

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Gloria Bromell Tinubu for Congress

ADDRESS (number and street)

PO Box 51348

Check if different than previously reported. (ACC)

Myrtle Beach

SC

29579

2. FEC IDENTIFICATION NUMBER ▼

C C00508242

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

SC

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on MM / DD / YYYY in the State of

(c) 30-Day POST-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY through MM / DD / YYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr Joseph Emerson Washington

Signature of Treasurer Mr Joseph Emerson Washington [Electronically Filed] Date

MM / DD / YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Gloria Bromell Tinubu for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2012 To: M M / D D / Y Y Y Y 09 / 30 / 2012

	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))....	116396.72	190826.28
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	116396.72	189576.28
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	121744.47	458504.75
(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)).....	121744.47	458504.75
8. Cash on Hand at Close of Reporting Period (from Line 27).....	26074.90	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	289700.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Gloria Bromell Tinubu for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	53302.01	86488.01
(ii) Unitemized.....	23594.71	41308.27
(iii) TOTAL of contributions from individuals ▶	76896.72	127796.28
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	39500.00	55500.00
(d) The Candidate.....	0.00	7530.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	116396.72	190826.28
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	36500.00	302000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	36500.00	302000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	103.37	353.37
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	153000.09	493179.65

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	121744.47	458504.75
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	6300.00	6300.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	6300.00	6300.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	1250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1250.00
21. OTHER DISBURSEMENTS .....	0.00	1050.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	128044.47	467104.75

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1119.28
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	153000.09
25. SUBTOTAL (add Line 23 and Line 24).....	154119.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	128044.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	26074.90

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Adeyemi Adesokan**

Mailing Address 3502 Estates Ln SE

City Smyrna State GA Zip Code 30080-6871

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : C8734274**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Nancy Anderson**

Mailing Address 8235 Timber Ridge Rd

City Conway State SC Zip Code 29526

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 18 / 2012

**Transaction ID : C8696564**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Anderson**

Mailing Address 8235 Timber Ridge Rd

City Conway State SC Zip Code 29526

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : C8761968**

Amount of Each Receipt this Period  
50.00

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

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

2800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Billy Best**

Mailing Address 5103 N Englewood Dr

City Cheverly	State MD	Zip Code 20785-3839
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer State of Maryland - Coppin State Unive	Occupation Director of Student Affairs - College
--	---

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 03 / 2012

**Transaction ID : C8715443**

Amount of Each Receipt this Period  
850.00

**B.** Full Name (Last, First, Middle Initial)  
**Billy Best**

Mailing Address 5103 N Englewood Dr

City Cheverly	State MD	Zip Code 20785-3839
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FEC ID number of contributing federal political committee. **C**

Name of Employer State of Maryland - Coppin State Unive	Occupation Director of Student Affairs - College
--	---

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : C8729294**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Joseph D Brawley**

Mailing Address 139 Brawley Rd

City Hopkins	State SC	Zip Code 29081
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FEC ID number of contributing federal political committee. **C**

Name of Employer retired	Occupation Information Requested
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Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : C8761958**

Amount of Each Receipt this Period  
1000.00

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

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

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas C. Brittain**

Mailing Address 4614 Oleander Dr.

City Myrtle Beach	State SC	Zip Code 29577
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Attorney
-----------------------------------	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 20 / 2012

**Transaction ID : C8711577**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Kathleen S Britton**

Mailing Address 620 Ansley St.

City Florence	State SC	Zip Code 29505
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FEC ID number of contributing federal political committee. **C**

Name of Employer Florence Darlington Tech	Occupation Faculty
--	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : C8755667**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Eric Brock**

Mailing Address 1080 Brazos Heights Rd

City Mineral Wells	State TX	Zip Code 76067-1730
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Orthopedic Surgeon
-----------------------------------	----------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 31 / 2012

**Transaction ID : C8714067**

Amount of Each Receipt this Period  
250.00

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

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

1750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**M. Gino Brogdon Sr**

Mailing Address 174 Walthall St SE

City Atlanta State GA Zip Code 30316-1340

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation neutral

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 25 / 2012

**Transaction ID : C8604888**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**David Brown**

Mailing Address 1941 Highway 177

City Wallace State SC Zip Code 29596-5313

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
236.36

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 18 / 2012

**Transaction ID : C8762272**

Amount of Each Receipt this Period  
208.59

\* In-Kind: event supplies

**C.** Full Name (Last, First, Middle Initial)  
**David Brown**

Mailing Address 1941 Highway 177

City Wallace State SC Zip Code 29596-5313

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
236.36

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2012

**Transaction ID : C8711119**

Amount of Each Receipt this Period  
27.77

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

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

486.36

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jerline R Burney**

Mailing Address 3321 W Napoleon Ave

City Tampa State FL Zip Code 33611-5408

FEC ID number of contributing federal political committee. **C**

Name of Employer COOLIDGE REALTY, INC. Occupation Real Estate Agent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 07 / 2012

**Transaction ID : C8564291**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Charles Campbell**

Mailing Address 4079 Highway 17 Business

City Murrells Inlet State SC Zip Code 29576

FEC ID number of contributing federal political committee. **C**

Name of Employer Dead Dog Saloon Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 17 / 2012

**Transaction ID : C8761942**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
**Nancy Cave**

Mailing Address 106 Jutland Ln

City Georgetown State SC Zip Code 29440

FEC ID number of contributing federal political committee. **C**

Name of Employer SC COASTAL CONSERVATION LEAGUES Occupation Office Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C8761938**

Amount of Each Receipt this Period  
300.00

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

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

850.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Clyburn**

Mailing Address 7819 12th St NW

City Washington State DC Zip Code 20012-1322

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : C8727262**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Donna Collins**

Mailing Address 804 Creyk Ct

City Conway State SC Zip Code 29526

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : C8711569**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**Donna Collins**

Mailing Address 804 Creyk Ct

City Conway State SC Zip Code 29526

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C8761966**

Amount of Each Receipt this Period  
50.00

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

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

650.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Hal Cottingham**

Mailing Address 125 W 501

City Galivants Ferry State SC Zip Code 29544

FEC ID number of contributing federal political committee. **C**

Name of Employer none Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C8744574**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**William Doar Jr**

Mailing Address 232 Queen St

City Georgetown State SC Zip Code 29440

FEC ID number of contributing federal political committee. **C**

Name of Employer McNair Law Firm Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : C8785442**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Clifford Eby**

Mailing Address 10825 Alloway Drive

City Potomac State MD Zip Code 20854

FEC ID number of contributing federal political committee. **C**

Name of Employer Parsons Brickhoff Occupation Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 12 / 2012

**Transaction ID : C8762373**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jo Edwards**

Mailing Address 954 Willis Mill Rd SW

City Atlanta State GA Zip Code 30311-2433

FEC ID number of contributing federal political committee. **C**

Name of Employer JREA, LLC Occupation PR, Event Management Firm

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C8755356**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Anita R. Estell**

Mailing Address 1651 N Portal Dr. NW

City Washington State DC Zip Code 20012

FEC ID number of contributing federal political committee. **C**

Name of Employer Polsinelli Shughart Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : C8762376**

Amount of Each Receipt this Period  
 700.00

**C.** Full Name (Last, First, Middle Initial)  
**Anita R. Estell**

Mailing Address 1651 N Portal Dr. NW

City Washington State DC Zip Code 20012

FEC ID number of contributing federal political committee. **C**

Name of Employer Polsinelli Shughart Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : C877035**

Amount of Each Receipt this Period  
 300.00

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

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

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Donald L. Fowler**

Mailing Address 2725 Devine St Ste 1

City Columbia	State SC	Zip Code 29205
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Fowler Communications	Occupation Chairman
---	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 24 / 2012

**Transaction ID : C8604887**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Donald L. Fowler**

Mailing Address 2725 Devine St Ste 1

City Columbia	State SC	Zip Code 29205
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Fowler Communications	Occupation Chairman
---	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 09 / 2012

**Transaction ID : C8632595**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**James M Freeman**

Mailing Address 1824 Labor Camp Road

City Mount Pleasant	State SC	Zip Code 29464
------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ILA	Occupation Longshoreman
-------------------------	----------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : C8755783**

Amount of Each Receipt this Period  
500.00

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

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

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 14 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joan Furlong**

Mailing Address 527 Mockingbird Ave

City Myrtle Beach State SC Zip Code 29577-5028

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 22 / 2012**

**Transaction ID : C8755518**

Amount of Each Receipt this Period  
**300.00**

**B.** Full Name (Last, First, Middle Initial)  
**Joan Furlong**

Mailing Address 527 Mockingbird Ave

City Myrtle Beach State SC Zip Code 29577-5028

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **425.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**09 / 29 / 2012**

**Transaction ID : C8752627**

Amount of Each Receipt this Period  
**100.00**

**C.** Full Name (Last, First, Middle Initial)  
**Buddy Grant**

Mailing Address 148 Congaree Ln

City Georgetown State SC Zip Code 29440-2245

FEC ID number of contributing federal political committee. **C**

Name of Employer Apria Healthcare Occupation PST

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**08 / 24 / 2012**

**Transaction ID : C8707112**

Amount of Each Receipt this Period  
**300.00**

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

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

**700.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 15 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joyce Greene**

Mailing Address 4428 Live Oak Dr

City Little River      State SC      Zip Code 29566-9125

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A      Occupation Retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 09 / 2012

**Transaction ID : C8722553**

Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Evelyn Guille**

Mailing Address 1441 North Cashua Drive

City Florence      State SC      Zip Code 29501

FEC ID number of contributing federal political committee. **C**

Name of Employer retired      Occupation retired

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : C8755624**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Barbara Hake**

Mailing Address 147 Glenmoor Drive

City Conway      State SC      Zip Code 29526

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested      Occupation Information Requested

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : C8698406**

Amount of Each Receipt this Period  
 100.00

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

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

850.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Barbara Hake**

Mailing Address 147 Glenmoor Drive

City State Zip Code  
Conway SC 29526

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 27 / 2012

**Transaction ID : C8761967**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Harpootlian**

Mailing Address PO Box 1090

City State Zip Code  
Columbia SC 29202-1090

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
self attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 27 / 2012

**Transaction ID : C8708491**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jaime Harrison**

Mailing Address 11 Arsenal Hill Ct

City State Zip Code  
Columbia SC 29201-2766

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Podesta GROUP Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 12 / 2012

**Transaction ID : C8566148**

Amount of Each Receipt this Period  
500.00

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

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

3050.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Leon Harvey**

Mailing Address 640 E McIver Rd

City State Zip Code  
Florence SC 29506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C8761993**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Sally Hattig**

Mailing Address 3556 Ash St

City State Zip Code  
Myrtle Beach SC 29577-5019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 04 / 2012

**Transaction ID : C8626262**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Sally Hattig**

Mailing Address 3556 Ash St

City State Zip Code  
Myrtle Beach SC 29577-5019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 24 / 2012

**Transaction ID : C8762001**

Amount of Each Receipt this Period  
50.00

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

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

550.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sally Hattig</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 27 / 2012
Mailing Address 3556 Ash St		<b>Transaction ID : C8761931</b>
City Myrtle Beach	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00	

Full Name (Last, First, Middle Initial) <b>B. James D. Henderson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 16 / 2012
Mailing Address PO Box 261954 3719 Indago run		<b>Transaction ID : C8569506</b>
City Conway	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Coastal Carolina University	Occupation Professor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 425.00	

Full Name (Last, First, Middle Initial) <b>C. James D. Henderson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 18 / 2012
Mailing Address PO Box 261954 3719 Indago run		<b>Transaction ID : C8696533</b>
City Conway	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Coastal Carolina University	Occupation Professor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 425.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James D. Henderson**

Mailing Address PO Box 261954  
3719 Indago run

City Conway State SC Zip Code 29528-6054

FEC ID number of contributing federal political committee. **C**

Name of Employer Coastal Carolina University Occupation Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
425.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 25 / 2012

**Transaction ID : C8799449**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**James D. Henderson**

Mailing Address PO Box 261954  
3719 Indago run

City Conway State SC Zip Code 29528-6054

FEC ID number of contributing federal political committee. **C**

Name of Employer Coastal Carolina University Occupation Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
425.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2012

**Transaction ID : C8761960**

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
**Russell Holliday**

Mailing Address 125 Highway 501 W

City Galivants Ferry State SC Zip Code 29544-7601

FEC ID number of contributing federal political committee. **C**

Name of Employer Holliday Associates Occupation Timber Production

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : C8740949**

Amount of Each Receipt this Period  
2500.00

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

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

2625.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 20 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Amanda Hollinger**

Mailing Address 5145 E. Liberty Park

City State Zip Code  
North Charleston SC 29405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Trident Tech Fundraiser

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 06 / 2012

**Transaction ID : C8755370**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Billie F C Houghton**

Mailing Address 43 Blockade Drive

City State Zip Code  
Pawleys Island SC 29585

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
retired Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 20 / 2012

**Transaction ID : C8777029**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Sara T Hudson**

Mailing Address 410 Wood Street

City State Zip Code  
Georgetown SC 29440

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : C8761998**

Amount of Each Receipt this Period  
100.00

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

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

800.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 21 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Imar Hutchins Esq.**

Mailing Address 740 St. Nicholas Avenue  
1100 Florida Ave NW

City Washington State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C**

Name of Employer Florida Avenue Grill Occupation owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : C8782889**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Jerue**

Mailing Address 30 Parkwood Ave

City Charleston State SC Zip Code 29403-4332

FEC ID number of contributing federal political committee. **C**

Name of Employer The Art Institute of Charleston Occupation College president

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : C8721570**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Arthur Lance Jr**

Mailing Address 2903 Dunbar Rd

City Georgetown State SC Zip Code 29440-2049

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Ed Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2012

**Transaction ID : C8568874**

Amount of Each Receipt this Period  
1000.00

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

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

1500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Shelia Lercara**

Mailing Address 3616 Linden St

City Myrtle Beach	State SC	Zip Code 29577
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Coastal Carolina University	Occupation Admin.
---	----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2012

**Transaction ID : C8755513**

Amount of Each Receipt this Period  
550.00

**B.** Full Name (Last, First, Middle Initial)  
**Shelia Lercara**

Mailing Address 3616 Linden St

City Myrtle Beach	State SC	Zip Code 29577
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Coastal Carolina University	Occupation Admin.
---	----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 22 / 2012

**Transaction ID : C8755516**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Shelia Lercara**

Mailing Address 3616 Linden St

City Myrtle Beach	State SC	Zip Code 29577
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Coastal Carolina University	Occupation Admin.
---	----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C8761236**

Amount of Each Receipt this Period  
50.00

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

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

550.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eleanor Lewis**

Mailing Address 4000 Cathedral Ave NW  
Apt 736B

City Washington State DC Zip Code 20016-5247

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C8752007**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Doris Lockhart**

Mailing Address 519 W Evans Street

City Florence State SC Zip Code 29501

FEC ID number of contributing federal political committee. **C**

Name of Employer Accustaff Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 28 / 2012

**Transaction ID : C8755622**

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
**Doris Lockhart**

Mailing Address 519 W Evans Street

City Florence State SC Zip Code 29501

FEC ID number of contributing federal political committee. **C**

Name of Employer Accustaff Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 19 / 2012

**Transaction ID : C8761991**

Amount of Each Receipt this Period  
250.00

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

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

525.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Louis B Lynn**

Mailing Address 85 Olde Springs Rd

City Columbia	State SC	Zip Code 29223
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Enviro-Ag Services	Occupation Horticulturist/Owner
--	------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2012

**Transaction ID : C8570225**

Amount of Each Receipt this Period  
750.00

**B.** Full Name (Last, First, Middle Initial)  
**Louis B Lynn**

Mailing Address 85 Olde Springs Rd

City Columbia	State SC	Zip Code 29223
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Enviro-Ag Services	Occupation Horticulturist/Owner
--	------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 10 / 2012

**Transaction ID : C8755453**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**E Erwin Maddrey**

Mailing Address 201 Crescent Ave.

City Greenville	State SC	Zip Code 29605
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer retired	Occupation retired
-----------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 02 / 2012

**Transaction ID : C8564297**

Amount of Each Receipt this Period  
1000.00

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

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

2000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Gerald Malloy**

Mailing Address PO Box 1200

City Hartsville State SC Zip Code 29551-1200

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2012

**Transaction ID : C8569263**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Kenneth McDonald**

Mailing Address 4816 Ashby Grove

City Roswell State GA Zip Code 30075

FEC ID number of contributing federal political committee. **C**

Name of Employer Parsons Brincker Hoff Occupation Sr. Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C8783089**

Amount of Each Receipt this Period  
 300.00

**C.** Full Name (Last, First, Middle Initial)  
**John Wesley Miller Jr.**

Mailing Address 1501 N. Carnaby Circle

City Florence State SC Zip Code 29506

FEC ID number of contributing federal political committee. **C**

Name of Employer AnMedHealth Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 25 / 2012

**Transaction ID : C8761987**

Amount of Each Receipt this Period  
 500.00

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

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

1300.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Felicia Moore</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 31 / 2012	
Mailing Address 2346 Bernard Road NW		<b>Transaction ID : C8623357</b>	
City Atlanta	State GA	Zip Code 30318	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>B. Joseph Moyer</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2012	
Mailing Address 1556 Brookgreen Dr		<b>Transaction ID : C8603878</b>	
City Myrtle Beach	State SC	Zip Code 29577-5870	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Allergy, Asthma, & Sinus Center, PC	Occupation Physician		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>C. Joseph Moyer</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2012	
Mailing Address 1556 Brookgreen Dr		<b>Transaction ID : C8755416</b>	
City Myrtle Beach	State SC	Zip Code 29577-5870	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Allergy, Asthma, & Sinus Center, PC	Occupation Physician		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2200.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Adiele Nwankwo**

Mailing Address 15 Kelly Green Dr Ann Arbor

City State Zip Code  
Ann Arbor MI 48103

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C8783103**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Egbert Perry**

Mailing Address 541 Centennial Lane Hwy

City State Zip Code  
Atlanta GA 30313

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested  
Integral Group Real Estate Developer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 05 / 2012

**Transaction ID : C8542223**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Joseph Pinson**

Mailing Address 237 Sunnyside Ave

City State Zip Code  
Murrells Inlet SC 29576-6046

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested  
none retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 14 / 2012

**Transaction ID : C8568852**

Amount of Each Receipt this Period  
200.00

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

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

2950.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>Joseph Pinson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 22 / 2012
Mailing Address 237 Sunnyside Ave		<b>Transaction ID : C875528</b>
City Murrells Inlet	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer none	Occupation retired	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Brad Queener</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2012
Mailing Address 115 Redwolf Trl		<b>Transaction ID : C8726634</b>
City Myrtle Beach	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Bradley Development Company	Occupation real estate	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Matthew T. Richardson</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 18 / 2012
Mailing Address 15 Gibbes Ct.		<b>Transaction ID : C8755630</b>
City Columbia	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Wyche Burgess	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1300.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Ford Campaign Fund**

Mailing Address Post Office Box 21302

City Charleston State SC Zip Code 29413

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 14 / 2012

**Transaction ID : C8755704**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Michael Roberts**

Mailing Address 106 Furman Cir

City Conway State SC Zip Code 29526-8881

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Coastal Carolina University Dean

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : C8699084**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Eddie Robinson**

Mailing Address 124 Stonemark Ln

City Columbia State SC Zip Code 29210-3841

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Self Employed Veterinarian

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 13 / 2012

**Transaction ID : C8568733**

Amount of Each Receipt this Period  
 250.00

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

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

1250.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Don Roman**

Mailing Address 4151 Ashford Dunwoody Road NE Ste

City Atlanta State GA Zip Code 30319

FEC ID number of contributing federal political committee. **C**

Name of Employer MetLife Financial Group Occupation Financial Services Rep.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C8783100**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ernestrine Russell**

Mailing Address 35 Tilton St

City New Haven State CT Zip Code 06511-3542

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 20 / 2012

**Transaction ID : C8697031**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Jerome Russell**

Mailing Address 210 Milano Dr SW

City Atlanta State GA Zip Code 30331-8382

FEC ID number of contributing federal political committee. **C**

Name of Employer H J Russell Occupation Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 13 / 2012

**Transaction ID : C8568736**

Amount of Each Receipt this Period  
250.00

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

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

3750.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ryan Heller Schafer**

Mailing Address Post Office Box 307

City Hamer State SC Zip Code 29547

FEC ID number of contributing federal political committee. **C**

Name of Employer South of the Border Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : C8761972**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Jack Scoville Jr.**

Mailing Address 305 Meeting St.

City Georgetown State SC Zip Code 29440

FEC ID number of contributing federal political committee. **C**

Name of Employer City of Georgetown Occupation Mayor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 21 / 2012

**Transaction ID : C8776951**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Patricia Shama**

Mailing Address 1680 Essex Way

City Myrtle Beach State SC Zip Code 29577-1794

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation Volunteer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 18 / 2012

**Transaction ID : C8696537**

Amount of Each Receipt this Period  
 100.00

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

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

1350.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Patricia Shama</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 22 / 2012	
Mailing Address 1680 Essex Way		<b>Transaction ID : C8755538</b>	
City Myrtle Beach	State SC	Zip Code 29577-1794	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer NA	Occupation Volunteer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1125.00		

Full Name (Last, First, Middle Initial) <b>B. Patricia Shama</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 30 / 2012	
Mailing Address 1680 Essex Way		<b>Transaction ID : C8712940</b>	
City Myrtle Beach	State SC	Zip Code 29577-1794	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer NA	Occupation Volunteer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1125.00		

Full Name (Last, First, Middle Initial) <b>C. Vincent A Sheheen</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 05 / 2012	
Mailing Address 14 Kirkwood Ln.		<b>Transaction ID : C8719771</b>	
City Camden	State SC	Zip Code 29020	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer South Carolina State Government	Occupation Representative		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1525.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marva Smalls**

Mailing Address 200 E 57th St  
5M

City State Zip Code  
New York NY 10022-2860

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Viacom Entertainment Executive

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 16 / 2012

**Transaction ID : C8729872**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Richard Smith**

Mailing Address 121 Lakeshore Dr

City State Zip Code  
Pawleys Island SC 29585-7655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
McNair Law Firm lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
07 / 10 / 2012

**Transaction ID : C8545855**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Richard Smith**

Mailing Address 121 Lakeshore Dr

City State Zip Code  
Pawleys Island SC 29585-7655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
McNair Law Firm lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : C8785436**

Amount of Each Receipt this Period  
100.00

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

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

1300.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**John Spratt**

Mailing Address Post Office Box 10986

City State Zip Code  
Rock Hill SC 29731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : C8783096**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Tom Stickler**

Mailing Address 257 Old Ashley Loop

City State Zip Code  
Pawleys Island SC 29585

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested  
retired Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 27 / 2012

**Transaction ID : C8785455**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Dennis Sumpter**

Mailing Address PO Box 40812

City State Zip Code  
Indianapolis IN 46240-0812

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Information Requested  
Rolls-Royce Corp Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4559.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 13 / 2012

**Transaction ID : C8636409**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 35 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Dennis Sumpter**

Mailing Address PO Box 40812

City Indianapolis State IN Zip Code 46240-0812

FEC ID number of contributing federal political committee. **C**

Name of Employer Rolls-Royce Corp Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 4559.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 22 / 2012

**Transaction ID : C8703703**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mark Tanenbaum**

Mailing Address PO Box 20757

City Charleston State SC Zip Code 29413-0757

FEC ID number of contributing federal political committee. **C**

Name of Employer Mark C Tanenbaum, PA Occupation lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 20 / 2012

**Transaction ID : C8696862**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Joel Thayer**

Mailing Address PO Box 15117

City Florence State SC Zip Code 29506-0117

FEC ID number of contributing federal political committee. **C**

Name of Employer Francis Marion University Occupation professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 30 / 2012

**Transaction ID : C8755727**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 250.00

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

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

\_\_\_\_\_ 3750.00

\_\_\_\_\_

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Adeoye Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 28 / 2012
Mailing Address 1403 7th Ave		<b>Transaction ID : C8710133</b>
City Conway	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 377.00
Name of Employer Parsons Brinckerhoff	Occupation Project Manager	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 377.00	

Full Name (Last, First, Middle Initial) <b>B. Titilayo Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 07 / 2012
Mailing Address PO Box 231291		<b>Transaction ID : C8720265</b>
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer UC Berkeley	Occupation Law Student	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Ted Vick</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 07 / 2012
Mailing Address Post Office Box 310		<b>Transaction ID : C8755388</b>
City Chesterfield	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer South Carolina State Government	Occupation Representative	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1377.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Washington**

Mailing Address 4610 Moonbeam Ct

City Myrtle Beach State SC Zip Code 29579

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : C8782762**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Mildred Welch**

Mailing Address 1723 Horry Street

City Conway State SC Zip Code 29527

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
413.65

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 13 / 2012

**Transaction ID : C8635045**

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
**Mildred Welch**

Mailing Address 1723 Horry Street

City Conway State SC Zip Code 29527

FEC ID number of contributing federal political committee. **C**

Name of Employer retired Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
413.65

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 15 / 2012

**Transaction ID : C8694270**

Amount of Each Receipt this Period  
27.00

\* In-Kind: Provided Campaign Lunch

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

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

402.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>Mildred Welch</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 16 / 2012	
Mailing Address 1723 Horry Street		<b>Transaction ID : C8694417</b>	
City Conway	State SC	Zip Code 29527	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer retired	Occupation Information Requested		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 413.65		

Full Name (Last, First, Middle Initial) <b>Mildred Welch</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 23 / 2012	
Mailing Address 1723 Horry Street		<b>Transaction ID : C8755445</b>	
City Conway	State SC	Zip Code 29527	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 147.65	
Name of Employer retired	Occupation Information Requested		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 413.65		
* In-Kind: office supplies			

Full Name (Last, First, Middle Initial) <b>Mildred Welch</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 27 / 2012	
Mailing Address 1723 Horry Street		<b>Transaction ID : C8755447</b>	
City Conway	State SC	Zip Code 29527	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.00	
Name of Employer retired	Occupation Information Requested		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 413.65		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	261.65
<b>TOTAL</b> This Period (last page this line number only).....	261.65

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>Maryann Wright</b>		Date of Receipt MM / DD / YYYY 09 / 07 / 2012
Mailing Address 202 Harbor Drive		<b>Transaction ID : C8755347</b>
City Columbia	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer retired	Occupation retired	Election Cycle-to-Date 450.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Stephen Wukela</b>		Date of Receipt MM / DD / YYYY 08 / 28 / 2012
Mailing Address 331 Alligator Rd Post Office Box 13057		<b>Transaction ID : C8711350</b>
City Effingham	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Wukela Law Firm	Occupation Attorney	* In-Kind: Florence Fundraiser Venue
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>Karen Yaniga</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2012
Mailing Address 142 Rybolt Rd		<b>Transaction ID : C8785492</b>
City Pawleys Island	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer retired	Occupation Information Requested	Election Cycle-to-Date 400.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bello, Bello and Associates LLC**

Mailing Address 900 Second Street

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2012

**Transaction ID : C8785706**

Amount of Each Receipt this Period  
500.00

PARTNERSHIP--partners below if itemized

**B.** Full Name (Last, First, Middle Initial)  
**Toye Bello**

Mailing Address 900 Second Street, NE Suite 6

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Bello, Bello and Associates partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
09 / 13 / 2012

**Transaction ID : C8782881**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
\*

**C.** Full Name (Last, First, Middle Initial)  
**Samuel Baker**

Mailing Address 3526 Boundbrook Ln

City Columbia State SC Zip Code 29206-3402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Univ. of South Carolina Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 21 / 2012

**Transaction ID : C8711556**

Amount of Each Receipt this Period  
100.00

\* Earmarked Contribution: See Below

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

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

600.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 164
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
342.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 21 / 2012

**Transaction ID : C8711556B**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

**B.** Full Name (Last, First, Middle Initial)  
**Samuel Baker**

Mailing Address 3526 Boundbrook Ln

City State Zip Code  
Columbia SC 29206-3402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Univ. of South Carolina Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : C8785806**

Amount of Each Receipt this Period  
50.00

\* Earmarked Contribution: See Below

**C.** Full Name (Last, First, Middle Initial)  
**ACTBLUE**

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
342.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 24 / 2012

**Transaction ID : C8785806B**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

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

50.00

53302.01

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
BUILDING RELATIONSHIPS IN DIVERSE GEOGRAPHIC ENVIRONMENTS PAC (BRIDGE PAC)

Mailing Address 499 SOUTH CAPITOL ST SW SUITE 422

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00399196

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 13 / 2012

**Transaction ID : C8762368**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
CDM SMITH INC. NATIONAL PAC

Mailing Address 3201 JERMANTOWN ROAD SUITE 400

City FAIRFAX State VA Zip Code 22030

FEC ID number of contributing federal political committee. **C** C00398222

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 18 / 2012

**Transaction ID : C8762276**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
COMMUNICATION WORKERS OF AMERICA

Mailing Address 501 THIRD STREET NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C70000211

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 05 / 2012

**Transaction ID : C8755758**

Amount of Each Receipt this Period  
2500.00

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

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

8000.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial)  
D.R.I.V.E. - DEMOCRAT, REPUBLICAN, INDEPENDENT VOTER EDUCATION (THE PAC OF THE INTERNATION

**A.** Mailing Address 25 LOUISIANA AVE., NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2012

**Transaction ID : C8762290**

Amount of Each Receipt this Period  
 1500.00

Full Name (Last, First, Middle Initial)  
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

**B.** Mailing Address 900 SEVENTH ST, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 17 / 2012

**Transaction ID : C8603816**

Amount of Each Receipt this Period  
 5000.00

Full Name (Last, First, Middle Initial)  
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

**C.** Mailing Address 900 SEVENTH ST, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date 15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 10 / 2012

**Transaction ID : C8631539**

Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... 11500.00

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

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 44 OF 164  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial)  
INTERNATIONAL LONGSHOREMEN'S ASSOCIATION AFL-CIO COMMITTEE ON POLITICAL EDUCATION ILA-COPE

Mailing Address 5000 WEST SIDE AVENUE

City NORTH BERGEN State NJ Zip Code 07047

FEC ID number of contributing federal political committee. **C** C00158576

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 02 / 2012

**Transaction ID : C8625556**

Amount of Each Receipt this Period  
5000.00

B. Full Name (Last, First, Middle Initial)  
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

Mailing Address 7234 PARKWAY DRIVE

City HANOVER State MD Zip Code 21076

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 28 / 2012

**Transaction ID : C8790461**

Amount of Each Receipt this Period  
2500.00

C. Full Name (Last, First, Middle Initial)  
**KLEINFELDER GROUP POLITICAL ACTION COMMITTEE**

Mailing Address 5015 SHOREHAM PLACE

City SAN DIEGO State CA Zip Code 92122

FEC ID number of contributing federal political committee. **C** C00463943

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 07 / 2012

**Transaction ID : C8761946**

Amount of Each Receipt this Period  
1000.00

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

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

8500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 164
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL ORGANIZATION FOR WOMEN PAC**

Mailing Address 1100 H STREET, NW  
3RD FL

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00092247**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 19 / 2012

**Transaction ID : C8783097**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**NIGERIAN AMERICAN PUBLIC AFFAIRS COMMITTEE**

Mailing Address 9631 BUSINESS CENTER DRIVE STE G

City RANCHO COCAMONGA State GA Zip Code 91730

FEC ID number of contributing federal political committee. **C C00499228**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 29 / 2012

**Transaction ID : C8777041**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**PARSONS BRINCKERHOFF GROUP INC. PAC**

Mailing Address 1401 K STREET NW  
SUITE 701

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00287003**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 16 / 2012

**Transaction ID : C8570238**

Amount of Each Receipt this Period  
1000.00

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

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

6500.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 46 OF 164	
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**UNITED STEELWORKERS POLITICAL ACTION FUND**

Mailing Address **FIVE GATEWAY CENTER**

City **PITTSBURGH** State **PA** Zip Code **15222**

FEC ID number of contributing federal political committee. **C C00003590**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	1	2

**Transaction ID : C8761997**

Amount of Each Receipt this Period  
**5000.00**

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

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

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

**5000.00**

**39500.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 164
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 10 / 2012
Mailing Address 1403 7th Ave		<b>Transaction ID : C8562936</b>
City Conway	State SC	
FEC ID number of contributing federal political committee. C H2SC07108		Amount of Each Receipt this Period 3500.00
Name of Employer Coastal Carolina University	Occupation Economist	
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 309530.00	

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2012
Mailing Address 1403 7th Ave		<b>Transaction ID : C8627447</b>
City Conway	State SC	
FEC ID number of contributing federal political committee. C H2SC07108		Amount of Each Receipt this Period 10000.00
Name of Employer Coastal Carolina University	Occupation Economist	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 309530.00	

Full Name (Last, First, Middle Initial) <b>C. Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 17 / 2012
Mailing Address 1403 7th Ave		<b>Transaction ID : C8695806</b>
City Conway	State SC	
FEC ID number of contributing federal political committee. C H2SC07108		Amount of Each Receipt this Period 5000.00
Name of Employer Coastal Carolina University	Occupation Economist	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 309530.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 164
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 20 / 2012
Mailing Address 1403 7th Ave		<b>Transaction ID : C8697059</b>
City Conway State SC Zip Code 29526	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C H2SC07108</b>		Amount of Each Receipt this Period 5000.00
Name of Employer Coastal Carolina University	Occupation Economist	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 309530.00	

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 20 / 2012
Mailing Address 1403 7th Ave		<b>Transaction ID : C8697077</b>
City Conway State SC Zip Code 29526	Amount of Each Receipt this Period 10000.00	
FEC ID number of contributing federal political committee. <b>C H2SC07108</b>		Amount of Each Receipt this Period 10000.00
Name of Employer Coastal Carolina University	Occupation Economist	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 309530.00	

Full Name (Last, First, Middle Initial) <b>C. Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 19 / 2012
Mailing Address 1403 7th Ave		<b>Transaction ID : C8761999</b>
City Conway State SC Zip Code 29526	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. <b>C H2SC07108</b>		Amount of Each Receipt this Period 3000.00
Name of Employer Coastal Carolina University	Occupation Economist	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 309530.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18000.00
<b>TOTAL</b> This Period (last page this line number only).....	36500.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Billy Best</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 5103 N Englewood Dr		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D416778</b>
City Cheverly	State MD	
Zip Code 20785-3839	Purpose of Disbursement refund of contribution -wrong amount given	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Amy Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 201 Mill St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D409047</b>
City Chesterfield	State SC	
Zip Code 29709	Purpose of Disbursement consulting services- field coordination	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Amy Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 201 Mill St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D410388</b>
City Chesterfield	State SC	
Zip Code 29709	Purpose of Disbursement consulting services: field coordination	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D410398</b>
City Wallace	State SC	
Purpose of Disbursement consulting services - field coordination		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D409048</b>
City Wallace	State SC	
Purpose of Disbursement consulting services - field coordination		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 283.66 <b>Transaction ID : D408556</b>
City Wallace	State SC	
Purpose of Disbursement travel expense- gas, field supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5283.66
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. David Brown</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2012
Mailing Address 1941 Highway 177			Amount of Each Disbursement this Period 61.45 <b>Transaction ID : D408557</b>
City Wallace	State SC	Zip Code 29596-5313	
Purpose of Disbursement event supplies		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mr. David Brown</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2012
Mailing Address 1941 Highway 177			Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : D404464</b>
City Wallace	State SC	Zip Code 29596-5313	
Purpose of Disbursement consulting services- field coordination		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) <b>C. Mr. David Brown</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 1941 Highway 177			Amount of Each Disbursement this Period 113.89 <b>Transaction ID : D404546</b>
City Wallace	State SC	Zip Code 29596-5313	
Purpose of Disbursement election day field operation		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2175.34
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D405969</b>
City Wallace	State SC Zip Code 29596-5313	
Purpose of Disbursement consulting services - field coordination		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 208.59 <b>Transaction ID : D413005</b>
City Wallace	State SC Zip Code 29596-5313	
Purpose of Disbursement event supplies		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 195.26 <b>Transaction ID : D416782</b>
City Wallace	State SC Zip Code 29596-5313	
Purpose of Disbursement grand opening-food/supplies		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	903.85
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 432.39 <b>Transaction ID : D416783</b>
City Wallace	State SC Zip Code 29596-5313	
Purpose of Disbursement travel expense- gas		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 35.24 <b>Transaction ID : D416785</b>
City Wallace	State SC Zip Code 29596-5313	
Purpose of Disbursement training breakfast items		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 218.12 <b>Transaction ID : D416786</b>
City Wallace	State SC Zip Code 29596-5313	
Purpose of Disbursement Cheraw County Event- supplies/food		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	685.75
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. Teresa Brown</b>			Date of Disbursement MM / DD / YYYY 07 / 09 / 2012	
Mailing Address 1512 Bobby L Davis Blvd			Amount of Each Disbursement this Period 60.00	
City Marion	State SC	Zip Code 29571	Transaction ID : D401021	
Purpose of Disbursement field operations work		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BuildAssign.com</b>			Date of Disbursement MM / DD / YYYY 09 / 21 / 2012	
Mailing Address 11525A Stonehollow Dr. suite 100			Amount of Each Disbursement this Period 3460.60	
City Austin	State TX	Zip Code 78758	Transaction ID : D417901	
Purpose of Disbursement campaign signs		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. City of Conway</b>			Date of Disbursement MM / DD / YYYY 07 / 03 / 2012	
Mailing Address Post Office 1507			Amount of Each Disbursement this Period 32.46	
City Conway	State SC	Zip Code 29528-1075	Transaction ID : D401027	
Purpose of Disbursement water/sewage/trash collection services		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3553.06
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. City of Conway</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2012
Mailing Address Post Office 1507		Amount of Each Disbursement this Period 37.26 <b>Transaction ID : D406912</b>
City Conway	State SC	
Zip Code 29528-1075	Purpose of Disbursement water/sewage/trash collection services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. City of Conway</b>		Date of Disbursement MM / DD / YYYY 09 / 14 / 2012
Mailing Address Post Office 1507		Amount of Each Disbursement this Period 42.06 <b>Transaction ID : D410674</b>
City Conway	State SC	
Zip Code 29528-1075	Purpose of Disbursement water/sewage/trash collection services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. ConstantContact.com</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address Reservoir Place 1601 Trapelo Road		Amount of Each Disbursement this Period 80.00 <b>Transaction ID : D404467</b>
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement email blast- monthly service fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	159.32
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Conway National Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address PO Box 320		Amount of Each Disbursement this Period 430.00
City Conway	State SC	
Zip Code 29528	Purpose of Disbursement bank fees	Transaction ID : D404403
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Craig Conwell</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 1515 5th Ave		Amount of Each Disbursement this Period 1000.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement consulting services- field coordination	Transaction ID : D404463
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mr. Craig Conwell</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 1515 5th Ave		Amount of Each Disbursement this Period 1000.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement consulting services: field coordination	Transaction ID : D410404
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2430.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Craig Conwell</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 1515 5th Ave		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D409058</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement consulting services-field coordination	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Cooper's Office Supply</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2012
Mailing Address 1321-B 3rd Ave		Amount of Each Disbursement this Period 102.01 <b>Transaction ID : D407751</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Cooper's Office Supply</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address 1321-B 3rd Ave		Amount of Each Disbursement this Period 36.23 <b>Transaction ID : D404998</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1138.23
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cooper's Office Supply</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2012
Mailing Address 1321-B 3rd Ave		Amount of Each Disbursement this Period 45.25 <b>Transaction ID : D417600</b>
City Conway	State SC	
Purpose of Disbursement stationary/office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cooper's Office Supply</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2012
Mailing Address 1321-B 3rd Ave		Amount of Each Disbursement this Period 45.25 <b>Transaction ID : D417601</b>
City Conway	State SC	
Purpose of Disbursement stationary/office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cooper's Office Supply</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 1321-B 3rd Ave		Amount of Each Disbursement this Period 81.59 <b>Transaction ID : D417602</b>
City Conway	State SC	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	172.09
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cooper's Office Supply</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 1321-B 3rd Ave		Amount of Each Disbursement this Period 106.03 <b>Transaction ID : D417603</b>
City Conway	State SC	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cooper's Office Supply</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2012
Mailing Address 1321-B 3rd Ave		Amount of Each Disbursement this Period 67.88 <b>Transaction ID : D417604</b>
City Conway	State SC	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cooper's Office Supply</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 1321-B 3rd Ave		Amount of Each Disbursement this Period 102.52 <b>Transaction ID : D417605</b>
City Conway	State SC	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	276.43
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Kimberly Cross</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 45 Briarwood Place		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D401114</b>
City Sanford	State NC Zip Code 27332	
Purpose of Disbursement field operations work	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Tyhesh Cross</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 45 Briarwood PI		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : D402947</b>
City Sanford	State NC Zip Code 27332-2509	
Purpose of Disbursement consulting services: photography/driver	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mr. Tyhesh Cross</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 45 Briarwood PI		Amount of Each Disbursement this Period 547.66 <b>Transaction ID : D404550</b>
City Sanford	State NC Zip Code 27332-2509	
Purpose of Disbursement travel expense- mileage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2047.66
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Tyhesh Cross</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2012
Mailing Address 45 Briarwood Pl		Amount of Each Disbursement this Period 190.15 <b>Transaction ID : D407725</b>
City Sanford	State NC	
Zip Code 27332-2509	Purpose of Disbursement travel expense-mileage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Mr. Tyhesh Cross</b>		Date of Disbursement MM / DD / YYYY 08 / 21 / 2012
Mailing Address 45 Briarwood Pl		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : D409060</b>
City Sanford	State NC	
Zip Code 27332-2509	Purpose of Disbursement consulting services-transportation/photography	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Mr. Tyhesh Cross</b>		Date of Disbursement MM / DD / YYYY 09 / 14 / 2012
Mailing Address 45 Briarwood Pl		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : D410393</b>
City Sanford	State NC	
Zip Code 27332-2509	Purpose of Disbursement consulting services-photography	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2590.15
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Tyhesh Cross</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 45 Briarwood Pl			Amount of Each Disbursement this Period 364.74 <b>Transaction ID : D409577</b>
City Sanford	State NC	Zip Code 27332-2509	
Purpose of Disbursement travel expense- mileage		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Mr. Tyhesh Cross</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 45 Briarwood Pl			Amount of Each Disbursement this Period 137.00 <b>Transaction ID : D409579</b>
City Sanford	State NC	Zip Code 27332-2509	
Purpose of Disbursement travel expense-towing/maint.		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Mr. Tyhesh Cross</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 45 Briarwood Pl			Amount of Each Disbursement this Period 34.13 <b>Transaction ID : D409581</b>
City Sanford	State NC	Zip Code 27332-2509	
Purpose of Disbursement photography expense- frames		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	535.87
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Tyhesh Cross</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 45 Briarwood Pl		Amount of Each Disbursement this Period 7,000.00 26.25
City Sanford State NC Zip Code 27332-2509	Purpose of Disbursement photography expense- photo development	
Candidate Name	Category/Type	<b>Transaction ID : D409590</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Tyhesh Cross</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 45 Briarwood Pl		Amount of Each Disbursement this Period 7,000.00 278.56
City Sanford State NC Zip Code 27332-2509	Purpose of Disbursement travel expense- mileage	
Candidate Name	Category/Type	<b>Transaction ID : D416779</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Delta Airline</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address Post Office Box 20980 Dept 980		Amount of Each Disbursement this Period 7,000.00 425.20
City Atlanta State GA Zip Code 30320-2980	Purpose of Disbursement travel expense- airfare travel	
Candidate Name	Category/Type	<b>Transaction ID : D417813</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	730.01
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delta Airline</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2012
Mailing Address Post Office Box 20980 Dept 980		Amount of Each Disbursement this Period 425.20 <b>Transaction ID : D417814</b>
City Atlanta State GA Zip Code 30320-2980	Purpose of Disbursement travel expense- airfare travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Delta Airline</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address Post Office Box 20980 Dept 980		Amount of Each Disbursement this Period 373.60 <b>Transaction ID : D417820</b>
City Atlanta State GA Zip Code 30320-2980	Purpose of Disbursement travel expense- airfare travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Delta Airline</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2012
Mailing Address Post Office Box 20980 Dept 980		Amount of Each Disbursement this Period 170.00 <b>Transaction ID : D417822</b>
City Atlanta State GA Zip Code 30320-2980	Purpose of Disbursement travel expense- ticket destination change fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	968.80
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delta Airline</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2012
Mailing Address Post Office Box 20980 Dept 980		Amount of Each Disbursement this Period 479.60 <b>Transaction ID : D407733</b>
City Atlanta	State GA Zip Code 30320-2980	
Purpose of Disbursement travel expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dollar General #8531</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 25.96 <b>Transaction ID : D404478</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dollar General #8531</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 02 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 19.88 <b>Transaction ID : D407748</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	525.44
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dollar General #8531</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 11.99 <b>Transaction ID : D407763</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dollar General #8531</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 23 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 20.79 <b>Transaction ID : D417597</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dollar General #8531</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 24.05 <b>Transaction ID : D417873</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement supplies/food/cleaning supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	56.83
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dollar General #8531</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 17.82
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies	Candidate Name	Transaction ID : D417894
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Dollar General #8531</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 41.31
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies	Candidate Name	Transaction ID : D417913
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Dollar General #8531</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 88.88
City Conway	State SC Zip Code 29526	
Purpose of Disbursement prepaid telephone	Candidate Name	Transaction ID : D417927
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	148.01
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Larry Dyer</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address Post Office Box 438 Hwy 41A South		Amount of Each Disbursement this Period 75.00
City Centenary	State Zip Code SC 29519	
Purpose of Disbursement computer maintenance	Candidate Name	Transaction ID : D418049
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Regina Dyer</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address P.O. Box 438 Hwy 41A South		Amount of Each Disbursement this Period 23.57
City Centenary	State Zip Code SC 29519	
Purpose of Disbursement food/supplies- apple blossom festival	Candidate Name	Transaction ID : D416781
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Mrs. Regina Dyer</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address P.O. Box 438 Hwy 41A South		Amount of Each Disbursement this Period 1750.00
City Centenary	State Zip Code SC 29519	
Purpose of Disbursement consulting services-field coordination	Candidate Name	Transaction ID : D409059
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1848.57
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 164		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Regina Dyer</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address P.O. Box 438 Hwy 41A South		Amount of Each Disbursement this Period 1750.00 <b>Transaction ID : D410408</b>
City Centenary	State Zip Code SC 29519	
Purpose of Disbursement consulting services- field coordination		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Regina Dyer</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address P.O. Box 438 Hwy 41A South		Amount of Each Disbursement this Period 1780.00 <b>Transaction ID : D402945</b>
City Centenary	State Zip Code SC 29519	
Purpose of Disbursement consulting services: field coordination		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mrs. Regina Dyer</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2012
Mailing Address P.O. Box 438 Hwy 41A South		Amount of Each Disbursement this Period 65.50 <b>Transaction ID : D404553</b>
City Centenary	State Zip Code SC 29519	
Purpose of Disbursement election day field operation		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3595.50
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jacqueline Ellerbe-Shannon</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 106 Agerton St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D410415</b>
City Cheraw State SC Zip Code 29520-3308	Purpose of Disbursement consulting services-field coordination	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jacqueline Ellerbe-Shannon</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 106 Agerton St		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D409046</b>
City Cheraw State SC Zip Code 29520-3308	Purpose of Disbursement consulting services- field coordination	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2012
Mailing Address 1170 Seaboard St.		Amount of Each Disbursement this Period 17.18 <b>Transaction ID : D404554</b>
City Myrtle Beach State SC Zip Code 29577-6517	Purpose of Disbursement printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1017.18
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2012
Mailing Address 1170 Seaboard St.		Amount of Each Disbursement this Period 17.17
City Myrtle Beach	State SC	
Zip Code 29577-6517	Purpose of Disbursement printing	Transaction ID : D417895
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Helen Felder</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement cleaning services	Transaction ID : D418052
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Helen Felder</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement cleaning services	Transaction ID : D418047
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	167.17
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Helen Felder</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012
Mailing Address 1500 6th Ave			Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D416892</b>
City Conway	State SC	Zip Code 29526	
Purpose of Disbursement office cleaning		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Helen Felder</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 1500 6th Ave			Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D416888</b>
City Conway	State SC	Zip Code 29526	
Purpose of Disbursement office cleaning		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Helen Felder</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2012
Mailing Address 1500 6th Ave			Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D404937</b>
City Conway	State SC	Zip Code 29526	
Purpose of Disbursement cleaning services-office		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Helen Felder</b>		Date of Disbursement MM / DD / YYYY 08 / 10 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D406945</b>
City Conway	State SC	
Purpose of Disbursement cleaning services- office	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Helen Felder</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D402010</b>
City Conway	State SC	
Purpose of Disbursement cleaning services- office	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Helen Felder</b>		Date of Disbursement MM / DD / YYYY 07 / 13 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 7.02 <b>Transaction ID : D402013</b>
City Conway	State SC	
Purpose of Disbursement cleaning supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	157.02
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Helen Felder</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D407893</b>
City Conway	State SC	
Purpose of Disbursement cleaning services- office		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Helen Felder</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D410435</b>
City Conway	State SC	
Purpose of Disbursement office cleaning		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2012
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 199.10 <b>Transaction ID : D404402</b>
City Atlanta	State GA	
Purpose of Disbursement credit card processing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	349.10
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 164			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 159.91 <b>Transaction ID : D405980</b>
City Atlanta State GA Zip Code 30342	Purpose of Disbursement credit card processing fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2012
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 323.50 <b>Transaction ID : D418037</b>
City Atlanta State GA Zip Code 30342	Purpose of Disbursement credit card processing fee	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Asa Fludd</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 1302 Valparairo Dr. Apt L2		Amount of Each Disbursement this Period 60.17 <b>Transaction ID : D416780</b>
City Florence State SC Zip Code 29501	Purpose of Disbursement grand opening-food/supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	543.58
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Asa Fludd</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012		
Mailing Address 1302 Valparairo Dr. Apt L2			Amount of Each Disbursement this Period 500.00		
City Florence	State SC	Zip Code 29501	Transaction ID : D410392		
Purpose of Disbursement consulting services- filed coordination		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Asa Fludd</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012		
Mailing Address 1302 Valparairo Dr. Apt L2			Amount of Each Disbursement this Period 500.00		
City Florence	State SC	Zip Code 29501	Transaction ID : D409062		
Purpose of Disbursement consulting services-field coordination		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Ms Tyra Ford</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012		
Mailing Address 5020 Exodus Drive			Amount of Each Disbursement this Period 1000.00		
City Georgetown	State SC	Zip Code 29440	Transaction ID : D410675		
Purpose of Disbursement consulting services- field coordination		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms Tyra Ford</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 5020 Exodus Drive		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : D403644</b>
City Georgetown	State SC	
Purpose of Disbursement consulting services-administrative		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Ms Tyra Ford</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 5020 Exodus Drive		Amount of Each Disbursement this Period 1200.00 <b>Transaction ID : D402949</b>
City Georgetown	State SC	
Purpose of Disbursement consulting services: administrative services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Ms Tyra Ford</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2012
Mailing Address 5020 Exodus Drive		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D418045</b>
City Georgetown	State SC	
Purpose of Disbursement consulting services: field coordination		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Fox Rent A Car</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 1275 Hwy 501		Amount of Each Disbursement this Period -16.43 <b>Transaction ID : D407764</b>
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement car rental charge fee charged in error	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Donald Gilliard</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 2229 Front St.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D410676</b>
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement consulting services- field organizing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Donald Gilliard</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2012
Mailing Address 2229 Front St.		Amount of Each Disbursement this Period 395.14 <b>Transaction ID : D412373</b>
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1378.71
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Donald Gilliard</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 2229 Front St.		Amount of Each Disbursement this Period 125.00
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement travel expense- gas	Transaction ID : D409575
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 32.66
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	Transaction ID : D415736 [MEMO ITEM]
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 40.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	Transaction ID : D415737 [MEMO ITEM]
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	125.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 52.70
City Conway	State SC Zip Code 29526	
Purpose of Disbursement forgiveness of debt		Transaction ID : D415738 <b>[MEMO ITEM]</b>
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 58.88
City Conway	State SC Zip Code 29526	
Purpose of Disbursement forgiveness of debt		Transaction ID : D415739 <b>[MEMO ITEM]</b>
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 76.87
City Conway	State SC Zip Code 29526	
Purpose of Disbursement forgiveness of debt		Transaction ID : D415740 <b>[MEMO ITEM]</b>
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2012	
<input type="checkbox"/> Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify)	
State: SC District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 16.15
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 46.74
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 8.42
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 45.66
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 24.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 50.99
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 80.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	Transaction ID : D415747 <b>[MEMO ITEM]</b>
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 225.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	Transaction ID : D415748 <b>[MEMO ITEM]</b>
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 46.40
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	Transaction ID : D415749 <b>[MEMO ITEM]</b>
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 46.74
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 54.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 814.53
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : D416771</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense- gas		Category/ Type
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC	District: 07	

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 81.11 <b>Transaction ID : D418046</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement campaign cell phone services		Category/ Type
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC	District: 07	

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : D414958</b> <b>[MEMO ITEM]</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement forgiveness of debt		Category/ Type
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC	District: 07	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	111.11
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 132.00
City Conway	State SC	
Purpose of Disbursement forgiveness of debt		Transaction ID : D414959  [MEMO ITEM]
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: SC	District: 07	

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 45.00
City Conway	State SC	
Purpose of Disbursement forgiveness of debt		Transaction ID : D414962  [MEMO ITEM]
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: SC	District: 07	

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 950.63
City Conway	State SC	
Purpose of Disbursement forgiveness of debt		Transaction ID : D414967  [MEMO ITEM]
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: SC	District: 07	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 52.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	Category/ Type
Candidate Name <b>Gloria Bromell Tinubu</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: SC	District: 07	

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 4.15
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	Category/ Type
Candidate Name <b>Gloria Bromell Tinubu</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: SC	District: 07	

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 18.95
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	Category/ Type
Candidate Name <b>Gloria Bromell Tinubu</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: SC	District: 07	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement MM / DD / YYYY 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 859.10 Transaction ID : D414974
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	[MEMO ITEM]
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 363.90 Transaction ID : D409051
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement expenses paid by candidate from 8/7-18/12	[MEMO ITEM]
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement MM / DD / YYYY 08 / 29 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 495.20 Transaction ID : D409053
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense	[MEMO ITEM]
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	859.10
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement MM / DD / YYYY 08 / 09 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 151.00 <b>Transaction ID : D406494</b>
City Conway	State SC	
Purpose of Disbursement campaign cell phone services		Category/ Type
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC	District: 07	

Full Name (Last, First, Middle Initial) <b>B. Google Apps</b>		Date of Disbursement MM / DD / YYYY 07 / 02 / 2012
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 65.00 <b>Transaction ID : D404468</b>
City Mountain View	State CA	
Purpose of Disbursement marketing/ advertisement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Google Apps</b>		Date of Disbursement MM / DD / YYYY 08 / 02 / 2012
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 113.85 <b>Transaction ID : D417583</b>
City Mountain View	State CA	
Purpose of Disbursement marketing/advertisement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	329.85
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Google Apps</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2012
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 127.89
City Mountain View	State CA Zip Code 94043	
Purpose of Disbursement marketing/advertisement/email	Candidate Name	Transaction ID : D417825
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Grand Villas World TourBeach Vacations</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 590 River Oaks Dr.		Amount of Each Disbursement this Period 550.00
City Myrtle Beach	State SC Zip Code 29579	
Purpose of Disbursement campaign housing	Candidate Name	Transaction ID : D416889
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Grand Villas World TourBeach Vacations</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2012
Mailing Address 590 River Oaks Dr.		Amount of Each Disbursement this Period 550.00
City Myrtle Beach	State SC Zip Code 29579	
Purpose of Disbursement campaign housing	Candidate Name	Transaction ID : D400134
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1227.89
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Grand Villas World TourBeach Vacations</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2012
Mailing Address 590 River Oaks Dr.			Amount of Each Disbursement this Period 550.00 <b>Transaction ID : D406493</b>
City Myrtle Beach	State SC	Zip Code 29579	
Purpose of Disbursement campaign housing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Mr. Wayne Green</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 1924 Rocking Chair Ct			Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D410401</b>
City Dillon	State SC	Zip Code 29536	
Purpose of Disbursement consulting services-field coordination		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Dwane Heyward</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 92 Abraham Pl			Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : D410677</b>
City Georgetown	State SC	Zip Code 29440-6341	
Purpose of Disbursement consulting services- financial services		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4550.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D409045</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services- financial services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 14.80 <b>Transaction ID : D408554</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 49.40 <b>Transaction ID : D408555</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2564.20
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D406910</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services- financial services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 33.59 <b>Transaction ID : D401117</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement election day lunch/staff lunch	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : D402943</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting fees: financial services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2283.59
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D404548</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services- financial services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Howard Johnson Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2012
Mailing Address 122 W Woodlawn Rd		Amount of Each Disbursement this Period 713.16 <b>Transaction ID : D417840</b>
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement travel expense- hotel accommodations	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Howard Johnson Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2012
Mailing Address 122 W Woodlawn Rd		Amount of Each Disbursement this Period 713.16 <b>Transaction ID : D417841</b>
City Charlotte	State NC	
Zip Code 28217	Purpose of Disbursement travel expense- hotel accommodations	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1676.32
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. HTC</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2012
Mailing Address Post Office Box 1819		Amount of Each Disbursement this Period 260.38
City Conway	State SC	
Zip Code 29528-1819	Purpose of Disbursement telephone services	<b>Transaction ID : D416884</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HTC</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012
Mailing Address Post Office Box 1819		Amount of Each Disbursement this Period 354.57
City Conway	State SC	
Zip Code 29528-1819	Purpose of Disbursement telephone services	<b>Transaction ID : D404465</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HTC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address Post Office Box 1819		Amount of Each Disbursement this Period 271.86
City Conway	State SC	
Zip Code 29528-1819	Purpose of Disbursement telephone services	<b>Transaction ID : D406914</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	886.81
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 164		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. James Jackson</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 834 Marshall St.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D409044</b>
City Darlington	State SC	
Zip Code 29532	Purpose of Disbursement consulting services- field coordination	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. James Jackson</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 834 Marshall St.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D410405</b>
City Darlington	State SC	
Zip Code 29532	Purpose of Disbursement consulting services- field coordination	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 35.01 <b>Transaction ID : D407761</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2035.01
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 31.01 <b>Transaction ID : D407747</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 12 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 15.00 <b>Transaction ID : D404556</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 27.50 <b>Transaction ID : D404469</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	73.51
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 26.00 <b>Transaction ID : D404477</b>
City Conway	State SC	
Purpose of Disbursement travel expense- gas	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 25.00 <b>Transaction ID : D404471</b>
City Conway	State SC	
Purpose of Disbursement travel expense-gas	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 53.76 <b>Transaction ID : D417800</b>
City Conway	State SC	
Purpose of Disbursement travel expense- gas	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	104.76
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 33.01
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense- gas	Candidate Name	Transaction ID : D417804
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 47.50
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense- gas	Candidate Name	Transaction ID : D417805
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 40.01
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense- gas	Candidate Name	Transaction ID : D417807
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	120.52
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 39.33 <b>Transaction ID : D417808</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense- gas	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 39.00 <b>Transaction ID : D417864</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense- gas	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kangaroo Express #3064</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2012
Mailing Address 3710 Hwy 501		Amount of Each Disbursement this Period 47.00 <b>Transaction ID : D417826</b>
City Myrtle Beach	State SC Zip Code 29579	
Purpose of Disbursement travel expense- gas	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	125.33
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kangaroo Express #3064</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2012
Mailing Address 3710 Hwy 501		Amount of Each Disbursement this Period 52.76 <b>Transaction ID : D417606</b>
City Myrtle Beach	State SC	
Purpose of Disbursement travel expense - gas		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Kangaroo Express #3064</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2012
Mailing Address 3710 Hwy 501		Amount of Each Disbursement this Period 53.00 <b>Transaction ID : D417608</b>
City Myrtle Beach	State SC	
Purpose of Disbursement travel expense - gas		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Kangaroo Express #3064</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2012
Mailing Address 3710 Hwy 501		Amount of Each Disbursement this Period 48.48 <b>Transaction ID : D417609</b>
City Myrtle Beach	State SC	
Purpose of Disbursement travel expense- gas		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	154.24
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kangaroo Express #3064</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2012
Mailing Address 3710 Hwy 501		Amount of Each Disbursement this Period 47.47 <b>Transaction ID : D417610</b>
City Myrtle Beach	State SC	
Zip Code 29579	Purpose of Disbursement travel expense-gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Kangaroo Express #3064</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2012
Mailing Address 3710 Hwy 501		Amount of Each Disbursement this Period 46.00 <b>Transaction ID : D404473</b>
City Myrtle Beach	State SC	
Zip Code 29579	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Kangaroo Express #3064</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2012
Mailing Address 3710 Hwy 501		Amount of Each Disbursement this Period 48.00 <b>Transaction ID : D407742</b>
City Myrtle Beach	State SC	
Zip Code 29579	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	141.47
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kangaroo Express #3064</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2012	
Mailing Address 3710 Hwy 501			Amount of Each Disbursement this Period 50.01	
City Myrtle Beach	State SC	Zip Code 29579	Transaction ID : D407759	
Purpose of Disbursement travel expense- gas		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Kangaroo Express #3064</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2012	
Mailing Address 3710 Hwy 501			Amount of Each Disbursement this Period 56.56	
City Myrtle Beach	State SC	Zip Code 29579	Transaction ID : D407756	
Purpose of Disbursement travel expense- gas		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Kara's Creations</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012	
Mailing Address 302 Cascade Park Drive SW			Amount of Each Disbursement this Period 321.00	
City Atlanta	State GA	Zip Code 30331	Transaction ID : D406186	
Purpose of Disbursement t-shirt printing		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	427.57
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kara's Creations</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012
Mailing Address 302 Cascade Park Drive SW		Amount of Each Disbursement this Period 310.00 <b>Transaction ID : D417817</b>
City Atlanta	State GA Zip Code 30331	
Purpose of Disbursement campaign t-shirt printing	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ms. Lanina Linton</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 2140 Tillers Plow Row		Amount of Each Disbursement this Period 22.00 <b>Transaction ID : D416772</b>
City Effingham	State SC Zip Code 29541	
Purpose of Disbursement Grand opening food- cake	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ms. Lanina Linton</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 2140 Tillers Plow Row		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D409056</b>
City Effingham	State SC Zip Code 29541	
Purpose of Disbursement consulting services-field coordination	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	832.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. Lanina Linton</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 2140 Tillers Plow Row		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D410410</b>
City Effingham	State SC Zip Code 29541	
Purpose of Disbursement consulting services- field coordination		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mason Tire and Auto Service Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2012
Mailing Address 1700 Hwy 544		Amount of Each Disbursement this Period 169.05 <b>Transaction ID : D417843</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense- vehicle maintenance/tires		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ms Taylor Maynard</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : D407734</b>
City Georgetown	State SC Zip Code 29440	
Purpose of Disbursement consulting services- administrative services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	719.05
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms Taylor Maynard</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 330.00 <b>Transaction ID : D401113</b>
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement consulting services- admin. services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Murphy Express 8573</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2012
Mailing Address 2735 Church St.		Amount of Each Disbursement this Period 45.01 <b>Transaction ID : D417587</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Murphy Express 8573</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2012
Mailing Address 2735 Church St.		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : D417857</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	405.01
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP Van Inc</b>		Date of Disbursement MM / DD / YYYY 08 / 01 / 2012
Mailing Address 1101 15th Street NW Suite 500		Amount of Each Disbursement this Period 5,000.00 Transaction ID : D405580
City Washington State DC Zip Code 20005	Purpose of Disbursement campaign tracking,disbursemt,contribution system	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ms Mckean Nowlin</b>		Date of Disbursement MM / DD / YYYY 07 / 16 / 2012
Mailing Address 771 Murray Ave		Amount of Each Disbursement this Period 1,500.00 Transaction ID : D402951
City Myrtle Beach State SC Zip Code 29577-1734	Purpose of Disbursement consulting services: social media/communications	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Ms Mckean Nowlin</b>		Date of Disbursement MM / DD / YYYY 09 / 14 / 2012
Mailing Address 771 Murray Ave		Amount of Each Disbursement this Period 1,500.00 Transaction ID : D410678
City Myrtle Beach State SC Zip Code 29577-1734	Purpose of Disbursement consulting services: social media/communications	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5060.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms Mckean Nowlin</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 771 Murray Ave		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : D409061</b>
City Myrtle Beach	State SC	
Zip Code 29577-1734	Purpose of Disbursement consulting services: social media/communications	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 53.64 <b>Transaction ID : D407757</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 10.75 <b>Transaction ID : D407749</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1564.39
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 32.39
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 90.68
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 49.68
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	172.75
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot #2179</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 2701 Church Street Suite A			Amount of Each Disbursement this Period 54.24
City Conway	State SC	Zip Code 29526	
Purpose of Disbursement office supplies		Candidate Name	Transaction ID : D417612
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot #2179</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012
Mailing Address 2701 Church Street Suite A			Amount of Each Disbursement this Period 159.65
City Conway	State SC	Zip Code 29526	
Purpose of Disbursement office supplies		Candidate Name	Transaction ID : D417613
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot #2179</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 2701 Church Street Suite A			Amount of Each Disbursement this Period 73.07
City Conway	State SC	Zip Code 29526	
Purpose of Disbursement office supplies		Candidate Name	Transaction ID : D417614
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Category/ Type	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	286.96
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 59.34 <b>Transaction ID : D417615</b>
City Conway	State SC	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 52.35 <b>Transaction ID : D417616</b>
City Conway	State SC	
Purpose of Disbursement Office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 118.21 <b>Transaction ID : D417617</b>
City Conway	State SC	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	229.90
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 130.92 <b>Transaction ID : D417620</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 32.65 <b>Transaction ID : D417622</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 11.33 <b>Transaction ID : D417623</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	174.90
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr Reginald Poplus</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2012	
Mailing Address 2475 Enon Rd			Amount of Each Disbursement this Period 5500.00	
City Atlanta	State GA	Zip Code 30331	Transaction ID : <b>D416795</b>	
Purpose of Disbursement consulting services-campaign management		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Mr Reginald Poplus</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012	
Mailing Address 2475 Enon Rd			Amount of Each Disbursement this Period 4000.00	
City Atlanta	State GA	Zip Code 30331	Transaction ID : <b>D405968</b>	
Purpose of Disbursement consulting services- campaign management		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Mr Reginald Poplus</b>			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2012	
Mailing Address 2475 Enon Rd			Amount of Each Disbursement this Period 1500.00	
City Atlanta	State GA	Zip Code 30331	Transaction ID : <b>D404462</b>	
Purpose of Disbursement consulting services: campaign management		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr Reginald Poplus</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2012
Mailing Address 2475 Enon Rd		Amount of Each Disbursement this Period 4500.00 <b>Transaction ID : D409050</b>
City Atlanta	State GA Zip Code 30331	
Purpose of Disbursement consulting services- campaign management		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Print Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2012
Mailing Address PO Box 2034		Amount of Each Disbursement this Period 237.60 <b>Transaction ID : D407750</b>
City Conway	State SC Zip Code 29528	
Purpose of Disbursement printing - business cards		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Print Graphics</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address PO Box 2034		Amount of Each Disbursement this Period 75.60 <b>Transaction ID : D417890</b>
City Conway	State SC Zip Code 29528	
Purpose of Disbursement business cards		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4813.20
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms La'Monica Reed</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2012
Mailing Address 5202 Taft Watson Dr.		Amount of Each Disbursement this Period 210.00 <b>Transaction ID : D404547</b>
City Centenary	State SC Zip Code 29519	
Purpose of Disbursement consulting services - administrative services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Colin Rogero</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1343 Massachusetts Ave SE		Amount of Each Disbursement this Period -750.00 <b>Transaction ID : D407728</b>
City Washington	State DC Zip Code 20003-1540	
Purpose of Disbursement check lost and replaced with march payment		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Santee Cooper Electric</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 100 Elm Street		Amount of Each Disbursement this Period 336.60 <b>Transaction ID : D405967</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement utility services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-203.40
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 116 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Santee Cooper Electric</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2012
Mailing Address 100 Elm Street		Amount of Each Disbursement this Period 244.63 <b>Transaction ID : D401024</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement utility services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Santee Cooper Electric</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2012
Mailing Address 100 Elm Street		Amount of Each Disbursement this Period 283.10 <b>Transaction ID : D416887</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement electrical services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Robbin Shipp</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 6000.00 <b>Transaction ID : D416799</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement consulting services- general counsel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6527.73
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robbin Shipp</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : D405965</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement consulting services- general counsel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Robbin Shipp</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : D405966</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement consulting services- general counsel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Robbin Shipp</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 6000.00 <b>Transaction ID : D409049</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement consulting services- general counsel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. James E. Smith Jr. P.A</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2012		
Mailing Address 1422 Laurel Street			Amount of Each Disbursement this Period 1000.00		
City Columbia	State SC	Zip Code 29201	Transaction ID : D408553		
Purpose of Disbursement legal services		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Mr. James E. Smith Jr. P.A</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012		
Mailing Address 1422 Laurel Street			Amount of Each Disbursement this Period 1000.00		
City Columbia	State SC	Zip Code 29201	Transaction ID : D405963		
Purpose of Disbursement legal services		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Spirit Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2012		
Mailing Address 2800 Executive Way			Amount of Each Disbursement this Period 477.58		
City Hollywood	State FL	Zip Code 33025	Transaction ID : D417926		
Purpose of Disbursement travel expense- airfare		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2477.58
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. T &amp; S Properties Realty LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address 1401 West Bobby Gerald Parkway mailing address: Post Office Box 9		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : D406923</b>
City Marion State SC Zip Code 29571	Purpose of Disbursement office rent	
Candidate Name	Category/Type	
Office Sought: House Senate President	Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. T &amp; S Properties Realty LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2012
Mailing Address 1401 West Bobby Gerald Parkway mailing address: Post Office Box 9		Amount of Each Disbursement this Period 815.00 <b>Transaction ID : D401020</b>
City Marion State SC Zip Code 29571	Purpose of Disbursement office rent	
Candidate Name	Category/Type	
Office Sought: House Senate President	Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. T &amp; S Properties Realty LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2012
Mailing Address 1401 West Bobby Gerald Parkway mailing address: Post Office Box 9		Amount of Each Disbursement this Period 800.00 <b>Transaction ID : D412616</b>
City Marion State SC Zip Code 29571	Purpose of Disbursement office rent	
Candidate Name	Category/Type	
Office Sought: House Senate President	Disbursement For: 2012 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2415.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 120 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Royce Taylor</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2012
Mailing Address 1910 Mosher Dr		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : D417828</b>
City Enid	State OK	
Zip Code 73703	Purpose of Disbursement graphic design- invitation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Teleflora</b>		Date of Disbursement MM / DD / YYYY 09 / 01 / 2012
Mailing Address 11444 W.Olympic Blvd. 4th Floor		Amount of Each Disbursement this Period 169.45 <b>Transaction ID : D417824</b>
City Los Angeles	State CA	
Zip Code 90064	Purpose of Disbursement floral arrangement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Oblander Group LLC</b>		Date of Disbursement MM / DD / YYYY 09 / 27 / 2012
Mailing Address 1100 Spring St Suite 360		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : D416773</b>
City Atlanta	State GA	
Zip Code 30309	Purpose of Disbursement consulting services- Fundraising	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3199.45
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Allen Thomas</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address 1307 Academy Rd.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D410394</b>
City Bennettsville	State SC	
Zip Code 29512	Purpose of Disbursement consulting services- field coordination	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mr. Allen Thomas</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2012
Mailing Address 1307 Academy Rd.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D409057</b>
City Bennettsville	State SC	
Zip Code 29512	Purpose of Disbursement consulting services-field coordination	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. True Stories Research LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012
Mailing Address Post Office Box 16912		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D416890</b>
City Fernandina Beach	State FL	
Zip Code 32035	Purpose of Disbursement vulnerability scan	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2012
Mailing Address Conway Main PO		Amount of Each Disbursement this Period 23.32
City Conway	State SC Zip Code 29526-9998	
Purpose of Disbursement postage	Category/Type	<b>Transaction ID : D417877</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2012
Mailing Address Conway Main PO		Amount of Each Disbursement this Period 87.00
City Conway	State SC Zip Code 29526-9998	
Purpose of Disbursement postage	Category/Type	<b>Transaction ID : D417889</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address Conway Main PO		Amount of Each Disbursement this Period 22.26
City Conway	State SC Zip Code 29526-9998	
Purpose of Disbursement postage	Category/Type	<b>Transaction ID : D417965</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	132.58
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address Conway Main PO		Amount of Each Disbursement this Period 28.40 <b>Transaction ID : D407726</b>
City Conway	State SC Zip Code 29526-9998	
Purpose of Disbursement postage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2012
Mailing Address Conway Main PO		Amount of Each Disbursement this Period 40.50 <b>Transaction ID : D405028</b>
City Conway	State SC Zip Code 29526-9998	
Purpose of Disbursement postage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 701.27 <b>Transaction ID : D407727</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement phone service	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	770.17
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 201.12 <b>Transaction ID : D417932</b>
City Conway	State SC	
Purpose of Disbursement telephone service (campaign cell)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 30 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 16.82 <b>Transaction ID : D417831</b>
City Conway	State SC	
Purpose of Disbursement prepaid minutes		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Walmart #0586</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 24 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 19.11 <b>Transaction ID : D417594</b>
City Conway	State SC	
Purpose of Disbursement office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	237.05
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 164			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Walmart #0586</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 21.61 <b>Transaction ID : D417909</b>
City Conway	State SC	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Walmart #0586</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 21.02 <b>Transaction ID : D417967</b>
City Conway	State SC	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Walmart #0586</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 43.41 <b>Transaction ID : D407744</b>
City Conway	State SC	
Purpose of Disbursement office food	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	86.04
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Walmart #0586</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 14.79
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office food/supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Walmart #0586</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 09 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 61.19
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Wilco #949</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2012
Mailing Address 1365 E. Highway 501		Amount of Each Disbursement this Period 43.59
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	119.57
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 164			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wilco #949</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2012
Mailing Address 1365 E. Highway 501		Amount of Each Disbursement this Period 43.35 <b>Transaction ID : D407745</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Wilco #949</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2012
Mailing Address 1365 E. Highway 501		Amount of Each Disbursement this Period 41.75 <b>Transaction ID : D407746</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Wilco #949</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2012
Mailing Address 1365 E. Highway 501		Amount of Each Disbursement this Period 40.01 <b>Transaction ID : D407588</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	125.11
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wilco #949</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2012
Mailing Address 1365 E. Highway 501		Amount of Each Disbursement this Period 44.00 <b>Transaction ID : D417899</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Wilco #949</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2012
Mailing Address 1365 E. Highway 501		Amount of Each Disbursement this Period 54.54 <b>Transaction ID : D417893</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Wilco #949</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2012
Mailing Address 1365 E. Highway 501		Amount of Each Disbursement this Period 50.03 <b>Transaction ID : D417844</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense- gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	148.57
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Woodfield Group Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 09 / 27 / 2012
Mailing Address 1118 Old Breckenridge Lane		Amount of Each Disbursement this Period 2400.00
City Montgomery	State AL	
Zip Code 36117	Purpose of Disbursement Consulting Services (FEC Compliance/Regulations)	Transaction ID : D416777
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Woodfield Group Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2012
Mailing Address 1118 Old Breckenridge Lane		Amount of Each Disbursement this Period 1200.00
City Montgomery	State AL	
Zip Code 36117	Purpose of Disbursement Consulting Services (FEC Compliance/Regulations)	Transaction ID : D405964
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mr. Stephen Wukela</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2012
Mailing Address 331 Alligator Rd Post Office Box 13057		Amount of Each Disbursement this Period 1000.00
City Effingham	State SC	
Zip Code 29541	Purpose of Disbursement Florence Fundraiser Venue	Transaction ID : D409034
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	* In-Kind Received
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4600.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 130 OF 164	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robbin Shipp</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : D401112</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement phone banking expenses	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff

Full Name (Last, First, Middle Initial) <b>B. Mr. Jamar Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2012
Mailing Address 797 Willow Bend Dr		Amount of Each Disbursement this Period 700.00 <b>Transaction ID : D415735</b> <b>[MEMO ITEM]</b>
City Sandy Springs	State GA	
Zip Code 30328	Purpose of Disbursement phone banking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For:	State: District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	118602.23

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 164	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 1300.00 <b>Transaction ID : D409504</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement partial repayment of loan		Category/ Type
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : D407890</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement payment on run-off loan		Category/ Type 009
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Recount	
State: SC District: 07		

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : D414901</b> <b>[MEMO ITEM]</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement forgiveness of loan		Category/ Type
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC District: 07		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6300.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 164	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 1000.00
City Conway	State SC Zip Code 29526	
Purpose of Disbursement forgiveness of loan		Transaction ID : D414916
Candidate Name <b>Gloria Bromell Tinubu</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: SC District: 07	Category/Type	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	6300.00

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L775

**LOAN SOURCE** Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2012  
**Gloria Bromell Tinubu PERS FUNDS**  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1403 7th Ave

City State ZIP Code  
Conway SC 29526

Original Amount of Loan 5000.00	Cumulative Payment To Date 5000.00	Balance Outstanding at Close of This Period 0.00
------------------------------------	---------------------------------------	---

**TERMS**

Date Incurred: M 12 / D 20 / Y 2011  
 Date Due: M / D / Y none  
 Interest Rate: none % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ [ ] 0.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L776

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1403 7th Ave

City State ZIP Code  
Conway SC 29526

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 12 / D 30 / Y 2011 M M / D D / Y none % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 5000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L777

**LOAN SOURCE** Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2012  
**Gloria Bromell Tinubu PERS FUNDS**  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1403 7th Ave

City State ZIP Code  
Conway SC 29526

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred: M 02 / D 01 / Y 2012  
Date Due: M / D / Y none  
Interest Rate: none % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 10000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)  
LOANS**

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L779

**LOAN SOURCE** Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2012  
**Gloria Bromell Tinubu PERS FUNDS**  Primary  
 Mailing Address 1403 7th Ave  General  
 Other (specify) ▼

City State ZIP Code  
 Conway SC 29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 02 / D 14 / Y 2012	M / D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L792

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
13000.00	0.00	13000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 05 / Y 2012 Y	M M / D D / Y none Y Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	13000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L800

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1403 7th Ave

City State ZIP Code  
Conway SC 29526

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
51000.00 0.00 51000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 03 / D 30 / Y 2012 M M / D D / Y none none % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 51000.00  
**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L802

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1403 7th Ave

City State ZIP Code  
Conway SC 29526

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
10000.00 0.00 10000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
03 / 14 / 2012 none % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... 10000.00

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L803

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

03

14

2012

Date Due

non

Interest Rate

none

% (apr)

Secured:

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

10000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L804

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1000.00

1000.00

0.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

03

22

2012

none

none

% (apr)

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

0.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L818**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Gloria Bromell Tinubu PERS FUNDS  
Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1403 7th Ave  
City State ZIP Code  
Conway SC 29526

Original Amount of Loan 25000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25000.00
-------------------------------------	------------------------------------	---

**TERMS**  
Date Incurred: M 05 / D 14 / Y 2012  
Date Due: M / D / Y none  
Interest Rate: none % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional) ..... ▶ 25000.00  
**TOTALS** This Period (last page in this line only) ..... ▶ [ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L823

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M 05 /

D 21 /

Y 2012 Y

Date Due

M /

D /

Y none Y

Interest Rate

none

% (apr)

Secured:

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

5000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L825

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

M 05 / D 30 / Y 2012 Y Y

Date Due

M M / D D / Y none Y Y Y Y

Interest Rate

none % (apr)

Secured:

Yes

No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

25000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : L826  
**Gloria Bromell Tinubu for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 04 / Y 2012	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State 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:

<b>SUBTOTALS</b> This Period This Page (optional).....	30000.00
<b>TOTALS</b> This Period (last page in this line only).....	

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)  
LOANS**

NAME OF COMMITTEE (In Full) Transaction ID : L828  
**Gloria Bromell Tinubu for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 07 / Y 2012	M M / D D / Y no due date	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State 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:

<b>SUBTOTALS</b> This Period This Page (optional).....	30000.00
<b>TOTALS</b> This Period (last page in this line only).....	

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L830**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Gloria Bromell Tinubu PERS FUNDS  
 Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
1403 7th Ave  
 City State ZIP Code  
 Conway SC 29526

Original Amount of Loan 26000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 26000.00
-------------------------------------	------------------------------------	---

**TERMS**  
 Date Incurred: M 06 / D 11 / Y 2012  
 Date Due: M / D / Y no due date  
 Interest Rate: 0.00 % (apr)  
 Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 26000.00  
**TOTALS** This Period (last page in this line only)..... ▶ [ ]  
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L834**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff _____
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7000.00	5000.00	2000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 26 / Y 2012 Y Y	M M / D D / Y Y Y Y Y Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State 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: _____

<b>SUBTOTALS</b> This Period This Page (optional).....	2000.00
<b>TOTALS</b> This Period (last page in this line only).....	_____
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L839

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Runoff

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

3500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3500.00

**TERMS**

Date Incurred

M 07 / D 10 / Y 2012 Y

Date Due

M / D / Y no due date Y

Interest Rate

none % (apr)

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

3500.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Transaction ID : L840**  
**Gloria Bromell Tinubu for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff _____
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2500.00	0.00	2500.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 30 / Y 2012 Y Y	M M / D D / Y Y Y Y Y Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State 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: _____

<b>SUBTOTALS</b> This Period This Page (optional).....	2500.00
<b>TOTALS</b> This Period (last page in this line only).....	_____

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L846

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

1300.00

Balance Outstanding at Close of This Period

8700.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
08 / 06 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

8700.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L854**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
08 / 17 / 2012	none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State 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:

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L855

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000.00

0.00

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
08 / 20 / 2012

M M / D D / Y Y Y Y  
none

none % (apr)

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

5000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L856**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 08 / D 20 / Y 2012 Y	M / D / Y none Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L862**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
09 / 19 / 2012	no due date	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	3000.00
<b>TOTALS</b> This Period (last page in this line only).....	289700.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Gloria Bromell Tinubu**

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Nature of Debt (Purpose):  
William Romjue - Consulting Fee

Outstanding Balance Beginning This Period **5000.00** Transaction ID : **D377862**

Amount Incurred This Period **0.00** Payment This Period **5000.00** Outstanding Balance at Close of This Period **0.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Gloria Bromell Tinubu**

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Nature of Debt (Purpose):  
Priceline.com - staff housing

Outstanding Balance Beginning This Period **132.00** Transaction ID : **D378840**

Amount Incurred This Period **0.00** Payment This Period **132.00** Outstanding Balance at Close of This Period **0.00**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Gloria Bromell Tinubu**

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Nature of Debt (Purpose):  
USPS - Postage Stamps

Outstanding Balance Beginning This Period **45.00** Transaction ID : **D378841**

Amount Incurred This Period **0.00** Payment This Period **45.00** Outstanding Balance at Close of This Period **0.00**

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<b>0.00</b>
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>		Nature of Debt (Purpose): Regina Grant office expense-moving, office set up
Mailing Address 1403 7th Ave		
City State	Zip Code	
Conway SC	29526	

Outstanding Balance Beginning This Period	<b>Transaction ID : D383615</b>	
<input type="text" value="950.63"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="950.63"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>		Nature of Debt (Purpose): business expense- columbia meeting- cc trans
Mailing Address 1403 7th Ave		
City State	Zip Code	
Conway SC	29526	

Outstanding Balance Beginning This Period	<b>Transaction ID : D384205</b>	
<input type="text" value="52.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="52.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>		Nature of Debt (Purpose): campaign expense- tape,mints
Mailing Address 1403 7th Ave		
City	State Zip Code	
Conway	SC 29526	

Outstanding Balance Beginning This Period	<b>Transaction ID : D384229</b>	
<input type="text" value="4.15"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="4.15"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>		Nature of Debt (Purpose): business expense- us postal service overnight delivery
Mailing Address 1403 7th Ave		
City State	Zip Code	
Conway SC	29526	

Outstanding Balance Beginning This Period	<b>Transaction ID : D384283</b>	
<input type="text" value="18.95"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="18.95"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>		Nature of Debt (Purpose): business expense-lunch Democratic Conventions
Mailing Address 1403 7th Ave		
City State	Zip Code	
Conway SC	29526	

Outstanding Balance Beginning This Period	<b>Transaction ID : D384285</b>	
<input type="text" value="28.12"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="28.12"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>		Nature of Debt (Purpose): moving expense-Pro Pack Ship
Mailing Address 1403 7th Ave		
City	State Zip Code	
Conway	SC 29526	

Outstanding Balance Beginning This Period	<b>Transaction ID : D384286</b>	
<input type="text" value="32.66"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="72.66"/>	<input type="text" value="-40.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="-40.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>	Nature of Debt (Purpose): travel expense-gas-cc trans
Mailing Address 1403 7th Ave	
City State Zip Code Conway SC 29526	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="40.00"/>	<b>Transaction ID : D384287</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="40.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>	Nature of Debt (Purpose): travel expense-gas
Mailing Address 1403 7th Ave	
City State Zip Code Conway SC 29526	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="52.70"/>	<b>Transaction ID : D384288</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="52.70"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>	Nature of Debt (Purpose): office supplies-kitchen and cleaning supplies
Mailing Address 1403 7th Ave	
City State Zip Code Conway SC 29526	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="58.88"/>	<b>Transaction ID : D384289</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="0.00"/>	Payment This Period <input style="width:100%;" type="text" value="135.75"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="-76.87"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%;" type="text" value="-36.87"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gloria Bromell Tinubu**

Nature of Debt (Purpose):

Bennett's Calabash Seafood-dinner

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

76.87

**Transaction ID : D384290**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

76.87

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gloria Bromell Tinubu**

Nature of Debt (Purpose):

us postal service overnight delivery to Atlanta

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

16.15

**Transaction ID : D384291**

Amount Incurred This Period

0.00

Payment This Period

16.15

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gloria Bromell Tinubu**

Nature of Debt (Purpose):

IHOP Campaign lunch

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

46.74

**Transaction ID : D384292**

Amount Incurred This Period

0.00

Payment This Period

46.74

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

76.87

2) **TOTALS** This Period (last page this line number only) ..... ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Gloria Bromell Tinubu**

Nature of Debt (Purpose):  
us postal service-certified mail FEC

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

8.42

Transaction ID : D384293

Amount Incurred This Period

0.00

Payment This Period

8.42

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Gloria Bromell Tinubu**

Nature of Debt (Purpose):  
Pro Pack Ship- Priority Overnight letter for Bill Romjue

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

45.66

Transaction ID : D384294

Amount Incurred This Period

0.00

Payment This Period

45.66

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Gloria Bromell Tinubu**

Nature of Debt (Purpose):  
RPS Myrtle Beach

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

24.00

Transaction ID : D384295

Amount Incurred This Period

0.00

Payment This Period

24.00

Outstanding Balance at Close of This Period

0.00

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 2) **TOTALS** This Period (last page this line number only) ..... ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER:  
(check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gloria Bromell Tinubu**

Nature of Debt (Purpose):

Travel expense-Shell- gass

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

50.99

**Transaction ID : D384296**

Amount Incurred This Period

0.00

Payment This Period

50.99

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gloria Bromell Tinubu**

Nature of Debt (Purpose):

Campaign event expense-rental Horry County Parks and Recreation

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

80.00

**Transaction ID : D384521**

Amount Incurred This Period

0.00

Payment This Period

80.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gloria Bromell Tinubu**

Nature of Debt (Purpose):

Campaign event expense-catering by Aunnie's Rest.-cc trans

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

225.00

**Transaction ID : D384525**

Amount Incurred This Period

0.00

Payment This Period

225.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gloria Bromell Tinubu**

Nature of Debt (Purpose):

US postal office- stamps, overnight delivery- cc trans

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

46.40

**Transaction ID : D384527**

Amount Incurred This Period

0.00

Payment This Period

46.40

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gloria Bromell Tinubu**

Nature of Debt (Purpose):

IHOP - breakfast meeting

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

46.74

**Transaction ID : D384530**

Amount Incurred This Period

0.00

Payment This Period

46.74

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gloria Bromell Tinubu**

Nature of Debt (Purpose):

Ruby Tuesday- Campaign Dinner Meeting

Mailing Address 1403 7th Ave

City State Zip Code  
Conway SC 29526

Outstanding Balance Beginning This Period

54.00

**Transaction ID : D384532**

Amount Incurred This Period

0.00

Payment This Period

54.00

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

0.00

2) **TOTALS** This Period (last page this line number only) ..... ▶

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

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

NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>		Nature of Debt (Purpose): Expenses paid by candidate from 4/1-5/23
Mailing Address 1403 7th Ave		
City	State	Zip Code
Conway	SC	29526

Outstanding Balance Beginning This Period	<b>Transaction ID : D391948</b>	
<input type="text" value="814.53"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="814.53"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="0.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>