01/17/2017 16 : 18

PAGE 1 / 15

FFC I	REPORT ND DISI For An Aut	-	MENTS			Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT		xample: If typin ver the lines.	g, type	12FE4M5	
John Mills for Congres	S					
ADDRESS (number and street)	1940 Boardwalk [Drive				
Check if different than previously	Miramar Beach					32550
reported. (ACC)						
2. FEC IDENTIFICATION NU	JMBER 🔻				STATE	ZIP CODE
C C00565366		3. IS THIS REPORT	× NEW (N)	OR	(A)	ED STATE ▼ DISTRICT
4. TYPE OF REPORT (Cha (a) Quarterly Reports: April 15 Quarterly F	Report (Q1)	b) 12-Day PR	E -Election Repo Primary (12P) Convention (General (12 Special (12	
July 15 Quarterly R October 15 Quarter		Election or	/ M M /	D D		in the State of
✗ January 31 Year-En	d Report (YE)	c) 30-Day PO	ST-Election Rep	ort for the	:	
			General (30G)	Runoff (30	R) Special (30S)
Termination Report	(TER)	Election or	M M /	D D	YYYYY	in the State of
5. Covering Period	M / D D / 01	Y Y Y Y 2016	through	M 12	4 / D D / 31	Y Y Y Y 2016
I certify that I have examined th Type or Print Name of Treasurer	Adams, Christop		nowledge and l	belief it is a	true, correct and	complete.
Adar Signature of Treasurer	ns, Christopher, , ,		[Electronically]	Filed]	Date	/ D D / Y Y Y Y 17 2017
NOTE: Submission of false, errone	ous, or incomplete	information may	subject the pers	son signing	this Report to the	e penalties of 52 U.S.C. §30109
Office Use Only						FEC FORM 3 (Revised 05/2016)

Im	age# 2	201701179041409912		
Г	_	FEC Form 3 (Revised 05/2016)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 15
		or Type Committee Name n Mills for Congress		
I	Repor	t Covering the Period: From:	10 / D D / Y Y Y Y 10 01 / 2016 To	$\frac{12^{M}}{12} \begin{pmatrix} D & D \\ 31 \end{pmatrix} \begin{pmatrix} Y & Y & Y \\ 2016 \end{pmatrix} $
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	0.00	380.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	380.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	375.00	8966.29
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	375.00	8966.29
8.		sh on Hand at Close of porting Period (from Line 27)	148.13	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	16730.91	

For further information contact:

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

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

Image# 201701179041409913

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

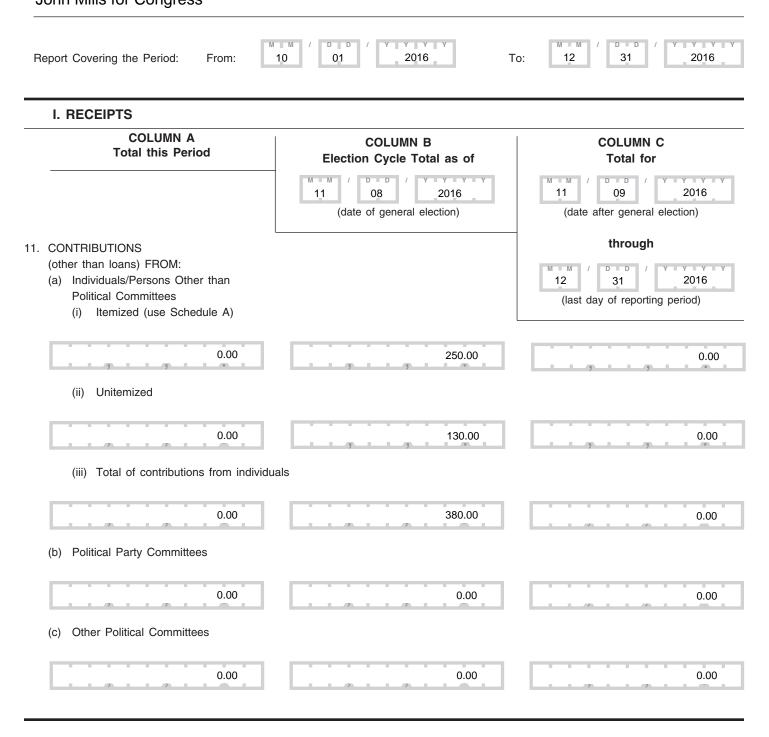
• If the candidate participated in the general election, use this form for the 30-day Post-General report.

• If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name John Mills for Congress

FEC Form 3 (Revised 07/05)



Image# 201701179041409914

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

. . .

	FEC Form 3 (Revised 1/01)		PAGE 4 / 15
	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
	(d) The Candidate		
	0.00	0.00	0.00
	(e) TOTAL CONTRIBUTIONS (other than loa	ns) (add Lines 11(a)(iii), (b), (c) and (d))	
	0.00	380.00	0.00
12.	TRANSFERS FROM OTHER AUTHORIZED C	COMMITTEES	
	0.00	0.00	0.00
13.	LOANS: (a) Made or Guaranteed by the Candidate		
	0.00	7495.97	0.00
	(b) All Other Loans		
	0.00	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))		
	0.00	7495.97	0.00
14.	OFFSETS TO OPERATING EXPENDITURES	(Refunds, rebates, etc.)	
	0.00	0.00	0.00
15.	OTHER RECEIPTS (Dividends, Interest, etc.)		
	0.00	0.00	0.00
16.	TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 a	and 15)	
	0.00	7875.97	0.00

		CTION DETAILED SUMMARY	PAGE
FEC Form 3 (Re		port of Receipts and Disbursements	PAGE 5 / 15
Write or Type Committe			
John Mills for Cor	ngress		
Report Covering the Per	riod: From: 1	0 / D D / Y Y Y Y 2016	To: 12 / 31 / Y Y Y Y 2016
II. DISBURSEME	INTS		
	UMN A his Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPEN	IDITURES		
	375.00	8966.29	0.00
18. TRANSFERS TO OT	HER AUTHORIZED CO	MMITTEES	
	0.00	0.00	0.00
19. LOAN REPAYMENTS (a) Of Loans Made	S: or Guaranteed by the C	andidate	
	0.00	0.00	0.00
(b) Of All Other Loa	ins		
	0.00	0.00	0.00
(c) TOTAL LOAN R	EPAYMENTS (add Lines	s 19(a) and 19(b))	
	0.00	0.00	0.00
20. REFUNDS OF CONT (a) Individuals/Perso	RIBUTIONS TO:	Committees	
	0.00	0.00	0.00
(b) Political Party Co	ommittees		
	0.00	0.00	0.00

Image# 201701179041409916		
	ECTION DETAILED SUMMARY	PAGE
R FEC Form 3 (Revised 1/01)	eport of Receipts and Disbursements	PAGE 6 / 15
COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(c) Other Political Committees (such as PA	Cs)	
0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (ad	dd Lines 20(a), (b) and (c))	
0.00	0.00	0.00
21. OTHER DISBURSEMENTS		
0.00	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 1	8, 19(c), 20(d) and 21)	
375.00	8966.29	0.00
III. NET CONTRIBUTIONS (OTHER	THAN LOANS)	
(Note: Substitute in lieu of Line #6	of Summary Page for this report only; subtr	act Line 20(d) from Line 11(e))
0.00	380.00	0.00
IV. NET OPERATING EXPENDITUR	ES	
(Note: Substitute in lieu of Line	#7 of Summary Page for this report only; su	btract Line 14 from Line 17)
375.00	8966.29	0.00
V. CASH SU	IMMARY	

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7		7	523.13
24.	TOTAL RECIEPTS THIS PERIOD (from Line 16)		-		- -	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		7		7	523.13
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		,		,	375.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7	148.13

	and Statements m		y of the ry Page used by any	FOR LINE NUMBER: (check only one) PAGE 7 OF 15 Image: X 17 18 19a 19b 20a 20b 20c 21 person for the purpose of soliciting contributions see to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A. Law Office of James C. Tho Mailing Address 7509 NW Tiffany Spring: Suite 300	s Pkwy	Zin Code		Date of Disbursement
City Kansas City Purpose of Disbursement Legal and Reporting Services Candidate Name John Mills for Congress Office Sought: X House Senate President State: FL District: 01	Disbursement For X Primary Other (s		001 Category/ Type	FEC Identification Number C C00565366 Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.4346 Memo Item
State: FL District: 01 Full Name (Last, First, Middle Initial) B. Mailing Address				Date of Disbursement
City Purpose of Disbursement Candidate Name Office Sought: House Senate President State: District:	Disbursement For Primary Other (s		Category/ Type	FEC Identification Number C Amount of Each Disbursement this Period Memo Item
Full Name (Last, First, Middle Initial) C. Mailing Address				Date of Disbursement
City Purpose of Disbursement Candidate Name Office Sought: House	State Disbursement For	Zip Code	Category/ Type	FEC Identification Number C Amount of Each Disbursement this Period
State: District:	Primary Other (s	specify)		Memo Item
SUBTOTAL of Disbursements This Page TOTAL This Period (last page this line nu				

•				PAGE 8 OF 15		
CHEDULE C (FEC Form 3) OANS			Use separate schedule(s) for each category of the Detailed Summary Page			
ME OF COMMITTEE (In Full)			Transac	tion ID : SC/10.4106		
LOAN SOURCE Full Name (Last, First, Mi MILLS, Ralph, John, , III	ddle Initial)		Memo Item	Election: 2014 Primary General		
Mailing Address 1940 Boardwalk Drive				Other (specify)		
City Miramar Beach	State FL	ZIP Code 32550	9	Personal Funds of the Candidat		
Original Amount of Loan	Cumulative Pa	yment To D	Date Bala	I ance Outstanding at Close of This Perio		
5000.00			0.00	5000.00		
TERMS Date Incurred	C	Date Due	Interest Rate (If none, enter			
M06 ^M / D24 ^D / Y Ž014 Y	M M / D D) / Y /		00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any)	to Loan Source					
1. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	ZIP Code		Amount Guaranteed Outstanding:	7 7 7 7		
2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	ZIP Code		Amount Guaranteed Outstanding:	y y		
3. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	ZIP Code		Amount Guaranteed Outstanding:	y y		
4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
City State	ZIP Code		Amount Guaranteed Outstanding:	y y		
UBTOTALS This Period This Page (optional)				5000.00		

uge# 201101110041400010			
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/10.4116
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
4234.94		0.00	4234.94
TERMS Date Incurred	Γ	Date Due Interest Ra (If none, en	
M07 ^M / D18 ^D / Y Ž014 Y	M M / D D		% (apr) Yes X No
List All Endorsers or Guarantors (if a	•		
1. Full Name (Last, First, Middle Initia	1)	Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	y
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Sta	ate ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This Page (option OTALS This Period (last page in this line	-		4234.94

Jlative Paymen 7 Date	0.00 1000.00
ZIF 3 ulative Paymer 7 Date	Image: Memo Item Election: Primary General Other (specify) ▼ P Code 2550 Image: Memo Item Election: Primary General Other (specify) ▼ Image: P Code 2550 Image: P Code 2550 Image: P Code 0.00 Image: P Code 0.00 Image: P Code 0.00 Image: P Code Image: P Code
ZIF 3 ulative Paymer 7 Date	Primary General Other (specify) ▼ P Code 2550 x Personal Funds of the Candia nt To Date Balance Outstanding at Close of This Pa 0.00 1000.00
Jlative Paymen 7 Date	Code 2550 Personal Funds of the Candi Ant To Date Balance Outstanding at Close of This Pa 0.00 1000.00
Jlative Paymen 7 Date	2550 Personal Funds of the Candion nt To Date Balance Outstanding at Close of This Personal 0.00 1000.00
Date	0.00 1000.00
	<u> </u>
	Due Interest Rate Secured
	(If none, enter 0)
/ 0 0 /	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Source	
	Name of Employer
	Occupation
Code	Amount Guaranteed Outstanding:
	Name of Employer
	Occupation
Code	Amount Guaranteed Outstanding:
	Name of Employer
	Occupation
Code	Amount Guaranteed Outstanding:
	Name of Employer
	Occupation
Code	Amount Guaranteed Outstanding:
	1000.00

.g					
CHEDULE C (FEC Form 3) .OANS			Use separate schedule for each category of the Detailed Summary Pag	he (check only one) X 13a	
ME OF COMMITTEE (In Full)				Transac	ction ID : SC/10.4299
LOAN SOURCE Full Name (I MILLS, Ralph, John, ,		Idle Initial)		🗌 Memo Item	Election: 2016
Mailing Address 1940 Boardwalk Drive					General 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	Pate Bala	ance Outstanding at Close of This Perio
· · · · · · · · ·	3850.64	<u> </u>	7	0.00	3850.64
TERMS Date Incurred		C	Date Due	Interest Rate (If none, enter	
M01 ^M / D02 ^D / Y 2	2016 ^Y	M M / D D) / Y Y	YYYY	% (apr) Yes ✗ №
List All Endorsers or Guaran		o Loan Source	П.		
1. Full Name (Last, First, Mic	Idle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	7 7 7 7
2. Full Name (Last, First, Mide	dle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Mide	dle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
4. Full Name (Last, First, Mide	dle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 1 y 1 1 x 1
JBTOTALS This Period This Pa DTALS This Period (last page i					3850.64

CHEDULE C (FEC	Form 3)			Use separate schedule	PAGE 12 OF 15	
OANS				for each category of th Detailed Summary Pag	1e (check only one) X 13a	
NAME OF COMMITTEE (In F John Mills for Congre	,			Transac	tion ID : SC/10.4337	
LOAN SOURCE Full Name (Last, First, Middle Initial) MILLS, Ralph, John, , III				Memo Item Election: 2016 X 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	345.33	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Perioc 345.33	
TERMS Date Incur M06 ^M / 30 ^D /	Y Ž016 Y		Date Due	Interest Rate (If none, enter	0) 00 0/ ()) / (
List All Endorsers or Gu 1. Full Name (Last, First		Loan Source		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation Amount		
City	State	ZIP Code		Guaranteed	· · · · · · · · · · · · · · · · · · ·	
3. Full Name (Last, First,	Middle Initial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y	
SUBTOTALS This Period Tr					345.33	
Carry outstanding balance	only to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.	

age# 201101110041400020			
CHEDULE C (FEC Form 3) DANS		Use separate scher for each category o Detailed Summary	of the (check only one) X 13a
ME OF COMMITTEE (In Full) ohn Mills for Congress		Tran	saction ID : SC/10.4342
LOAN SOURCE Full Name (Last, First MILLS, Ralph, John, , III	st, Middle Initial)	Memo Ite	em Election: 2018
Mailing Address 1940 Boardwalk Drive			Other (specify) ▼
City Miramar Beach	State FL	ZIP Code 32550	Personal Funds of the Candidat
Original Amount of Loan	Cumulative Pa	ayment To Date E	Balance Outstanding at Close of This Peric
1500.00	,	0.00	1500.00
TERMS Date Incurred		Date Due Interest F (If none, e	
M07M / D18D / Y Ž016 Y	M M / D	D [/] Y Děmaňd Y	0.00 % (apr) Yes 🗶 No
List All Endorsers or Guarantors (if	•.		
1. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initia)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
3. Full Name (Last, First, Middle Initia)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
4. Full Name (Last, First, Middle Initia)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
UBTOTALS This Period This Page (opti OTALS This Period (last page in this lir		· · · · ·	, , , , , , , , , , , , , , , , , , , ,

age# 201101110041400024			
HEDULE 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/10.4343
LOAN SOURCE Full Name (Last, First MILLS, Ralph, John, , III	st, Middle Initial)	Memo Iter	n Election: 2018
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	lyment To Date Ba	alance Outstanding at Close of This Peric
300.00	,	0.00	300.00
TERMS Date Incurred	[Date Due Interest Ra (If none, ent	
M09 ^M / D06 ^D / Y Ž016 Y	M M / D E	Demand	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if a			
1. Full Name (Last, First, Middle Initia	al)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	7 7 7 7
2. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	Name of Employer	
Mailing Address		Occupation	
City St	ate ZIP Code	Amount Guaranteed Outstanding:	y
UBTOTALS This Period This Page (opti OTALS This Period (last page in this lin			300.00

				PAGE 15 OF 15	
SCHEDULE C (FEC Form 3) OANS			Use separate schedule for each category of th Detailed Summary Pag	e(S) FOR LINE NUMBER:	
NAME OF COMMITTEE (In Full) John Mills for Congress			Transac	tion ID : SC/10.4344	
LOAN SOURCE Full Name (Last, First, Mic 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	e	Personal Funds of the Candidate	
Original Amount of Loan	Cumulative Pay			nce Outstanding at Close of This Period	
500.00 TERMS Date Incurred		Date Due	0.00 Interest Rate	500.00	
M09 ^M / D23 ^D / Y Ž016 Y	M M / D D	_	(If none, enter émaňd ^Y 0.	0) 00 0/ / / / / / / / /	
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:	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 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:	· · · · · · · · ·	
SUBTOTALS This Period This Page (optional).			H	500.00	
TOTALS This Period (last page in this line only Carry outstanding balance only to LINE 3, Sch				16730.91	