21	7		0.00	41.21		
TERMS Date Incurred		D	ate Due	Interest Ra (If none, enter			
M11M / D01D / Y Ž017	Y	M / D D	/ ^Y 11	/ŏ8/2ŏ18 ^v	% (apr) Yes X No		
List All Endorsers or Guarantors	(if any) to	Loan Source					
1. Full Name (Last, First, Middle II	nitial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	y y y		
2. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
	1	1		Amount			
City	State	ZIP Code		Guaranteed Outstanding:	9 9		
3. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
	1	1		Amount			
City	State	ZIP Code		Guaranteed Outstanding:	y		
4. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	7		
SUBTOTALS This Period This Page (o	optional)			······	41.21		
TOTALS This Period (last page in this	line only)				7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -		
Carry outstanding balance only to I II	NE 3. Sche	edule D. for this	line. If	no Schedule D. carry for	rward to appropriate line of Summary.		
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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Transaction ID: SC/10.4750 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 804.08 0.00 804.08 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D05D M 11M Ž017 Y11/08/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 804.08 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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13b Transaction ID: SC/10.4751 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 19.08 0.00 19.08 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 M 1 1 M D08D Ž017 Y11/08/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 19.08 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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	ME OF COMMITTEE (In Full) ohn Mills for Congress				Transaction	n ID : SC/10.4752		
L								
	LOAN SOURCE Full Name (Last,	First, Mid	ddle Initial)		Memo item	ection: 2018		
	John Mills for Congress					Primary General		
	Mailing Address 1940 Boardwalk Drive					Other (specify) ▼		
	City		State	de	X Personal Funds of the Candidate			
	Miramar Beach		FL	32550		Personal Funds of the Candidate		
	Original Amount of Loan		Cumulative Pay	ment To	Date Balance	Outstanding at Close of This Period		
	93	3.73	3		0.00	93.73		
	TERMS Date Incurred		D	ate Due	Interest Rate (If none, enter 0)	Secured:		
	M11M / D08D / Y 2017	Υ	M M / D D	/ ^Y 11	/ŏ8/2ŏ18 ^Y 0.00	% (apr) Yes X No		
	List All Endorsers or Guarantors	(if anv) to	o Loan Source					
	Full Name (Last, First, Middle I	` • •			Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	9		
	2. Full Name (Last, First, Middle In	itial)	·		Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	9		
	3. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:			
	4. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address				Occupation			
				Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9		
SI	UBTOTALS This Period This Page (optional)			······	93.73		
T	OTALS This Period (last page in this	line only	/)		-	, , , , , ,		
<u> </u>	carry outstanding balance only to LII	NE 2 Cal	andula D. for this	line If	no Sohodulo D. corre formare	to appropriate line of Cumman:		
ı۷	arry outstanding balance only to Li	v⊑ o, ocn	iedule D, IOF INS	mie. II	io Schedule D, Carry lorward	i to appropriate line of Summary.		

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AME OF COMMITTEE (In Full) Iohn Mills for Congress					Trans	action I	D : SC/10.475	3	
LOAN SOURCE Full Name (Last, F John Mills for Congress	LOAN SOURCE Full Name (Last, First, Middle Initial) John Mills for Congress					'''	otion: 2018 Primary General		
Mailing Address 1940 Boardwalk Drive							Other (specify	y) ▼	
City		State	ZIP Code			x	Personal Fu	unds of the	Candidate
Miramar Beach		FL	32550				1 ersonar i u		Candidate
Original Amount of Loan		Cumulative Pay	ment To Dat	е	В	alance C	Outstanding at	: Close of	This Period
6.	00	7		0.00			1	,	6.00
TERMS Date Incurred		D	ate Due		Interest Ra (If none, en			Secure	ed:
M12M / D21D / Y Ž01Ť	Υ	M M / D D	/ ^Y 11/Ŏ8/	2018 ^Y		0.00	% (apr)	Ye	es 🗶 No
List All Endorsers or Guarantors (if any) to	o Loan Source							
1. Full Name (Last, First, Middle In	itial)		Na	me of Em	ployer				
Mailing Address			Oc	cupation					
				Amount Guaranteed					
City	State	ZIP Code		Outstanding:					
2. Full Name (Last, First, Middle Init	tial)	'	Na	Name of Employer					
Mailing Address			Oc	Occupation					
City	State	ZIP Code	Gu	Amount Guaranteed Outstanding:					
3. Full Name (Last, First, Middle Ini	tial)			Name of Employer					
Mailing Address			Oc	Occupation					
				nount					
City	State	ZIP Code		aranteed itstanding:		7	7	- T- W	
4. Full Name (Last, First, Middle Init	tial)		Na	Name of Employer					
Mailing Address				Occupation					
				nount aranteed					7
City	State	ZIP Code		itstanding:		7	7		
CHRIOTALS This Devied This Dogs (o	ntional\								
SUBTOTALS This Period This Page (o	puonai)						7	,	6.00
TOTALS This Period (last page in this	line only	/) ······			▶			,	
Carry outstanding balance only to LIN	E 3, Sch	nedule D, for this	line. If no S	Schedule I	D, carry fo	rward t	to appropriat	e line of \$	Summary.

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AME OF COMMITTEE (In Full) Ohn Mills for Congress			Transaction ID : SC/10.4754
John Mills for Congress	First, Mid	ddle Initial)	Memo Item Election: 2018 **Primary General
Mailing Address 1940 Boardwalk Drive			☐ Other (specify) ▼ ————
City		State	ZIP Code Responsible to the Candidate Personal Funds of the Candidate
Miramar Beach		FL	32550
Original Amount of Loan	3.00	Cumulative Pay	yment To Date Balance Outstanding at Close of This Period 0.00 308.00
TERMS Date Incurred		D	Date Due Interest Rate Secured: (If none, enter 0)
M12M / D22D / Y Ž01Ť	Y	M M / D D	
List All Endorsers or Guarantors	(if any) t	o Loan Source	
1. Full Name (Last, First, Middle I	nitial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle In	itial)	1	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed
3. Full Name (Last, First, Middle In	litial)		Outstanding: Name of Employer
o. Full Name (East, Flist, Middle III	πτιαι)		Traine of Employor
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed
4. Full Name (Last, First, Middle In	litial)		Outstanding: Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional).		308.00
TOTALS This Period (last page in this			, , , , ,
On the second se	NE 2 2 :		The Kee Orbital Day of the Committee of
Carry outstanding balance only to LI	n⊨ 3, Scl	nedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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	ME OF COMMITTEE (In Full) ohn Mills for Congress				Transactio	on ID : SC/10.4755		
	LOAN SOURCE Full Name (Last,	First, Mic	ddle Initial)		☐ Memo Item	Election: 2018		
	John Mills for Congress					Primary		
-	Mailing Address					General Other (specify) ▼		
	Mailing Address 1940 Boardwalk Drive					Other (specify) •		
	City		State	de	▼ Personal Funds of the Candidate			
-	Miramar Beach		FL	32550				
	Original Amount of Loan		Cumulative Pay	ment To	Date Balanc	ce Outstanding at Close of This Period		
	56	5.34			0.00	56.34		
İ	TERMS Date Incurred		D	ate Due	Interest Rate (If none, enter 0)	Secured:		
	^M 12 ^M / ^D 24 ^D / Y Ž01Ť	Υ	M M / D D	/ Y11	/ŏ8/2ŏ18 [×] 0.00	% (apr) Yes No		
	List All Endorsers or Guarantors	(if any) to	o Loan Source					
	Full Name (Last, First, Middle I	` ,			Name of Employer			
	Mailing Address				Occupation			
					Amount			
ŀ	City	State	ZIP Code		Guaranteed			
	Oity State Zii Code				Outstanding.	y		
	2. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	7		
	3. Full Name (Last, First, Middle In	itial)	•		Name of Employer			
	Mailing Address				Occupation			
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , ,		
Ì	4. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address			Occupation				
					Amount			
	City	State	ZIP Code		Guaranteed Outstanding:			
П			I					
SI	JBTOTALS This Period This Page (optional)			······	56.34		
TC	OTALS This Period (last page in this	line only	/)					
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C	arry outstanding balance only to LI	NE 3, Sch	nedule D, for this	line. If	no Schedule D, carry forwa	rd to appropriate line of Summary.		

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AME OF COMMITTEE (In Full) Iohn Mills for Congress			Transaction ID : SC/10.4756
LOAN SOURCE Full Name (Last, John Mills for Congress	First, Mic	ddle Initial)	Memo Item Election: 2018 X Primary General
Mailing Address 1940 Boardwalk Drive			Other (specify) ▼
City		State	ZIP Code Responsible to the Candidate Personal Funds of the Candidate
Miramar Beach		FL	32550
Original Amount of Loan		Cumulative Pay	yment To Date Balance Outstanding at Close of This Period
208	3.00		0.00 208.00
TERMS Date Incurred		D	Date Due Interest Rate Secured: (If none, enter 0)
M12M / D29D / Y Ž017	Y	M M / D D	/ ¹ 11/08/2018
List All Endorsers or Guarantors	(if any) t	o Loan Source	
1. Full Name (Last, First, Middle I	nitial)		Name of Employer
Mailing Address			Occupation
	T		Amount Guaranteed
City	State	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
	1_	T	Amount Guaranteed
City	State	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
City State ZIP Code			Amount Guaranteed
City	State	ZIP Code	Outstanding:
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GUBTOTALS This Period This Page (υριιυπαι)…		208.00
OTALS This Period (last page in this	s line only	/)	······································
Carry outstanding balance only to LI	NE 3, Sch	nedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: SC/10.4678 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify) \blacktriangledown City State ZIP Code Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 400.00 0.00 400.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D17D M 01M Ž018 Y11/08/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 400.00 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.

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			Detailed 3	Summary Pag	ge			13b
AME OF COMMITTEE (In Full) John Mills for Congress				Transac	ction ID	: SC/10.4709		
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)			Memo Item		on: 2018 rimary		
John Mills for Congress						innary General		
Mailing Address 1940 Boardwalk Drive						other (specify)	▼	
City	State	ZIP Code						
Miramar Beach	FL	32550			X	Personal Fund	is of the Car	ndidate
Original Amount of Loan	Cumulative Pay	yment To D	ate	Bala	ance Ou	tstanding at C	lose of This	Period
2231.10	7	,	0.00			, ,	2231.10	0
TERMS Date Incurred	D	ate Due		Interest Rat			Secured:	
M03 ^M / D31 ^D / Y Ž018 Y	M M / D D	/ ^Y 11/0	8/2Ŏ18 ^Y		.00	% (apr)	Yes	x No
List All Endorsers or Guarantors (if any) t	o Loan Source							
1. Full Name (Last, First, Middle Initial)		1	lame of Em	ployer				
Mailing Address		(Occupation					
			Amount					
City	ZIP Code		Guaranteed Outstanding:		7	7		
2. Full Name (Last, First, Middle Initial)	'	1	Name of Employer					
Mailing Address		(Occupation					
	T		mount Guaranteed					
City	ZIP Code		Outstanding:		7	7		
3. Full Name (Last, First, Middle Initial)		1	lame of Em	ployer				
Mailing Address		(Occupation					
			mount					
City State	ZIP Code		Guaranteed Outstanding:		7			
4. Full Name (Last, First, Middle Initial)	'	1	Name of Employer					
Mailing Address	(Occupation						
			mount	_				
City	ZIP Code		Guaranteed Outstanding:		7	7		
SUBTOTALS This Period This Page (optional).							2224 44	0
						7	2231.10	
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Carry outstanding balance only to LINE 3, Sci	nedule D, for this	s line. If no	Schedule I	D, carry for	ward to	appropriate	line of Sum	mary.

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	ME OF COMMITTEE (In Full) ohn Mills for Congress				Trans	action ID : SC/10.4829			
L,									
	LOAN SOURCE Full Name (Last,	First, Mic	ldle Initial)		☐ Memo Iter				
	John Mills for Congress					x Primary			
ŀ	Mailing Address					General Other (specify) ▼			
	Mailing Address 1940 Boardwalk Drive					- Curior (specify) \(\psi \)			
	City		State	de	Personal Funds of the Candidate				
	Miramar Beach		FL	32550					
	Original Amount of Loan		Cumulative Pay	yment To	Date Ba	alance Outstanding at Close of This Period			
	150	0.67	,		0.00	150.67			
İ	TERMS Date Incurred		D	ate Due	Interest Ra (If none, en				
	M04 ^M / D20 ^D / Y Z018	Y	M M / D D	/ Y08	3/28/2018 ^Y	0.00 % (apr) Yes No			
İ	List All Endorsers or Guarantors	(if anv) to	o Loan Source						
	1. Full Name (Last, First, Middle I	` ,			Name of Employer				
-	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	7			
	2. Full Name (Last, First, Middle Initial)				Name of Employer				
	Mailing Address				Occupation				
					Amount				
ŀ	City	State	ZIP Code		Guaranteed				
					Outstanding:	7			
	3. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
Ī	City	State	ZIP Code		Guaranteed Outstanding:	7			
	4. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address			Occupation					
					Amount				
•	City	State	ZIP Code		Guaranteed Outstanding:	7 7			
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т	OTALS This Period (last page in this	line only	r)						
						7			
C	arry outstanding balance only to LI	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry fo	rward to appropriate line of Summary.			

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				Detailed Suffirmary I	rage	13b	
NAME OF COMMITTEE (In Full) John Mills for Congress				Trans	saction ID : SC/10.4815	·	
LOAN SOURCE Full Name (L	ast, First, Mic	ddle Initial)		☐ Memo Ite			
John Mills for Congres	S				Primary		
Mailing Address					General		
Mailing Address 1940 Boardwalk Drive					Other (specify)		
City		State FL	ZIP Code)	Personal Funds of the C	andidate	
Miramar Beach		FL .	32550				
Original Amount of Loan		Cumulative Pay	yment To D	ate E	Balance Outstanding at Close of Th	is Period	
	8500.00			700.00	7000	00	
	0500.00	9		700.00	7800	00	
TERMS Date Incurred		D	ate Due	Interest F (If none, e			
M04 ^M / D24 ^D / Y Ž	018 ^Y	M M / D D	/ Y11/0	08/2018 ^Y	0.00 % (apr) Yes	× No	
List All Endorsers or Guaran	tors (if any) t	o Loan Source					
1. Full Name (Last, First, Mid				Name of Employer			
Mailing Address			- 1	Occupation			
			H.	Amount			
City	State	ZIP Code		Guaranteed Outstanding:			
2. Full Name (Last, First, Midd	2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address				Occupation			
			<u> </u>	Amount			
City	State	ZIP Code		Guaranteed Outstanding:	7 7		
3. Full Name (Last, First, Mido	lle Initial)			Name of Employer			
Mailing Address			- 1	Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	, , ,		
4. Full Name (Last, First, Midd	lle Initial)			Name of Employer			
Mailing Address				Occupation			
			-	Amount			
City	State	ZIP Code		Guaranteed Outstanding:	7 7		
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TOTALS This Period (last page in	this line only	/)			9 9		
Carry outstanding balance only t	o LINE 3. Sch	nedule D. for this	s line. If no	Schedule D. carry f	forward to appropriate line of Su	mmary.	
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Transaction ID: SC/10.4830 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify) \blacktriangledown City State ZIP Code Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1475.00 0.00 1475.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 15D M 06M Ž018 Y08/28/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1475.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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AME OF COMMITTEE (In Full) Ohn Mills for Congress			Transaction ID : SC/10.4831
LOAN SOURCE Full Name (Last, John Mills for Congress	First, Mid	ddle Initial)	Memo Item Election: 2018 X Primary General
Mailing Address 1940 Boardwalk Drive			Other (specify) ▼
City		State	ZIP Code Personal Funds of the Candidate
Miramar Beach		FL	32550
Original Amount of Loan		Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
600	0.00		0.00 600.00
TERMS Date Incurred		D	ate Due Interest Rate Secured: (If none, enter 0)
M06 ^M / D15 ^D / Y Ž018	Y	M M / D D	/ ^Y 08/Ž8/2Ŏ18 ^Y 0.00
List All Endorsers or Guarantors	(if any) t	o Loan Source	
1. Full Name (Last, First, Middle I	nitial)		Name of Employer
Mailing Address			Occupation
	_		Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed
		Zii Gode	Outstanding:
3. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Ir	litial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LI	NE 3, Scl	nedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID: SC/10.4832
· ·		T =
LOAN SOURCE Full Name (Last, First, M John Mills for Congress	ddle Initial)	☐ Memo Item
Mailing Address 1940 Boardwalk Drive		General Other (specify) ▼
City	State	ZIP Code
Miramar Beach	FL	32550 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
35.10	,	0.00
TERMS Date Incurred	Γ	Pate Due Interest Rate Secured: (If none, enter 0)
M06 ^M / D27 ^D / Y Ž018 Y	M M / D D	/ Y08/ž8/2ŏ18
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		35.10
TOTALS This Period (last page in this line on	y)	······································
Carry outstanding balance only to LINE 3, So	hedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4841 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2018 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify) \blacktriangledown City State ZIP Code Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D05D M 07M Ž018 Y08/28/2018 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 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.

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			Detailed S	Summary Pag	ge	13b
AME OF COMMITTEE (In Full) John Mills for Congress				Transac	ction ID : SC/10.4842	
LOAN SOURCE Full Name (Last, First, Mic John Mills for Congress			Memo Item	Election: 2018 Primary General Other (specify)		
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City Miramar Beach	State FL	ZIP Code 32550			Personal Funds of the	Candidate
Original Amount of Loan Cumulative Payment To 2000.00			te 0.00		ance Outstanding at Close of 200	This Perio
TERMS Date Incurred	D	ate Due		Interest Rate (If none, ente		d:
M07M / D05D / Y Z018 Y	M M / D D	[/] \(^{\cup_08/\)28	/2Ŏ18 ^Ÿ		.00 % (apr) Ye	s X No
List All Endorsers or Guarantors (if any) t	o Loan Source					
1. Full Name (Last, First, Middle Initial)		Na	ame of Em	ployer		
Mailing Address		O	ccupation			
City State	ZIP Code	Gi	nount uaranteed utstanding:		9 9	
2. Full Name (Last, First, Middle Initial)	Na	ame of Em	ployer			
Mailing Address		O	ccupation			
			nount			$\overline{}$
City	ZIP Code		uaranteed utstanding:		<u> </u>	
3. Full Name (Last, First, Middle Initial)		Na	ame of Em	ployer		
Mailing Address		00	ccupation			
City State	ZIP Code	Gi	nount uaranteed utstanding:		g	
4. Full Name (Last, First, Middle Initial)		Na	ame of Em	ployer		
Mailing Address			ccupation			
		Ar	mount	_		
City	ZIP Code		uaranteed utstanding:		y y x	
SUBTOTALS This Period This Page (optional)						
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13b Transaction ID: SC/10.4874 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2020 Memo Item Primary John Mills for Congress General Mailing Address 1940 Boardwalk Drive Other (specify) \blacktriangledown City State ZIP Code Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 18D M 03M ž019 Y03/17/2020 Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 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.

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NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC/10.4106
LOAN SOURCE Full Name (Last, First, MILLS, Ralph, John, , III	Middle Initial)	Memo Item Election: 2014
Mailing Address 1940 Boardwalk Drive		Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Miramar Beach	FL	32550
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M06 ^M / D24 ^D / Y Ž014 Y	M M / D D	0.00 % (apr) Yes No
List All Endorsers or Guarantors (if an	y) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	e ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	e ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
011	710.0	Amount Guaranteed
City	e ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
Oit.	71D O- 4-	Amount Guaranteed
City	e ZIP Code	Outstanding:
SUBTOTALS This Period This Page (option	nal)	5000.00
TOTALS This Period (last page in this line	only)	
Carry outstanding balance only to LINE 3	Schedule D. for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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AME OF COMMITTEE (In Full) John Mills for Congress					Transac	ction ID : SC/10.4116
LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III	First, Mid	ddle Initial)			Memo Item	Election: Primary General
Mailing Address 1940 Boardwalk Drive	Mailing Address 1940 Boardwalk Drive					Other (specify) ▼
City		State	ZIP Co	de		Personal Funds of the Candidat
Miramar Beach		FL	32550			Totalian and an analysis
Original Amount of Loan	1 94	Cumulative Page	yment To	Date 0.00		ance Outstanding at Close of This Period
9 9		-				<u> </u>
TERMS Date Incurred			Date Due		Interest Rate (If none, enter	
M07 ^M / D18 ^D / Y Ž014	Y	M M / D D	/ 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 Emp	oloyer	
Mailing Address				Occupation		
City	Stato	ZID Codo		Amount Guaranteed		
City	City State ZIP Code			Outstanding:		9
2. Full Name (Last, First, Middle Ir	nitial)			Name of Emp	oloyer	
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		7
3. Full Name (Last, First, Middle Ir	ıitial)			Name of Emp	oloyer	
Mailing Address				Occupation		
	1	T		Amount Guaranteed		
City	State	ZIP Code		Outstanding:		9 9 9
4. Full Name (Last, First, Middle Ir	nitial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		9 9 9
SUBTOTALS This Period This Page (FOTALS This Period (last page in this	s line only	у)			···•	4234.94
carry outstanding balance only to Li	ıv⊑ J, SCI	iedule D, for this	s ime. if	io ocneaule L	י, carry torv	ward to appropriate line of Summary.

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Transaction ID: SC/10.4197 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Memo Item Primary MILLS, Ralph, John, , III General Mailing Address 1940 Boardwalk Drive Other (specify) City State ZIP Code X Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) D08D M09M Ž015 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC/10.4299			
9					
LOAN SOURCE Full Name (Last, First, Mid MILLS, Ralph, John, , III	Idle Initial)	Memo Item Election: 2016 x Primary			
Mailing Address 1940 Boardwalk Drive		General Other (specify) ▼			
City	State	ZIP Code Personal Funds of the Candidate			
Miramar Beach	FL	32550 Personal Funds of the Candidate			
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period			
3850.64		0.00 3850.64			
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)			
M01 ^M / D02 ^D / Y Ž016 Y	M M / D D	/ Y Y Y Y Y No Yes X No			
List All Endorsers or Guarantors (if any) to	o Loan Source				
Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
SUBTOTALS This Period This Page (optional)		3850.64			
TOTALS This Period (last page in this line only	y)	······································			
Carry outstanding balance only to LINE 3, Sch	edule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.			

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Transaction ID: SC/10.4337 NAME OF COMMITTEE (In Full) John Mills for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary MILLS, Ralph, John, , III General Mailing Address 1940 Boardwalk Drive Other (specify) \blacktriangledown City State ZIP Code Personal Funds of the Candidate FL 32550 Miramar Beach Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 345.33 0.00 345.33 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D30 D M 06M ž016 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 345.33 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC/10.4342			
Ğ		Ι			
LOAN SOURCE Full Name (Last, First, Mic MILLS, Ralph, John, , III	Idle Initial)	☐ Memo Item Election: 2018 x Primary			
Mailing Address 1940 Boardwalk Drive		General Other (specify) ▼			
City	State	ZIP Code			
Miramar Beach	FL	32550 Personal Funds of the Candidate			
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period			
1500.00	7	0.00 1500.00			
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)			
M07 ^M / D18 ^D / Y Ž016 Y	M M / D D	[/] Děmaňd [→] 0.00 % (apr) Yes 🗶 No			
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
SUBTOTALS This Period This Page (optional)		1500.00			
TOTALS This Period (last page in this line only	y)	······································			
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.			

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

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

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AME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC/10.4344
LOAN SOURCE Full Name (Last, First, Mi MILLS, Ralph, John, , III Mailing Address 1940 Boardwalk Drive	ddle Initial)	☐ Memo Item Election: 2018 ## Primary General Other (specify) ▼
City	State	ZIP Code
Miramar Beach	FL	32550 Personal Funds of the Candidat
Original Amount of Loan	Cumulative Pag	ment To Date Balance Outstanding at Close of This Period
500.00		0.00 500.00
TERMS Date Incurred	С	tte Due Interest Rate Secured: (If none, enter 0)
M09M / D23D / Y Z016 Y	M M / D D	✓ Děmaňd 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
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		500.00
TOTALS This Period (last page in this line onl	y)	······································
Carry outstanding balance only to LINE 3, Sc	hedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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		Detailed Summary Fage	13b		
AME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC	:/10.4351		
LOAN SOURCE Full Name (Last, First, MILLS, Ralph, John, , III Mailing Address 1940 Boardwalk Drive	Middle Initial)	Memo Item Election: Prima Gener Other	•		
City Miramar Beach	State FL	ZIP Code 32550 Pers	onal Funds of the Candidate		
Original Amount of Loan 500.00	Cumulative Pa	ment To Date Balance Outstar	nding at Close of This Period 500.00		
TERMS Date Incurred M05M / D02D / Y 2017 Y	M " M / D " D	ate Due Interest Rate (If none, enter 0) / Y Děmaňd Y 0.00 %	Secured: (apr) Yes No		
List All Endorsers or Guarantors (if ar					
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation	Occupation		
City	e ZIP Code	Amount Guaranteed Outstanding:	7		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City	e ZIP Code	Amount Guaranteed Outstanding:	,		
3. Full Name (Last, First, Middle Initial)	•	Name of Employer			
Mailing Address		Occupation			
City	e ZIP Code	Amount Guaranteed Outstanding:	,		
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City	e ZIP Code	Amount Guaranteed Outstanding:	7		
SUBTOTALS This Period This Page (option			500.00		
Carry outstanding balance only to LINE 3.	Schedule D, for this	line. If no Schedule D, carry forward to app	propriate line of Summary.		

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AME OF COMMITTEE (In Full) Ohn Mills for Congress			Transaction ID: SC/10.4357
LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III Mailing Address 1940 Boardwalk Drive	First, Mic	ddle Initial)	Memo Item Election: 2018 Primary General Other (specify) ▼
City		State	ZIP Code
Miramar Beach		FL	32550 Personal Funds of the Candidat
Original Amount of Loan		Cumulative Pay	syment To Date Balance Outstanding at Close of This Period
150	.00		0.00 150.00
TERMS Date Incurred		D	Date Due Interest Rate Secured: (If none, enter 0)
M ₀₇ M / D ₂₆ D / Y Ž017	Υ	M M / D D	0.00 % (apr) Yes X No
List All Endorsers or Guarantors	(if any) t	o Loan Source	
1. Full Name (Last, First, Middle I	nitial)		Name of Employer
Mailing Address			Occupation
	la	T=15 0 .	Amount Guaranteed
City	State	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle In	itial)	·	Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle In	itial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)			Name of Employer
Mailing Address			Occupation
O.	la		Amount
City	State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		150.00
OTALS This Period (last page in this	line only	/)	•
Carry outstanding balance only to LII	NE 3, Sch	nedule D, for this	is line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.4358 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 750.00 0.00 750.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D13^D M09M 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)..... 750.00 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.

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NAME OF COMMITTEE (In John Mills for Congr	,		Transaction ID: SC/10.4811
9			
LOAN SOURCE Full Na	ame (Last, First, Mic	ldle Initial)	☐ Memo Item
MILLS, Ralph, Joh	nn, , III		X Primary
Mailing Addings			General
Mailing Address 1940 Boardwalk Drive			Other (specify) ▼
City		State	ZIP Code Personal Funds of the Candidate
Miramar Beach		FL	32550
Original Amount of Loa	n	Cumulative Pay	yment To Date Balance Outstanding at Close of This Period
	16.95		0.00 16.95
TERMS Date Inc.	ırred	C	Date Due Interest Rate Secured:
M ₀₄ M / P ₀₇ D /	Y Ž018 Y	M M / D D	11/08/2018
			% (apr) Yes X No
List All Endorsers or G	luarantors (if any) to	o Loan Source	
1. Full Name (Last, Firs	st, Middle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First	, Middle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First	, Middle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed
4. Full Name (Last, First	Middle Initial)		Outstanding: Name of Employer
,			
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
	l	1	'
SUBTOTALS This Period T	his Page (optional)		16.95
TOTAL C This Desired #2.1	agg in this P !	λ	
TOTALS This Period (last p	page in this line only		
Carry outstanding balance	only to LINE 3, Sch	nedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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			Detailed Guillinary	1 age	x 13b
NAME OF COMMITTEE (In Full) John Mills for Congress			Tran	nsaction ID : SC/10.4843	
_				T	
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo It	I □ □ □ ·	
Start Skydiving, LLC				Primary General	
Mailing Address 1711 Runway Drive				Other (specify)	,
1711 Kuliway Dilve					
City	State	ZIP Code)	Porconal Funds	of the Candidate
Middletown	ОН	45042		reisonal runus	or the Candidate
Original Amount of Loan	Cumulative Pa	yment To D	ate I	Balance Outstanding at Cl	ose of This Period
920.16			0.00		920.16
TERMS Date Incurred	7	Date Due	Interest I	Dete	On assume also
		Jale Due	(If none, e	enter 0)	Secured:
M07 ^M / D02 ^D / Y Ž018 Y	M M / D D	⁷ ⁷ 08/2	(8/2Ŏ18 ^Y	0.00 % (apr)	Yes X No
List All Endorsers or Guarantors (if any) t	to Loan Source				
1. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
		7	Amount		
City State	ZIP Code		Guaranteed Outstanding:	. , ,	
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
		1	Amount		
City State	ZIP Code		Guaranteed Outstanding:	7	
3. Full Name (Last, First, Middle Initial)	•	1	Name of Employer		
Mailing Address		(Occupation		
			Amount		
City	ZIP Code		Guaranteed Outstanding:	7 7	w .
4. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
			Amount		
City	ZIP Code	(Guaranteed Outstanding:	7 7	
SUBTOTALS This Period This Page (optional)			······································	, , , , ,	920.16
TOTALS This Period (last page in this line only	y)			, , , , ,	38563.53
Carry outstanding balance only to LINE 3, Sci	hedule D. for this	s line. If no	Schedule D. carry	forward to appropriate li	ne of Summarv.

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

Excluding Loans

NA

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JUHL	1011112	IUI	Cona	ロセシシ

AME OF COMMITTEE (In Full) John Mills for Congre	S S			
A. Full Name (Last, First, Middle Initial) of De Law Office of James C. Thoma	Nature of Debt (Purpose): Legal and Reporting Services			
Mailing Address 7509 NW Tiffany Springs Pk Suite 300	-			
City Kansas City	State MO	Zip Code 64153		
Outstanding Balance Beginning This Period			Transaction ID : SD10.4869	
315.00				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	315.00	
B. Full Name (Last, First, Middle Initial) of De Law Office of James C. Thoma		ditor	Nature of Debt (Purpose): Legal and Reporting Services	
Mailing Address 7509 NW Tiffany Springs Pk Suite 300	wy			
City Kansas City	State MO	Zip Code 64153		
Outstanding Balance Beginning This Period			Transaction ID : SD10.4870	
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	157.50	
C. Full Name (Last, First, Middle Initial) of De Law Office of James C. Thom		editor	Nature of Debt (Purpose): Legal and Reporting Services	
Mailing Address 7509 NW Tiffany Springs Pk Suite 300	wy			
City Kansas City	State MO	Zip Code 64153		
Outstanding Balance Beginning This Period	 		Transaction ID: SD10.4875	
0.00 Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
157.50		0.00	157.50	
SUBTOTALS This Period This Page (optional	l)		630.00	
TOTALS This Period (last page this line num	ber only) ····		·	
TOTAL OUTSTANDING LOANS from Sched	·			
ADD 2) and 3) and carry forward to appropr	riate line of	Summary Page (last page only)	·	

PAGE 45 OF

FOR LINE NUMBER:

(check only one)

(Use separate schedule(s)

for each

numbered line)

46

9

X 10

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 46 OF
FOR LINE NUMBER:
(check only one)

	9
v	10

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NAME OF COMMITTEE (In Full)

John Mills for Congress

John Mills for Congre	ess		
A. Full Name (Last, First, Middle Initial) of Law Office of James C. Thon	Nature of Debt (Purpose): Legal and Reporting Services		
Mailing Address 7509 NW Tiffany Springs F Suite 300	Pkwy		
City Kansas City	State MO	Zip Code 64153	
Outstanding Balance Beginning This Perio	od		Transaction ID : SD10.4876
0.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
1112.45		0.00	1112.45
Law Office of James C. Thom	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Law Office of James C. Thomas III		
Mailing Address 7509 NW Tiffany Springs P Suite 300	-		
City Kansas City	State MO	Zip Code 64153	
Outstanding Balance Beginning This Perio		I	Transaction ID : SD10.4877
0.00	1		Transaction is . 3510.4077
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
162.50		0.00	162.50
C. Full Name (Last, First, Middle Initial) of I	Debtor or Cro	editor	Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period	od		
Amount Incurred This Period] 1 [Payment This Period	Outstanding Balance at Close of This Period
9 9	-	9 9 9	
SUBTOTALS This Period This Page (option	1274.95		
2) TOTALS This Period (last page this line nu	1904.95		
8) TOTAL OUTSTANDING LOANS from Sche	38563.53		
) ADD 2) and 3) and carry forward to approp	40468.48		