Image# 202107139451021760	Image#	2021	07139	45102	21760
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07/13/2021 10 : 46

PAGE 1 / 56

FFC I	EPORT OF F ND DISBURS For An Authorized	SEMENTS	Office	e Use Only
1. NAME OF TY COMMITTEE (in full)	PE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
John Mills for Congress				
ADDRESS (number and street)	9059 Orlando Avenue			
Check if different				
	Navarre		FL 3256	6
2. FEC IDENTIFICATION NUM	CITY	´▲	STATE	ZIP CODE
C C00565366	3. IS TH REPO	~	AMENDED (A)	STATE ▼ DISTRICT
 4. TYPE OF REPORT (Choose (a) Quarterly Reports: 	e One) (b) 12-Day	PRE-Election Report for the Primary (12P)	: General (12G)	Runoff (12R)
April 15 Quarterly Rep		Convention (12C)	Special (12S)	
October 15 Quarterly		on on	/ Y Y Y Y	in the State of
January 31 Year-End	Report (YE) (c) 30-Day	POST-Election Report for the	ne:	
_		General (30G)	Runoff (30R)	Special (30S)
Termination Report (Th	ER) Electio	on on	/ Y Y Y Y	in the State of
5. Covering Period	/ D D / Y Y Y 01 / 2021	^Y through 0	M / D D / Y 6 30	Y Y Y 2021
I certify that I have examined this Type or Print Name of Treasurer	Report and to the best of Adams, Christopher, , ,	my knowledge and belief it is	s true, correct and con	nplete.
Adams, Signature of Treasurer	Christopher, , ,	[Electronically Filed]	Date	D D / Y Y Y Y 13 / 2021
NOTE: Submission of false, erroneou	s, or incomplete information	may subject the person signir	ig this Report to the pe	nalties of 52 U.S.C. §30109
Office Use Only				EC FORM 3 Revised 05/2016)

Im	nage# 202107139451021	761		
Γ	FEC Form 3 (R	evised 05/2016) C	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 56
	Write or Type Committe John Mills for Co			
F	Report Covering the Pe	eriod: From: 04	/ D D / Y Y Y Y 01 2021	To: M M M / D D / Y Y Y Y 30 / 2021
		-	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (o	ther than loans)		
	(a) Total Contributio (other than loar	ons is) (from Line 11(e))	0.00	805.00
	(b) Total Contributio (from Line 20(d)	on Refunds)	0.00	0.00
		ns (other than loans) (b) from Line 6(a))	0.00	805.00
7.	Net Operating Expe	nditures		
	(a) Total Operating (from Line 17)	Expenditures	805.00	8801.49
	(b) Total Offsets to Expenditures (fr	Operating om Line 14)	0.00	0.00
	(c) Net Operating E (subtract Line 7	Expenditures (b) from Line 7(a))	805.00	8801.49
8.	Cash on Hand at C Reporting Period (fro	ose of om Line 27)	1036.07	
9.	the Committee (Item		0.00	
10). Debts and Obligatio the Committee (Item Schedule C and/or S		65997.49	

For further information contact:

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

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

Image#	2021	07139	4510)21762
mayom	2021	01 133		21102

Γ	EC Form 3 (Revised 05/2016)	TAILED SUMMARY PAGE of Receipts	PAGE 3 / 56
W	Vrite or Type Committee Name		
	John Mills for Congress		
R	Report Covering the Period: From:	/ D D / Y Y Y Y 01 2021 To:	M M / D D / Y Y Y Y 06 30 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	0.00	300.00
	(i) Itemized (use Schedule A)	0.00	505.00
	 (ii) Uniternized (iii) TOTAL of contributions from individuals 	0.00	805.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	805.00
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13.	LOANS: (a) Made or Guaranteed by the		
	Candidate	2000.00	9234.94
	(b) All Other Loans (c) TOTAL LOANS	0.00	0.00
	(add Lines 13(a) and (b))	2000.00	9234.94
14.	OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00 ×
16.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	2000.00	10039.94

of Disbursements PAGE 4 / 56 FEC Form 3 (Revised 05/2016) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 805.00 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))..... 175.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 980.00 8801.49 (add Lines 17, 18, 19(c), 20(d), and 21)

DETAILED SUMMARY PAGE

III. CASH SUMMARY

Image# 202107139451021763

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7	_	7	_	16.07
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7	_	7		2000.00
25.	SUBTOTAL (add Line 23 and Line 24)		7	_	7	-	2016.07
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		7	_	7	_	980.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7	_	7	-	1036.07

~				FOR LINE NUMBER: PAGE 5 OF 56					
SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS			Use separate schedule(s)	(check only one)					
			for each category of the Detailed Summary Page	11a11b11c11d					
			Detailed Summary Fage	12 🗶 13a 13b 14 15					
				person for the purpose of soliciting contributions tee to solicit contributions from such committee.					
	NAME OF COMMITTEE (In Full)								
\bigvee	John Mills for Congress								
K	Full Name (Last, First, Middle Initial)								
Α.	A. MILLS, Ralph, , , III Mailing Address 9059 Orlando Avenue			Date of Receipt					
				04 07 2021					
	City	State	Zip Code	Transaction ID : SA13A.5037					
	Navarre	FL	32566						
	FEC ID number of contributing federal political committee. C Name of Employer Ocd Receipt For: Ele			Amount of Each Receipt this Period					
			1						
			ycle-to-Date	On demand loan					
	Primary General		25359.12						
	Other (specify) v		2000.12						
	Full Name (Last, First, Middle Initial)								
В.				Date of Receipt					
	Mailing Address			M M / D D / Y Y Y Y					
	City	State	Zip Code						
	FEC ID number of contributing	<u> </u>		Amount of Each Descint this Deviad					
	federal political committee.	С		Amount of Each Receipt this Period					
	Name of Employer	Occupation	1						
				Memo Item					
	Receipt For:	Election C	ycle-to-Date						
	Other (specify) ▼								
			9 9 9	-					
	Full Name (Last, First, Middle Initial)								
C.	Mailing Address			Date of Receipt					
	Maining Address			M M / D D / Y Y Y Y					
	City	State	Zip Code						
	FEC ID number of contributing	C		Amount of Foot Dessist this Deviat					
	federal political committee.	С		Amount of Each Receipt this Period					
	Name of Employer	Occupation	1						
	Receipt For:	Election C	ycle-to-Date	Memo Item					
	Primary General		•						
	Other (specify)		y						
Γ				2000.00					
5	UBTOTAL of Receipts This Page (optional)			2000.00					
,	OTAL This Period (last page this line number of	only)		2000.00					

64		Г		ĺ	FOR LINE NUMBER: PAGE 6 OF 56			
	CHEDULE B (FEC Form 3)		Use separate sch	• • •	(check only one)			
IT	EMIZED DISBURSEMENTS		for each category Detailed Summary		× 17 18 19a 19b			
Δ.	w information canied from such Departs and Obstan				20a 20b 20c 21			
	ny information copied from such Reports and Statem for commercial purposes, other than using the name							
	NAME OF COMMITTEE (In Full)							
$ \rangle$	John Mills for Congress							
\square	5							
-	Full Name (Last, First, Middle Initial) Law Office of James C. Thomas III				Date of Disbursement			
Α.	Law Onice of James C. Thomas III							
	Mailing Address 7509 NW Tiffany Springs Pkwy				04 09 2021			
	Suite 300							
	- ,	ate 10	Zip Code		FEC Identification Number			
		iiU	64153					
	Purpose of Disbursement Legal and Reporting Services			001				
	Candidate Name			Category/	Amount of Each Disbursement this Period			
				Туре				
	Office Sought: House Disburseme				175.00			
		Primary	General		Transaction ID : SB17.5030			
	State: District:	uner (sp	ecify) 🔻		Memo Item			
	Full Name (Last, First, Middle Initial)							
В.	Law Office of James C. Thomas III				Date of Disbursement			
	Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300		05 / D D / Y Y Y Y 2021					
	-)	ate	Zip Code		FEC Identification Number			
		MO	64153					
	Purpose of Disbursement Legal and Reporting Services			001	C			
	Candidate Name			Category/	Amount of Each Disbursement this Period			
				Type				
	Office Sought: House Disburseme				455.00			
		Primary	General		Transaction ID : SB17.5032			
	State: District:	uner (sp	ecify) 🔻		Memo Item			
	Full Name (Last, First, Middle Initial)							
C	Law Office of James C. Thomas III				Date of Disbursement			
υ.					M M / D D / Y Y Y			
	Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300			06 02 2021				
	5	tate MO	Zip Code		FEC Identification Number			
	Purpose of Disbursement	64153		С				
	Legal and Reporting Services Candidate Name							
					Amount of Each Disbursement this Period			
	Office Sought: House Disburseme	ent For: Primary	General		175.00			
		rimary Other (sp			Transaction ID : SB17.5034			
	State: District:		▼		Memo Item			
	SUBTOTAL of Disbursements This Page (optional)				► 805.00			
	TOTAL This Period (last page this line number only)							
	TAL THIS FEROU (LASE PAGE THIS HERE NUMBER ONLY)				805.00			

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 7 OF 56 (check only one) 17 18 19a 19t 20a 20b 20c ¥ 21		
	y information copied from such Reports and Stat				person for the purpose of soliciting contributions		
or	for commercial purposes, other than using the na NAME OF COMMITTEE (In Full) John Mills for Congress	ame and a	address of any poli	ucai committ	ee to solicit contributions from such committee.		
لے ۸.	Full Name (Last, First, Middle Initial) Law Office of James C. Thomas I		Date of Disbursement				
	Mailing Address 7509 NW Tiffany Springs Pkwy Suite 300	04 / D D / Y Y Y Y 09 2021					
	City Kansas City	State MO	Zip Code 64153		FEC Identification Number		
	Purpose of Disbursement payment of incurred debt			001			
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period		
	Senate President	ement For: Primary Other (s	: ☐ General pecify) ▼		175.00 Transaction ID : SB21.5028 Memo Item		
	State: District: Full Name (Last, First, Middle Initial)						
В.	·				Date of Disbursement		
	Mailing Address						
	City	State	Zip Code		FEC Identification Number		
	Purpose of Disbursement	1		· · ·	С		
	Candidate Name			Category/ Type	Amount of Each Disbursement this Period		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (s	General pecify) ▼		Memo Item		
	Full Name (Last, First, Middle Initial)				Data of Dishumana d		
C.	Mailing Address				Date of Disbursement		
	City	State	Zip Code		FEC Identification Number		
	Purpose of Disbursement		С				
	Candidate Name	Category/ Type	Amount of Each Disbursement this Period				
	Office Sought: House Disburse Senate	ement For: Primary	: General				
	State: District:	Other (s	pecify) 🔻		Memo Item		
	SUBTOTAL of Disbursements This Page (optional)			► 175.00		
·	FOTAL This Period (last page this line number on	ıly)			···· ► 175.00		

uge# 202101100401021101					PAGE 8 OF 56	
CHEDULE C (FEC F DANS	orm 3)			Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full) ohn Mills for Congress	6			Transaction	ID : SC/10.4711	
LOAN SOURCE Full Name John Mills for Congre	•	Idle Initial)		Memo Item	ection: 2018 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 Balance	Outstanding at Close of This Perio	
· · · · · · · ·	126.34			0.00	126.34	
TERMS Date Incurred M09 ^M / P21 ^D / Y	Ž017 ^v	C M M / D D	Date Due	Interest Rate (If none, enter 0) 8/2018 ^Y 0.00	Secured:	
List All Endorsers or Guara	antors (if any) t	o Loan Source			% (apr) Yes X No	
1. Full Name (Last, First, N				Name of Employer		
Mailing Address				Decupation		
City State ZIP Code				Amount Guaranteed Dutstanding:		
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Decupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	· · · · · · · · ·	
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	· · · · · · · · · · · · · · · · · · ·	
4. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Decupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	· · · · · · · · ·	
UBTOTALS This Period This OTALS This Period (last page					, 126.34	

ge# 202101100401021100					PAGE 9 OF 56	
HEDULE C (FEC F ANS	orm 3)			Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transaction	n ID : SC/10.4742	
LOAN SOURCE Full Name John Mills for Congre	•	Idle Initial)		Memo Item	-	
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 Balance	Outstanding at Close of This Perio	
	303.01		7	0.00	303.01	
TERMS Date Incurred		Γ	Date Due	Interest Rate (If none, enter 0)	Secured:	
M10 ^M / D04 ^D / Y	ž017 ^v	M M / D D	/ ^Y 11/0	8/2Ŏ18 ^Ÿ 0.00	₩ (apr) Yes X No	
List All Endorsers or Guara		o Loan Source				
1. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y	
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	y	
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:		
4. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:		
JBTOTALS This Period This DTALS This Period (last page					303.01	

age# 202107 133451021703					
HEDULE C (FEC FO ANS	orm 3)		Use separate schedul for each category of t Detailed Summary Pa	the (check only one) X 13a	
ME OF COMMITTEE (In Full)				Transad	ction ID : SC/10.4743
LOAN SOURCE Full Name John Mills for Congre	•	Idle 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 Candidat
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Peric
<u> </u>	4.24	9		0.00	4.24
TERMS Date Incurred M10 ^M / D05 ^D / Y	ž017 ^v	M M / D C	Date Due	50/2010	
List All Endorsers or Guara	ntors (if any) to	o Loan Source			
1. Full Name (Last, First, M	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, Mic	Idle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, Mic	Idle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Mid	Idle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	7
UBTOTALS This Period This F					4.24

.ge# 202101100401021110				I 1	
CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page	11 OF 56 BER: 13a 13b	
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transaction ID : SC/10.4744	
LOAN SOURCE Full Name John Mills for Congre	•	Idle Initial)		Memo Item Election: 2018	
Mailing Address 9059 Orlando Avenue				General Other (specify) ▼	
City Navarre		State FL	ZIP Code 32566	Personal Funds of	of the Candidate
Original Amount of Loan		Cumulative Pa	yment To D	ate Balance Outstanding at Clos	e of This Perio
<u>y</u> y	35.00	<u> </u>		0.00	35.00
TERMS Date Incurred		C	Date Due	Interest Rate S (If none, enter 0)	ecured:
^M 10 ^M / ^D 10 ^D / ^Y	ž017 ^v	M M / D D	/ ^Y 11/C	8/2018 [×] 0.00 % (apr)	Yes X No
List All Endorsers or Guara		o Loan Source	T -		
1. Full Name (Last, First, M	iddle Initial)			Name of Employer	
Mailing Address				Decupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	
2. Full Name (Last, First, Mid	ddle Initial)			Name of Employer	
Mailing Address				Dccupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	· · ·
3. Full Name (Last, First, Mic	dle Initial)			Name of Employer	
Mailing Address				Dccupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	· · ·
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Decupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	
JBTOTALS This Period This F					35.00

CHEDULE C (FEC Form 3) DANS		Use separate sche for each category Detailed Summary	of the (check only one) × 13a		
AME OF COMMITTEE (In Full) John Mills for Congress		Tran	isaction ID : SC/10.4745		
LOAN SOURCE Full Name (Last, First, John Mills for Congress	Middle Initial)	🗌 Memo It	em 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	ment To Date	Balance Outstanding at Close of This Perio		
TERMS Date Incurred M10 ^M / D12 ^D / Y Ž017 Y	M M / D I	ate Due Interest I (If none, e			
List All Endorsers or Guarantors (if any 1. Full Name (Last, First, Middle Initial)	y) to Loan Source	Name of Employer			
Mailing Address		Occupation	Occupation		
City State	e ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
City State	e ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)	·	Name of Employer	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	e ZIP Code	Amount Guaranteed Outstanding:			
SUBTOTALS This Period This Page (option		<u> </u>	21.63		

CHEDULE C (FEC Form 3) OANS			lse separate schedule or each category of th letailed Summary Pag	ie (check only one)
ME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4746
LOAN SOURCE Full Name (Last, First, Mi 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		× Personal Funds of the Candidat
Original Amount of Loan	Cumulative Pa	yment To Date	Bala	nce Outstanding at Close of This Perio
7.95			0.00	7.95
TERMS Date Incurred	C	ate Due	Interest Rate (If none, enter	
M10M / D17D / Y Ž017 Y	M M / D D	[/] ^Y 11/Ŏ8/2Ŏ		
List All Endorsers or Guarantors (if any)	to Loan Source	Nom	a of Employer	
1. Full Name (Last, First, Middle Initial)		Nam	Name of Employer	
Mailing Address		Осси	upation	
City State	State ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Nam	e of Employer	
Mailing Address		Осси	upation	
City State	ZIP Code	Guai	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Nam	e of Employer	
Mailing Address		Осси	upation	
City State	ZIP Code	Guai	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)			e of Employer	
Mailing Address		Осси	upation	
City State	ZIP Code		unt ranteed tanding:	9 1 1 9 1 1 A 1
UBTOTALS This Period This Page (optional).			H	7.95

.ge# 202101100401021110					
CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page	OF 56 X 13a 13b	
ME OF COMMITTEE (In Full) ohn Mills for Congress	6			Transaction ID : SC/10.4747	
LOAN SOURCE Full Name John Mills for Congre	•	Idle Initial)		Memo Item Election: 2018 X Primary General	
Mailing Address 9059 Orlando Avenue				Other (specify)	
City Navarre		State FL	ZIP Code 32566	e Personal Funds of the 0	Candidat
Original Amount of Loan		Cumulative Pa	yment To D	ate Balance Outstanding at Close of T	his Peric
	72.49	,		0.00 72	2.49
TERMS Date Incurred		C	Date Due	Interest Rate Secured (If none, enter 0)	:
^M 10 ^M / ^D 30 ^D / Y	ž017 ^v	M M / D D	/ ^Y 11/C	0.00 % (apr) Yes	×No
List All Endorsers or Guara	antors (if any) to	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, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Dccupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	
4. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	
JBTOTALS This Period This					2.49

.ge# 202107100401021114				· · · · · · · · · · · · · · · · · · ·	
CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page	JMBER:	
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transaction ID : SC/10.4748	
LOAN SOURCE Full Name John Mills for Congre	•	Idle Initial)		Memo Item Election: 2018	
Mailing Address 9059 Orlando Avenue				General Other (specify)	•
City Navarre		State FL	ZIP Code 32566		ds of the Candidate
Original Amount of Loan		Cumulative Pa	yment To D	ate Balance Outstanding at	Close of This Peric
<u> </u>	196.54			0.00	196.54
TERMS Date Incurred		C	Date Due	Interest Rate (If none, enter 0)	Secured:
M10 ^M / D31 ^D / Y	ž017 ^v	M M / D D	/ ^Y 11/0	B/2018 [×] 0.00 % (apr)	Yes X No
List All Endorsers or Guara	,	o Loan Source	I .		
1. Full Name (Last, First, N	liddle Initial)			lame of Employer	
Mailing Address				Occupation	
City	State	ZIP Code	(mount Guaranteed Dutstanding:	
2. Full Name (Last, First, Mi	ddle Initial)			lame of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Mount Guaranteed Dutstanding:	
3. Full Name (Last, First, Mi	ddle Initial)			lame of Employer	
Mailing Address				Occupation	
City	State	ZIP Code	(mount Guaranteed Dutstanding:	
4. Full Name (Last, First, Mi	ddle Initial)			lame of Employer	
Mailing Address				Decupation	
City	State	ZIP Code	(Mount Guaranteed Dutstanding:	
JBTOTALS This Period This DTALS This Period (last page				7 7	196.54

age# 20210/105451021/15					
CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of t Detailed Summary Pag	he (check only one) X 13a	
ME OF COMMITTEE (In Full)				Transac	ction ID : SC/10.4749
LOAN SOURCE Full Name John Mills for Congre	•	Idle 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		Cumulative Pa	lyment To D	Date Bala	ance Outstanding at Close of This Peric
, ,	41.21			0.00	, , , 41.21
TERMS Date Incurred M11 ^M / D01 ^D / Y		M M / D D	Date Due	Interest Rate (If none, enter 08/2018 ^Y 0.	r 0)
List All Endorsers or Guar	antors (if anv) to	o Loan Source			• % (apr) Yes 🗴 No
1. Full Name (Last, First, N				Name of Employer	
Mailing Address				Occupation	
City	State ZIP Code			Amount Guaranteed Outstanding:	y y
2. Full Name (Last, First, M	iddle Initial)			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, Middle Initial)				Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
UBTOTALS This Period This DTALS This Period (last page					41.21

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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 Full) ohn Mills for Congress				Transa	ction ID : SC/10.4750
LOAN SOURCE Full Name John Mills for Congre	•	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 Candidat
Original Amount of Loan		Cumulative Pa	yment To D	ate Bala	ance Outstanding at Close of This Peric
<u> </u>	804.08			0.00	804.08
TERMS Date Incurred		[Date Due	Interest Rat (If none, ente	r 0)
M11M / D05D / Y	ž017 ^v	M M / D D	/ [×] 11/Ċ	8/2018 ^Y 0	.00 % (apr) Yes X No
List All Endorsers or Guara	ntors (if any) to	o Loan Source			
1. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Dccupation	
City	State ZIP Code			Amount Guaranteed Dutstanding:	
2. Full Name (Last, First, Mic	Idle Initial)			Name of Employer	
Mailing Address				Dccupation	
	I	1		Amount	
City	State	ZIP Code		Guaranteed Dutstanding:	y
3. Full Name (Last, First, Mic	Idle Initial)		I	Name of Employer	
Mailing Address			(Dccupation	
				Amount Guaranteed	
City	State	ZIP Code	(Dutstanding:	-g - 1 - g - 1 - m - 1
4. Full Name (Last, First, Mic	Idle Initial)			Name of Employer	
Mailing Address			(Dccupation	
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	y
JBTOTALS This Period This F					804.08

CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page			
AME OF COMMITTEE (In Full) Iohn Mills for Congress				Transact	tion ID : SC/10.4751	
LOAN SOURCE Full Name (Last, F John Mills for Congress	ïrst, Mid	dle Initial)		🗌 Memo Item	Election: 2018 x Primary General	
Mailing Address 9059 Orlando Avenue					Other (specify)	
City Navarre		State FL	ZIP Code 32566	e	X Personal Funds of the Candidat	
Original Amount of Loan	08	Cumulative Pa	yment To D	Date Balar 0.00	nce Outstanding at Close of This Perio	
TERMS Date Incurred M11M / D08 D / Y Ž017	Y	M M / D D	Date Due	Interest Rate (If none, enter 08/2018 [×] 0.0	0)	
List All Endorsers or Guarantors (i 1. Full Name (Last, First, Middle Ini	• ·	b Loan Source		Name of Employer		
Mailing Address				Occupation		
City	State	te ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Init	ial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Init	ial)	·		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:	9 1 9 1 1 1	
SUBTOTALS This Period This Page (op TOTALS This Period (last page in this				L	19.08 *	

ge# 202101100401021110					
CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page	OF 56	
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transaction ID : SC/10.4752	
LOAN SOURCE Full Name John Mills for Congre	•	Idle Initial)		Memo Item Election: 2018	
Mailing Address 9059 Orlando Avenue				General Other (specify)	
City Navarre		State FL	ZIP Code 32566	Personal Funds of the	e Candidat
Original Amount of Loan		Cumulative Pa	yment To D	ate Balance Outstanding at Close of	This Peric
	93.73		,	0.00	93.73
TERMS Date Incurred			Date Due	Interest Rate Secur (If none, enter 0)	red:
M11M / D08D / Y	2017		/ / 11/C	0/2010	íes 🗶 No
List All Endorsers or Guara	antors (if any) to	o Loan Source			
1. Full Name (Last, First, N	liddle Initial)		1	Name of Employer	
Mailing Address				Dccupation	
City	State ZIP Code			Amount Guaranteed Dutstanding:	
2. Full Name (Last, First, Mi	ddle Initial)		1	Name of Employer	
Mailing Address			(Dccupation	
				Amount	_
City	State	ZIP Code		Guaranteed Dutstanding:	
3. Full Name (Last, First, Mi	ddle Initial)		1	Name of Employer	
Mailing Address			(Dccupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	
4. Full Name (Last, First, Middle Initial)				Name of Employer	
Mailing Address				Dccupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	
JBTOTALS This Period This					93.73

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CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	ie (check only one) ¥ 13a	
ME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4753	
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)	
City Navarre	State FL	ZIP Code 32566	9	X Personal Funds of the Candidat	
Original Amount of Loan	Cumulative Pa	lyment To D	Date Bala	nce Outstanding at Close of This Peric	
6.00			0.00	6.00	
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter		
M 12 ^M / ^D 21 ^D / ^Y Ž017 ^Ť ^Y	M M / D D	° ′ [°] 11/Ò	Ŭ8/2Ŭ18 ^Ÿ 0.0		
List All Endorsers or Guarantors (if any) t	o Loan Source		Name of Employer		
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 Guara		Amount Guaranteed Outstanding:	y 1 y 1 y 1	
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:	9 1 9 1 7 1	
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CHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	(check only one)	
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transact	tion ID : SC/10.4754
LOAN SOURCE Full Name John Mills for Congre	•	Idle Initial)		Memo Item	Election: 2018
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 Balar	nce Outstanding at Close of This Perio
<u> </u>	308.00		7	0.00	308.00
TERMS Date Incurred		C	Date Due	Interest Rate (If none, enter	
M12 ^M / D22 ^D / Y	ž017 ^v	M M / D D	/ ^Y 11/0	í8/2Ŏ18 ^Ÿ 0.0	
List All Endorsers or Guara		o 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, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	γ
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Mi	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Dutstanding:	g 1 1 g 1 1 a 1
JBTOTALS This Period This DTALS This Period (last page					308.00

CHEDULE C (FEC Form 3) OANS		Use separate schedule for each category of th Detailed Summary Pag	(check only one) X 13a			
IAME OF COMMITTEE (In Full) John Mills for Congress				tion ID : SC/10.4755		
LOAN SOURCE Full Name (Last, First, Mid John Mills for Congress	dle 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	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Period 56.34		
TERMS Date Incurred M12 ^M / D24 ^D / Y Ž017 Y	M M / D D	Date Due	Interest Rate (If none, enter 08/2018 ^Y 0.0	$\frac{0}{20} \qquad 0 \qquad$		
List All Endorsers or Guarantors (if any) to 1. Full Name (Last, First, Middle Initial)	b 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			
City State	ZIP Code		Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial)	ŀ		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)			H	7 7 56.34 7 7 7		

				PAGE 23 OF 56	
HEDULE C (FEC Form 3) DANS		for	Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full)			Transac	ction ID : SC/10.4756	
LOAN SOURCE Full Name (Last, First, M John Mills for Congress	iddle 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 Date	Bala	ance Outstanding at Close of This Perio	
208.00			0.00	208.00	
TERMS Date Incurred	Γ	Date Due	Interest Rate (If none, enter		
M12 ^M / D29D / Y Ž017 Y	M M / D D	[/] [¥] 11/Ŏ8/2Ŏ1	8 ^Y 0.	00 % (apr) Yes X N	
List All Endorsers or Guarantors (if any)	to Loan Source	Nieree	of Freedower		
1. Full Name (Last, First, Middle Initial)		Name	Name of Employer		
Mailing Address		Occup			
City State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	oation		
City State	ZIP Code	Guara	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name	Name of Employer		
Mailing Address		Осси	oation		
City State	ZIP Code		nt inteed anding:	y y	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code		nt inteed anding:	y y	
UBTOTALS This Period This Page (optional)				208.00	

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page	-
ME OF COMMITTEE (In Full)		Transaction ID : SC/10.4678	
LOAN SOURCE Full Name (Last, First, Mi John Mills for Congress	ddle Initial)	Memo Item Election: 2018 X Primary General	
Mailing Address 9059 Orlando Avenue		Other (specify)	
City Navarre	State FL	IP Code 32566 Personal Funds of the C	Candidat
Original Amount of Loan	Cumulative Pa	ent To Date Balance Outstanding at Close of T	nis Perio
400.00		0.00 400	.00
TERMS Date Incurred	C	e Due Interest Rate Secured (If none, enter 0)	
M01M / D17D / Y Ž01Ř Y	M M / D D	[/] ^Y 11/08/2018 ^Y 0.00 % (apr) Yes	×No
List All Endorsers or Guarantors (if any) t	to Loan Source	Name of Employer	
1. Full Name (Last, First, Middle Initial)			
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 (optional).			.00

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CHEDULE C (FEC Form 3) DANS				Use separate schedule for each category of the Detailed Summary Pag	he (check only one)	
ME OF COMMITTEE (In Full)				Transac	tion ID : SC/10.4709	
LOAN SOURCE Full Name (Last, F	First, Mie	ddle Initial)		Memo Item	Election: 2018	
John Mills for Congress				_	Primary General	
Mailing Address 9059 Orlando Avenue					Other (specify)	
City		State	ZIP Cod	e		
Navarre		FL	32566		Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	yment To E	Date Bala	ance Outstanding at Close of This Perio	
2231.	10			0.00	2231.10	
TERMS Date Incurred		C	Date Due	Interest Rate		
M03 ^M / D31 ^D / Y Ž018	Y	M M / D D	′ ¥11/	(lf none, enter Ď8/2Ď18 ^Y 0.		
List All Endorsers or Guarantors (if any) t	o Loan Source				
1. Full Name (Last, First, Middle In	itial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	ay 1 ay 1 ay 1	
2. Full Name (Last, First, Middle Init	tial)			Name of Employer		
Mailing Address				Occupation		
			-	Amount		
City	State	ZIP Code		Guaranteed Outstanding:	9 9 9 9 9 9	
3. Full Name (Last, First, Middle Init	tial)			Name of Employer		
Mailing Address				Occupation		
			-	Amount		
City	State	ZIP Code		Guaranteed Outstanding:	y 1 9 1 1 1 1	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
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	lle Initial)		Use separate schedule for each category of th Detailed Summary Pag Transac	^{ne} (check only one) × 13a	
	lle Initial)			tion ID : SC/10.4829	
	lle Initial)		Memo Item	1	
				Election: 2018 X Primary General	
:				Other (specify)	
	State FL	ZIP Code 32566)	Personal Funds of the Candidate	
	Cumulative Pa	yment To D	ate Bala	I Ince Outstanding at Close of This Peric	
7		,	0.00	150.67	
	C	Date Due	Interest Rate (If none, enter		
M	M / D D	/ 108/2	28/2Ŏ18 ^Ÿ 0.	00 % (apr) Yes 🗴 No	
any) to	Loan Source				
al)		1	Name of Employer		
		(Occupation		
State ZIP Code			Amount Guaranteed Outstanding:		
al)		1	Name of Employer		
		(Occupation		
tate	ZIP Code		Amount Guaranteed Outstanding:		
al)		1	Name of Employer		
		(Occupation		
tate	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
tate	ZIP Code		Guaranteed	y y	
				150.67	
	any) to ial) tate al) tate al) tate al) tate al) tate al) tate	Cumulative Pa Cumulative Pa Cumula	Cumulative Payment To D Z Date Due M / D / Y08/2 any) to Loan Source ial) I tate ZIP Code / al) I / tate ZIP Code / anologoool / / anologoool / / / anologoool /	Cumulative Payment To Date Bala 7 0.00 Date Due Interest Rate (If none, enter M M M M M M D V V08/28/2018 O.00 any) to Loan Source ial) Name of Employer Occupation Amount Guaranteed Outstanding: al) Name of Employer Occupation Amount Guaranteed Outstanding: al) Name of Employer Occupation Amount Guaranteed Outstanding: al) Name of Employer Itate ZIP Code Occupation Amount Guaranteed Outstanding: al) Name of Employer Occupation Amount Guaranteed Outstanding: al) Name of Employer Occupation Amount Guaranteed Outstanding: al) Name of Employer	

CHEDULE C (FEC Form 3) DANS				Use separate schedul for each category of t Detailed Summary Pa	the (check only one) × 13a	
ME OF COMMITTEE (In Full)				Transad	ction ID : SC/10.4815	
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) ▼	
			ZIP Code 32566		Personal Funds of the Candidat	
Original Amount of Loan		Cumulative Pa	yment To D	ate Bala	ance Outstanding at Close of This Perio	
<u> </u>	8500.00			700.00	7800.00	
TERMS Date Incurred		Γ	Date Due	Interest Rat (If none, ente		
M04M / D24D / Y Ž0)18́ ^v	M M / D D	2 ′ ¥11/ð	8/2Ŏ18 ^Ÿ 0	.00 % (apr) Yes X No	
List All Endorsers or Guarant		o Loan Source				
1. Full Name (Last, First, Mide	dle Initial)		ľ	Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code		(Amount Guaranteed Dutstanding:	7	
2. Full Name (Last, First, Middle Initial)			1	Name of Employer		
Mailing Address			(Occupation		
City	City State ZIP Code		(Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Midd	e Initial)		1	Name of Employer		
Mailing Address			(Dccupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	7 7	
4. Full Name (Last, First, Midd	e Initial)		1	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	g 1 1 g 1 1 x 1	
UBTOTALS This Period This Pag OTALS This Period (last page in					7800.00	

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CHEDULE C (FEC Form 3) OANS				Use separate schedu for each category of Detailed Summary Pa	the (check only one)	
ME OF COMMITTEE (In Full)				Transa	action ID : SC/10.4830	
LOAN SOURCE Full Name John Mills for Congre	•	Idle Initial)		Memo Iten	n Election: 2018	
Mailing Address 9059 Orlando Avenue					Other (specify)	
City Navarre		State FL	ZIP Code 32566	9	Personal Funds of the Candidat	
Original Amount of Loan		Cumulative P	ayment To D	Date Ba	Iance Outstanding at Close of This Perio	
	1475.00			0.00	1475.00	
TERMS Date Incurred	k		Date Due	Interest Ra (If none, ent		
M06M / D15D / Y	Ž018 ^Y	M M / D	D / Y08/2	ž8/2Ŏ18 ^Ÿ	0.00 % (apr) Yes 🗶 No	
List All Endorsers or Guar		o Loan Source		Name of Employer		
1. Full Name (Last, First, N	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
2. Full Name (Last, First, M	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	7	
3. Full Name (Last, First, M	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, M	iddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
JBTOTALS This Period This DTALS This Period (last page					1475.00	

				PAGE 29 OF 56	
CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag	e(s) FOR LINE NUMBER:	
ME OF COMMITTEE (In Full) ohn Mills for Congress			Transac	tion ID : SC/10.4831	
LOAN SOURCE Full Name (Last, First, Mic	dle Initial)		Memo Item	Election: 2018	
John Mills for Congress				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	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perio	
600.00	,		0.00	600.00	
TERMS Date Incurred	D	Date Due	Interest Rate (If none, enter		
M06 ^M / D15 ^D / Y Ž018 Y	M M / D D	[/] ^v 08/2			
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)			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 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		
City State	ZIP Code		Amount Guaranteed Outstanding:	y y	
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HEDULE C (FEC Form 3) ANS			Use separate schedule for each category of th Detailed Summary Pag	ie (check only one) × 13a	
ME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4832	
LOAN SOURCE Full Name (Last, First, Mi 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		Personal Funds of the Candidat	
Original Amount of Loan	Cumulative Pa	yment To Da	ate Bala	nce Outstanding at Close of This Perio	
35.10			0.00	35.10	
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter	0)	
^M 06 ^M / ^D 27 ^D / ^Y Ž018 ^Y	M M / D D	[/] ^Y 08/Ž	8/2Ŏ18 [×] 0.0		
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address			Dccupation		
City State	State ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		C	Dccupation		
City State	State ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		١	Name of Employer		
Mailing Address		(Dccupation		
City State	ate ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
City State	ZIP Code	(Amount Guaranteed Dutstanding:	g 1 1 g 1 1 x 1	
UBTOTALS This Period This Page (optional) OTALS This Period (last page in this line onl				35.10	

ZIP Cod 32566 Payment To I Date Due	Date Balance Outstanding at Close of		
32566 Payment To I , , , Date Due	☐ Memo Item Election: 2018 ¥ Primary General Other (specify) ▼ de		
32566 Payment To I , , , Date Due	Image: Second state Image: Second state Image: Second state Image: Second state </td <td></td>		
32566 Payment To I , , , Date Due	de Other (specify) ▼ de Personal Funds of the Date Balance Outstanding at Close of		
32566 Payment To I , , , Date Due	Date Balance Outstanding at Close of		
, , Date Due		Thia Daria	
_	0.00 20	This Feno	
_		00.00	
D / ^Y 08/	Interest Rate Secure (If none, enter 0)	ed:	
	/ž8/2ŏ18 [×] 0.00 % (apr) Ye	es 🗴 No	
irce			
	Name of Employer		
	Occupation		
)	Amount Guaranteed Outstanding:		
	Name of Employer		
	Occupation		
)	Amount Guaranteed Outstanding:		
	Name of Employer		
	Occupation		
•	Amount Guaranteed Outstanding:		
	Name of Employer		
Mailing Address			
	Amount Guaranteed Outstanding:		
		Outstanding: 7 Name of Employer Occupation Amount Guaranteed Outstanding: Name of Employer Amount Guaranteed Outstanding:	

CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page FOR LINE NUMBER: (check only one) 13a		
AME OF COMMITTEE (In Full) John Mills for Congress				Transact	tion ID : SC/10.4842	
LOAN SOURCE Full Name (John Mills for Congres	•	Idle 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 Candidat	
Original Amount of Loan	2000.00	Cumulative Pa	yment To D	0.00	nce Outstanding at Close of This Peric 2000.00	
	2018 ^Y	M M / D D	Date Due	Interest Rate (If none, enter 28/2018 ^Y 0.0	0)	
List All Endorsers or Guarar 1. Full Name (Last, First, Mid		o Loan Source		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
2. Full Name (Last, First, Mid	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 7 1	
3. Full Name (Last, First, Mid	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 1 9 1 7 1	
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	
SUBTOTALS This Period This P					2000.00	
TOTALS This Period (last page i					vard to appropriate line of Summary.	

CHEDULE C (FEC Form 3) DANS			Use separate schedule(s) for each category of the Detailed Summary Page			
AME OF COMMITTEE (In Full) John Mills for Congress			Transac	tion ID : SC/10.4874		
LOAN SOURCE Full Name (Last, First, Mic John Mills for Congress	ddle 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 500.00	Cumulative Pa	yment To D	Date Bala 0.00	nce Outstanding at Close of This Perioc 500.00		
TERMS Date Incurred M03 ^M / P18 ^D / Y Ž019 Y	M M / D D	Date Due	Interest Rate (If none, enter 17/2Ŏ20 ^Y 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 Amount			
City	State ZIP Code			Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial) Mailing Address			Name of Employer Occupation Amount Guaranteed			
City State 3. Full Name (Last, First, Middle Initial)	State ZIP Code		Outstanding:			
Mailing Address			Occupation			
City State	State ZIP Code		Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City	ZIP Code		Amount Guaranteed Outstanding:	y		
SUBTOTALS This Period This Page (optional)	/)			500.00		

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CHEDULE C (FEC Form 3) DANS				Use separate schedule for each category of t Detailed Summary Pag	e(s) he (check only one)	
ME OF COMMITTEE (In Full ohn Mills for Congres	,			Transac	ction ID : SC/10.4106	
LOAN SOURCE Full Name MILLS, Ralph, John,	•	ddle Initial)		🗌 Memo Item	Election: 2014 X Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City Miramar Beach		State FL	ZIP Code 32550	9	Personal Funds of the Candidat	
Original Amount of Loan		Cumulative Pa	ayment To D	Date Bala	ance Outstanding at Close of This Peric	
<u> </u>	5000.00		7	0.00	5000.00	
TERMS Date Incurre	d	I	Date Due	Interest Rate (If none, enter		
^M 06 ^M / ^D 24 ^D / ^Y	2014) / Y	Y Y Y 0.	.00 % (apr) Yes X No	
List All Endorsers or Guar		o Loan Source		Name of Employer		
1. Full Name (Last, First, N	viddie milial)					
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, N	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, N	liddle 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	
JBTOTALS This Period This					5000.00	

					PAGE 35 OF 56	
CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of the Detailed Summary Pag	e(s) FOR LINE NUMBER:	
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transac	ction ID : SC/10.4116	
LOAN SOURCE Full Name (Last, First, Middle Initial) MILLS, Ralph, John, , III				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	Cumulative Payment To Date Ba			ance Outstanding at Close of This Perio 4234.94		
TERMS Date Incurred			Date Due	Interest Rate (If none, enter		
	2014		D / Y	Y Y Y Y	% (apr) Yes X No	
List All Endorsers or Guarar		o Loan Source				
1. Full Name (Last, First, Mic	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
2. Full Name (Last, First, Mid	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Mid	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Mid	dle Initial)	I		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
UBTOTALS This Period This P OTALS This Period (last page i					4234.94	

		PAGE 36 OF 56
SCHEDULE C (FEC Form 3) LOANS		Use separate schedule(s) for each category of the Detailed Summary Page
NAME OF COMMITTEE (In Full) John Mills for Congress		Transaction ID : SC/10.4197
LOAN SOURCE Full Name (Last, First MILLS, Ralph, John, , III	, Middle Initial)	Memo Item Election: Primary General
Mailing Address 1940 Boardwalk Drive		Other (specify)
City Miramar Beach	State FL	ZIP Code 32550 X Personal Funds of the Candidat
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Perio
1000.00		0.00 1000.00
TERMS Date Incurred M09 ^M / P08 ^D / Y Ž015 Y	D M M / D D	ate Due Interest Rate Secured: (If none, enter 0) Yes X N
List All Endorsers or Guarantors (if a	av) to Loan Source	
1. Full Name (Last, First, Middle Initial		Name of Employer
Mailing Address		Occupation
City	te ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City Sta	te ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	te ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (option TOTALS This Period (last page in this line		
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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CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of th Detailed Summary Pag	le (check only one) X 13a	
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transact	tion ID : SC/10.4299	
LOAN SOURCE Full Name (Last, Find MILLS, Ralph, John, , III	irst, Mid	dle Initial)		Memo Item	Election: 2016 Y Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City Miramar Beach		State FL	ZIP Cod 32550	e	X Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pay	yment To [Date Bala	nce Outstanding at Close of This Peric	
3850.6	64			0.00	3850.64	
TERMS Date Incurred		C	Date Due	Interest Rate (If none, enter		
^M 01 ^M / ^D 02 ^D / ^Y Ž016	Y	/ M / D D	/ Y	Y Y Y	% (apr) Yes 🗴 No	
List All Endorsers or Guarantors (if	f any) to	Loan Source				
1. Full Name (Last, First, Middle Ini	tial)			Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code			Amount Guaranteed Outstanding:	y	
2. Full Name (Last, First, Middle Initi	ial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Middle Initi	al)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
4. Full Name (Last, First, Middle Initi	al)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9	
UBTOTALS This Period This Page (op OTALS This Period (last page in this I					3850.64	

CHEDULE C (OANS	(FEC Form 3)			Use separate schedule for each category of th	he (check only one) × 13a	
IAME OF COMMITTE	· ,			Detailed Summary Pag	etion ID : SC/10.4337	
	Full Name (Last, First, Mic	ddle Initial)		Memo Item	Election: 2016	
Mailing Address 1940 Boardwalk Driv					General Other (specify) ▼	
City Miramar Beach		State FL	ZIP Code 32550	9	Personal Funds of the Candidate	
Original Amount c		Cumulative Pa	yment To D		ance Outstanding at Close of This Period	
TERMS Dat	345.33 e Incurred		Date Due	0.00 Interest Rate		
M06 ^M / D30 ^t	o / Y Ž016 Y	M M / D D	/ Y	(If none, enter Y Y Y O.		
List All Endorsers	or Guarantors (if any) t	o Loan Source				
	t, First, Middle Initial)			Name of Employer		
Mailing Address	S			Occupation		
City	y 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	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	
	riod This Page (optional) (last page in this line only				345.33	
Carry outstanding ba	lance only to LINE 3, Sch	nedule D, for this	s line. If no	o Schedule D, carry forv	vard to appropriate line of Summary.	

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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 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 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
· · · · · · ·	1500.00			0.00	1500.00
TERMS Date Incurred	d	C	Date Due	Interest Rat (If none, ente	
M07M / D18D / Y	Ž016 ^Y	M M / D D	/ Y De	ěmaňd ^v 0	.00 % (apr) Yes X No
List All Endorsers or Guar		b Loan Source			
1. Full Name (Last, First, N	Middle Initial)			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	te ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, M	liddle Initial)	1		Name of Employer	
Mailing Address				Occupation	
City	State	State ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 y 1
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				·	1500.00 7 7 7

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CHEDULE C (FEC Form 3) OANS				Use separate schedu for each category of Detailed Summary Pa	the (check only one) × 13a	
ME OF COMMITTEE (In Full)				Transa	action ID : SC/10.4343	
LOAN SOURCE Full Name (I MILLS, Ralph, John, ,		ddle Initial)		Memo Iten	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 Pa	yment To E	Date Ba	I lance Outstanding at Close of This Perio	
· · · · · · ·	300.00			0.00	300.00	
TERMS Date Incurred		C	Date Due	Interest Ra (If none, ente		
M09 ^M / D06 ^D / Y 2	2016 ^Y	M M / D D	/ Y De	ěmaňd ^v	0.00 % (apr) Yes ✗ №	
List All Endorsers or Guaran	tors (if any) t	o Loan Source				
1. Full Name (Last, First, Mic	Idle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Mide	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	State ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Mide	dle Initial)	·		Name of Employer		
Mailing Address				Occupation		
City	State	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	
UBTOTALS This Period This Pa					300.00	

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CHEDULE C (FEC Form 3) OANS				Use separate schedu 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
Mailing Address 1940 Boardwalk Drive					Other (specify) V
City Miramar Beach		State FL	ZIP Cod 32550	e	Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pag	yment To D	Date Ba	ance Outstanding at Close of This Perio
· · · · · · · · · · · · · · · · · · ·	500.00			0.00	500.00
TERMS Date Incurred	ł	C	Date Due	Interest Rat (If none, ente	
M09M / D23D / Y	Ž016 ^Y	M M / D D	/ Y De		0.00
List All Endorsers or Guar	· • •	o Loan Source			
1. Full Name (Last, First, N	1iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, M	ddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ate ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, M	ddle Initial)	•		Name of Employer	
Mailing Address				Occupation	
City	State	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
JBTOTALS This Period This					500.00 7 7 7 7

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CHEDULE C (FEC Form 3) OANS				Use separate schedul for each category of t Detailed Summary Pa	the (check only one)	
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transa	ction ID : SC/10.4351	
LOAN SOURCE Full Name (I 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	;	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>	500.00		5	0.00	500.00	
TERMS Date Incurred		C	Date Due	Interest Rat (If none, ente		
M05M / D02D / Y 2	2017 ^Y	M M / D D	/ Y De	maňd ^v 0	.00 % (apr) Yes X No	
List All Endorsers or Guaran		o Loan Source		long of Employer		
1. Full Name (Last, First, Mic	Idle Initial)			Name of Employer		
Mailing Address			(Dccupation		
City	State ZIP Code			Amount Guaranteed Dutstanding:	y	
2. Full Name (Last, First, Mide	dle Initial)			Name of Employer		
Mailing Address				Dccupation		
City	State	ZIP Code		Amount Guaranteed Dutstanding:	7	
3. Full Name (Last, First, Mide	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	y	
4. Full Name (Last, First, Mide	dle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code	(Amount Guaranteed Dutstanding:	7	
JBTOTALS This Period This Pa DTALS This Period (last page i					, , , 500.00	

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CHEDULE C (FEC Form 3) OANS				Use separate schedul for each category of t Detailed Summary Pag	e(s) FOR LINE NUMBER: (check only one)
ME OF COMMITTEE (In Full				Transad	ction ID : SC/10.4357
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 Peric
· · · · · · · · · · · · · · · · · · ·	150.00			0.00	150.00
TERMS Date Incurred	b		Date Due	Interest Rate (If none, ente	
M07M / D26D / Y	2017		D / Y Y	Y Y Y O	.00 % (apr) Yes 🗴 No
List All Endorsers or Guar 1. Full Name (Last, First, M		o Loan Source		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:	
3. Full Name (Last, First, M	iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, First, M	iddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
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HEDULE C (FEC Form 3) ANS		Use separate schedule for each category of th Detailed Summary Pag	1e (check only one)			
ME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4358		
LOAN SOURCE Full Name (Last, First, Mi MILLS, Ralph, John, , III	ddle 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	yment To D	Date Bala	nce Outstanding at Close of This Perio		
750.00			0.00	750.00		
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter			
M09 ^M / D13 ^D / Y Ž017 Y	M M / D D	/ Y	Y Y Y 0.			
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to 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			
City State	State ZIP Code		Amount Guaranteed Outstanding:	y y		
3. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	te 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)			H	750.00		

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CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page	56 13a 13b	
ME OF COMMITTEE (In Full)				Transaction ID : SC/10.4811		
LOAN SOURCE Full Name (La MILLS, Ralph, John, , II		ddle Initial)		Memo Item Election: 2018 Memo Item Frimary General		
Mailing Address 1940 Boardwalk Drive				Other (specify) V		
City Miramar Beach		State FL	ZIP Code 32550	e Personal Funds of the Can	didat	
Original Amount of Loan		Cumulative Pa	yment To D	Date Balance Outstanding at Close of This	Perio	
<u> </u>	16.95			0.00 16.95	,	
TERMS Date Incurred		C	Date Due	Interest Rate Secured: (If none, enter 0)		
M04M / D07D / Y Ž0	18 ^Y	M M / D D	° ′ [°] 11/0	08/2018 [×] 0.00 % (apr) Yes 2	× No	
List All Endorsers or Guarante		o Loan Source				
1. Full Name (Last, First, Midd	le Initial)			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:		
3. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle	e Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
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CHEDULE C (FEC Form 3) OANS				Use separate schedule for each category of t Detailed Summary Pag	he (check only one) X 13a	
ME OF COMMITTEE (In Full) ohn Mills for Congress				Transac	ction ID : SC/10.4899	
LOAN SOURCE Full Name (Last, MILLS, Ralph, John, , III	First, Mio	ddle Initial)		Memo Item	Election: Primary General	
Mailing Address 1940 Boardwalk Drive					Other (specify)	
City Miramar Beach		State FL	ZIP Code 32550	e	Personal Funds of the Candidat	
Original Amount of Loan		Cumulative Pa	yment To E	Date Bala	ance Outstanding at Close of This Peric	
300	.00			0.00	300.00	
TERMS Date Incurred		Ľ	Date Due	Interest Rate (If none, enter		
M07 ^M / D12 ^D / Y Ž019	Υ	M M / D D	/ Y	Y Y Y O.	00 % (apr) Yes 🗶 No	
List All Endorsers or Guarantors	,	o Loan Source				
1. Full Name (Last, First, Middle I	nitial)			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:	y y	
3. Full Name (Last, First, Middle In	itial)			Name of Employer		
Mailing Address				Occupation		
City	City State ZIP Code			Amount Guaranteed Outstanding:	· · · · · · · · ·	
4. Full Name (Last, First, Middle In	itial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
UBTOTALS This Period This Page (OTALS This Period (last page in this					300.00	

age# 202101100401021000					
CHEDULE C (FEC Form 3) DANS		Use separate schedu for each category of Detailed Summary P	the (check only one) X 13a		
ME OF COMMITTEE (In Full) ohn Mills for Congress		Trans	action ID : SC/10.4900		
LOAN SOURCE Full Name (Last, Firs MILLS, Ralph, John, , III	t, Middle Initial)	Memo Iter	n Election: Primary General		
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 Pa	yment To Date Ba	alance Outstanding at Close of This Peric		
1200.00		0.00	1200.00		
TERMS Date Incurred	[Date Due Interest Ra (If none, en			
M07M / D18D / Y Ž019 Y	M M / D D		0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if a	• ·	Newsoft			
1. Full Name (Last, First, Middle Initia	1)	Name of Employer			
Mailing Address		Occupation			
City Sta	te ZIP Code	Amount Guaranteed Outstanding:	y		
2. Full Name (Last, First, Middle Initial)		Name of Employer	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	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 Sta	te ZIP Code	Amount Guaranteed Outstanding:	y		
UBTOTALS This Period This Page (option OTALS This Period (last page in this line			1200.00		

CHEDULE C (FEC Form 3) DANS			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/10.4901	
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	e	Personal Funds of the Candidate	
Original Amount of Loan 1500.00	Cumulative Pay	yment To D	Date Bala	nce Outstanding at Close of This Perioc 1500.00	
TERMS Date Incurred M09M / P10P / Y Ž019 Y	C	Date Due	Interest Rate (If none, enter 9 Y Y O.	00 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	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	7 7 7 7	
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	
CUBTOTALS This Period This Page (optional)				1500.00	

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					PAGE 49 OF 56	
HEDULE C (FEC F ANS	orm 3)			Use separate schedule(s) for each category of the Detailed Summary Page		
ME OF COMMITTEE (In Full)				Transac	ction ID : SC/10.4929	
LOAN SOURCE Full Name MILLS, Ralph, , , III	(Last, First, Mid	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		Cumulative Pa	ayment To D		ance Outstanding at Close of This Perio	
TERMS Date Incurred	1500.00		Date Due	0.00 Interest Rate	1500.00	
TERMS Date Incurred M12 ^M / D30 ^D /				(If none, enter	n 0) 00 0/ / / No. X. X. N.	
List All Endorsers or Guara	antors (if any) to	b Loan Source				
1. Full Name (Last, First, M	liddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
2. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1	
4. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	g	
JBTOTALS This Period This DTALS This Period (last page					1500.00	

				PAGE 50 OF 56	
CHEDULE C (FEC Form 3) DANS			Use separate schedule for each category of th Detailed Summary Pag	1e (check only one) X 13a	
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	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	Cumulative Pay	yment To D	Do Date Balance Outstanding at Close of This Period		
12000.00			0.00	12000.00	
TERMS Date Incurred	D	ate Due	Interest Rate (If none, enter		
M04M / D17D / Y Ž02Ŏ Y	M M / D D	/ Y	Y Y Y	% (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		
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			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	
COTALS This Period This Page (optional)	/)			12000.00	

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ME OF COMMITTEE (In Full) ohn Mills for Congress LOAN SOURCE Full Name MILLS, Ralph, , , III Mailing Address 9059 Orlando Avenue		dle Initial)		for each category of th Detailed Summary Pag Transac		
Dhn Mills for Congress LOAN SOURCE Full Name MILLS, Ralph, , , III		dle Initial)		Transac	tion ID : SC/10.4966	
MILLS, Ralph, , , III	(Last, First, Mid	dle Initial)				
• • • •				Memo Item	Election: 2020	
Mailing Address				Primary General		
3033 Onando Avende					Other (specify) v	
City		State	ZIP Code	9		
Navarre		FL	32566		Personal Funds of the Candidate	
Original Amount of Loan		Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perio	
<u> </u>	5359.12	7		0.00	5359.12	
TERMS Date Incurred		Γ	Date Due	Interest Rate (If none, enter		
M07 ^M / D10 ^D / Y	Ž02Ŏ Ÿ	M M / D D) / Y Y			
List All Endorsers or Guara	intors (if any) to	b Loan Source				
1. Full Name (Last, First, M	iddle Initial)		1	Name of Employer		
Mailing Address			(Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y	
2. Full Name (Last, First, Mid	ddle Initial)		1	Name of Employer		
Mailing Address			(Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	7	
3. Full Name (Last, First, Mid	ddle Initial)		1	Name of Employer		
Mailing Address			(Occupation		
				Amount Guaranteed		
City	State	ZIP Code		Outstanding:	y	
4. Full Name (Last, First, Mic	ddle Initial)	1	1	Name of Employer		
Mailing Address			(Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:	9 1 9 1 9 1 9	
JBTOTALS This Period This I					5359.12	
JIALS INIS Period (last page	in this line only)		• L		

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page
AME OF COMMITTEE (In Full) Iohn Mills for Congress		Transaction ID : SC/10.4992
LOAN SOURCE Full Name (Last, First, MILLS, Ralph, , , III	Middle Initial)	Memo Item Election: 2020 Primary General
Mailing Address 9059 Orlando Avenue		Other (specify) v
City Navarre	State FL	ZIP Code 32566 Personal Funds of the Candidat
Original Amount of Loan 1495.00	Cumulative Pa	ment To Date Balance Outstanding at Close of This Peric
TERMS Date Incurred M08M / D04D / Y 2020 Y	M M / D D	ate Due Interest Rate (If none, enter 0) Secured: / ¥12/31/2Ď20¥ 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if an 1. Full Name (Last, First, Middle Initial)	y) to Loan Source	Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation Amount
City State	e ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	ł	Name of Employer
Mailing Address		Occupation
City	e ZIP Code	Amount Guaranteed Outstanding:
SUBTOTALS This Period This Page (option		7 7 7
TOTALS This Period (last page in this line Carry outstanding balance only to LINE 3.		line. If no Schedule D, carry forward to appropriate line of Summary.

CHEDULE C (FEC Form DANS ME OF COMMITTEE (In Full) ohn Mills for Congress LOAN SOURCE Full Name (Last MILLS, Ralph, , , III Mailing Address 9059 Orlando Avenue		ddle Initial)		Use separate schedule for each category of the Detailed Summary Page Transac	he (check only one) × 13a	
Dhn Mills for Congress LOAN SOURCE Full Name (Last MILLS, Ralph, , , III Mailing Address	, First, Mic	ddle Initial)		Transac	tion ID : SC/10.4983	
MILLS, Ralph, , , III	, First, Mio	ddle Initial)				
Mailing Address 9059 Orlando Avenue				Memo Item	Election: 2020 X Primary General	
				General Other (specify) ▼		
City State ZIP Coo Navarre FL 32566				Personal Funds of the Candic		
Original Amount of Loan 1500.00				Date Balance Outstanding at Close of This Period		
TERMS Date Incurred M08M / D05D / Y 2020		M M / D D	Date Due	51/2020		
List All Endorsers or Guarantors 1. Full Name (Last, First, Middle		o Loan Source	1	Name of Employer		
Mailing Address				Occupation		
City	State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle	nitial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle	nitial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
4. Full Name (Last, First, Middle	nitial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
UBTOTALS This Period This Page DTALS This Period (last page in th					1500.00	

CHEDULE C (FEC F	Form 3)			Use separate schedule			
OANS				for each category of the Detailed Summary Pag	^{1e} (check only one) X 13a		
IAME OF COMMITTEE (In Full) John Mills for Congres	•			Transac	tion ID : SC/10.5016		
LOAN SOURCE Full Name MILLS, Ralph, , , III	e (Last, First, Mide	dle Initial)		🗌 Memo Item	Election: 2022 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	Original Amount of Loan 1500.00				Date Balance Outstanding at Close of This Period		
TERMS Date Incurred M11 ^M / P19 ^D / Y	d Ž02Ŏ ^Y		Date Due	Interest Rate (If none, enter 0.0			
List All Endorsers or Guar 1. Full Name (Last, First, N		Loan Source		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 Amount			
City	State	ZIP Code		Guaranteed Outstanding:			
3. Full Name (Last, First, M	iddle Initial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			
4. Full Name (Last, First, M	iddle Initial)	·		Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:			
SUBTOTALS This Period This				H	1500.00		
					vard to appropriate line of Summary.		

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CHEDULE C (FEC Form 3) OANS				Use separate schedule(s) for each category of the Detailed Summary Page			
	AITTEE (In Full) Dr Congress				tion ID : SC/10.5037		
IOAN SOUR MILLS, R	CE Full Name (Last, First, I alph, , , III	Middle Initial)		Memo Item	Election:		
Mailing Addre 9059 Orlando	ess Avenue				General Other (specify) ▼		
City Navarre		State FL	ZIP Code 32566	9	Personal Funds of the Candidat		
Original Am	ount of Loan	Cumulative Pa	ayment To D		nce Outstanding at Close of This Peric		
TERMS	2000.00 Date Incurred		Date Due	0.00 Interest Rate	2000.00		
M04 ^M /	□07□ / ¥ Ž02↑ ¥			(If none, enter	0) 00 0/ ()) / (
	orsers or Guarantors (if any e (Last, First, Middle Initial)) to Loan Source	,	Name of Employer			
Mailing A	· · · · · · · · · · · · · · · · · · ·			Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	9 9		
2. Full Name	(Last, First, Middle Initial)			Name of Employer			
Mailing Ac	dress			Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7 7 7 7		
3. Full Name	(Last, First, Middle Initial)			Name of Employer			
Mailing Ac	dress			Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	y		
4. Full Name	(Last, First, Middle Initial)			Name of Employer			
Mailing Ac	dress			Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	· · · · · · · ·		
UBTOTALS TH	is Period This Page (optiona	al)		• C	2000.00		
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SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full) John Mills for Congres A. Full Name (Last, First, Middle Initial) of De Law Office of James C. Thoma	btor or Cred	litor		PAGE 56 OF 56 FOR LINE NUMBER: (check only one) 9 10 x 10		
Mailing Address 7509 NW Tiffany Springs Pky Suite 300 City Kansas City	vy State MO	Zip Code 64153				
Outstanding Balance Beginning This Period 175.00		04100	Transacti	on ID : SD10.5026		
Amount Incurred This Period		Payment This Period 175.		ng Balance at Close of This Period		
B. Full Name (Last, First, Middle Initial) of Deb Mailing Address	Nature of D	lebt (Purpose):				
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	btor or Crec	litor	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)		···· •	0.00		
4) ADD 2) and 3) and carry forward to appropri			nly) 🕨	7 · · · 7 · · · · ·		

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