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#### FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	uthorized Com	mittee	Offic	e Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRIN		ample: If typing, type er the lines.	12FE4M5	
Gloria Bromell Tinu	ubu for Congres	S			1
ADDRESS (number and stree	PO Box 1022		(		
▼ Check if different					
than previously reported. (ACC)	Conway			SC 2952	28
e. FEC IDENTIFICATIO	N NIIMRED 🔻	CITY ▲		STATE A	ZIP CODE ▲
C C00508242	N NOMBER V	3. IS THIS REPORT	NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT
		NEFONI	(11)	(~)	
I. TYPE OF REPORT  (a) Quarterly Reports		(b) 12-Day <b>PRE</b>	-Election Report for th	ne:	
			Primary (12P)	General (12G)	Runoff (12R)
April 15 Quar	terly Report (Q1)	П	Convention (12C)	Special (12S)	
July 15 Quart	erly Report (Q2)				
October 15 Q	uarterly Report (Q3)	Election on	M M / D D	/ Y Y Y Y	in the State of
January 31 Ye	ear-End Report (YE)	(c) 30-Day <b>POS</b>	<b>T</b> -Election Report for	the:	
			General (30G)	Runoff (30R)	Special (30S)
Termination R	eport (TER)	Election on	M M / D D	/ Y " Y " Y	in the State of
i. Covering Period	M M / D D /	Y Y Y Y Y 2016	through	12	Y Y Y 2016
certify that I have examin	Fowler, Dona		owledge and belief it	is true, correct and con	mplete.
Type or Print Name of Trea	asurer				
Signature of Treasurer	Fowler, Donald, L, ,		[Electronically Filed]	Date 01 /	26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false,	erroneous, or incomple	te information may s	subject the person sign	ning this Report to the pe	nalties of 52 U.S.C. §3010
Office					
Use Only					EC FORM 3 (Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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2016

12

Write or Type Committee Name Gloria Bromell Tinubu for Congress

10 2016 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 125.00 2824.86 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 125.00 2824.86 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 125.00 12087.40 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 125.00 12087.40 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 66.53 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 374642.99 Schedule C and/or Schedule D).....

#### For further information contact:

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

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

#### **DETAILED SUMMARY PAGE**

of Receipts

PAGE 3 / 54 FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

#### Gloria Bromell Tinubu for Congress

10 2016 31 2016 Report Covering the Period: From: To:

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
11.	CONTRIBUTIONS (other than loans) FROM:				
	(a) Individuals/Persons Other Than				
	Political Committees (i) Itemized (use Schedule A)	0.00	1050.00		
	(ii) Unitemized	0.00	524.86		
	(iii) TOTAL of contributions from individuals	0.00	1574.86		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	250.00		
	(d) The Candidate(e) TOTAL CONTRIBUTIONS	125.00	1000.00		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	125.00	2824.86		
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
	LOANS:				
	(a) Made or Guaranteed by the Candidate	0.00	2301.33		
	(b) All Other Loans	0.00	100.00		
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	2401.33		
	OFFSETS TO OPERATING				
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00		
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	125.00	5226.19		

**DETAILED SUMMARY PAGE** 

of Disbursements

FEC Form 3 (Revised 05/2016)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	125.00	12087.40
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
 19.	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	100.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	100.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	125.00	12187.40
	III. CASH SUI	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	ITING PERIOD	66.53
24	TOTAL RECEIPTS THIS PERIOD (from Line 1	6, page 3)	125.00
25.	SUBTOTAL (add Line 23 and Line 24)		191.53
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	n Line 22)	125.00
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		66.53

### SCHEDULE A (FEC Form 3)

	F	OR	LINE	NU	MBER:	PAGE		5	OF	54	
Use separate schedule(s)	(c	he	ck only	or or	ne)						
for each category of the			11a		11b	11c	X	11c	t		
Detailed Summary Page			12		13a	13b		14		15	5
y not be sold or used by any p				•	•	solicitin	•		ribut	ons	

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may 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) Tinubu, Gloria, Bromell, , Date of Receipt Mailing Address 8 Laurel St 10 City State Zip Code Transaction ID: VNW1EETGES0 SC 29526-5154 Conway FEC ID number of contributing Amount of Each Receipt this Period H2SC07108 federal political committee. 125.00 Name of Employer Occupation self employed **Economist** Memo Item Receipt For: 2014 Election Cycle-to-Date **X** General Primary 1000.00 Other (specify) ▼ \* In-Kind: campaign finance software Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 125.00 SUBTOTAL of Receipts This Page (optional)..... 125.00 TOTAL This Period (last page this line number only).....

### SCHEDULE B (FEC Form 3)

**PAGE** 6 54 FOR LINE NUMBER: Use separate schedule(s) (check only one) for each category of the **x** 17 18 19a Detailed Summary Page 20a 20b 20c

ITEMIZED DISBURSEMENTS 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) Date of Disbursement Tinubu, Gloria, Bromell, , 2016 10 10 Mailing Address 8 Laurel St City State Zip Code **FEC Identification Number** SC Conway 29526-5154 Purpose of Disbursement campaign finance software H2SC07108 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2014 125.00 Office Sought: House Senate Primary ✗ General Transaction ID: VNW1EETGES0I Other (specify) President \* In-Kind Received Memo Item SC State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 125.00 TOTAL This Period (last page this line number only)..... 125.00

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

FOR LINE NUMBER: (check only one)

PAGE

13a

OF

		100
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	ess	Transaction ID : VNW1ECAQFA9L
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item   Election: 2012
Tinubu, Gloria, Bromell, ,	wilder initial)	Memo Item    Clection: 2012
Mailing Address 8 Laurel St		Other (specify)
City	State	ZIP Code  Personal Funds of the Candidate
Conway	SC	29526-5154
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		2000.00 3000.00
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M12M / D30D / Y Ž01Ť Y	M M / D D	/ Y ňoně Y none % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTALO This Day 1 This Box 1 T		
SUBTOTALS This Period This Page (options	ป)	3000.00
TOTALS This Period (last page in this line of	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

**PAGE** OF FOR LINE NUMBER: **x** 13a (check only one)

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13b Transaction ID: VNW1ECAQFR9L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none D01D M 02M Ž01Ž ňoně x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 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.

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

**PAGE** OF FOR LINE NUMBER: **x** 13a (check only one)

54

13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECAQFH4L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none <sup>D</sup>14<sup>D</sup> M 02M Ž01Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 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.

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

FOR LINE NUMBER: (check only one)

PAGE 10

13a

OF

		100
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	SS	Transaction ID : VNW1ECAQFE0L
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2012
Tinubu, Gloria, Bromell, ,	madic initialy	Memo Item    Clection: 2012
Mailing Address 8 Laurel St		Other (specify)   ———————————————————————————————————
City	State	ZIP Code  Responsible to the Candidate   Responsible to the Ca
Conway	SC	29526-5154 Tersonal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
13000.00		0.00 13000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03 <sup>M</sup> / D05 <sup>D</sup> / Y Ž01Ž Y	M M / D D	none % (apr) Yes X No
List All Endorsers or Guarantors (if any	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	N	
COSTOTALO TINO I ENOU TINO Page (optiona	·y	13000.00
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Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE 11

13a

OF

		100
NAME OF COMMITTEE (In Full)  Gloria Bromell Tinubu for Congres	SS	Transaction ID : VNW1ECAQFB6L
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	Memo Item Election: 2012
Tinubu, Gloria, Bromell, ,	ilidale iliitalij	Memo Item    Clection: 2012
Mailing Address 8 Laurel St		Other (specify)
City	State	ZIP Code  Responsible to the Candidate   Personal Funds of the Candidate
Conway	SC	29526-5154 Tersonal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
10000.00	,	0.00 10000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03M / D14D / Y Ž01Ž Y	M M / D D	/ Y Ynon <sup>Y</sup> Y none % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LINE 3, Se	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 12 OF FOR LINE NUMBER: (check only one)

**X** 13a 13b

		100
NAME OF COMMITTEE (In Full)  Gloria Bromell Tinubu for Congre	SS	Transaction ID : VNW1ECAQFN5L
LOAN SOURCE Full Name (Last, First, N	liddlo Initial)	Election: 0040
Tinubu, Gloria, Bromell, ,	nddie Iriitiai)	☐ Memo Item
Mailing Address 8 Laurel St		General Other (specify) ▼
City	State	ZIP Code  Responsible to the Candidate   Personal Funds of the Candidate
Conway	SC	29526-5154 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
10000.00	ļ,	0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03M / D14D / Y Ž01Ž Y	M M / D D	/ Y ňoně Y none % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
0.1	710.0.1	Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
	·	
SUBTOTALS This Period This Page (optional	)	10000.00
TOTALS This Period (last page in this line or	nly)	
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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13a 13b

OF

AME OF COMMITTEE (In Bloria Bromell Tinut	ou for Congress			saction ID : VNW1ECAQFC4L
Tinubu, Gloria, Br	•	Idle Initial)	☐ Memo Ite	em Election: 2012  x Primary  General
Mailing Address 8 Laurel St				Other (specify)
City		State	ZIP Code	V Personal Funds of the Condidate
Conway		SC	29526-5154	Personal Funds of the Candidate
Original Amount of Loa	al Amount of Loan Cumulative Payment			Balance Outstanding at Close of This Period
	51000.00		0.00	51000.00
TERMS Date Inco	urred	Г	ate Due Interest F	
M03M / D30D /	M03M / D30D / Y 2012 Y M M / D D /			none % (apr) Yes X No
List All Endorsers or G	Guarantors (if any) to	o Loan Source		
1. Full Name (Last, First	Full Name (Last, First, Middle Initial)			
Mailing Address			Occupation	
	la		Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9 9 9
2. Full Name (Last, First	t, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
	1	T	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9
3. Full Name (Last, First	t, Middle Initial)	•	Name of Employer	
Mailing Address			Occupation	
	1		Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9 9
4. Full Name (Last, First	t, Middle Initial)	!	Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9 9
IDTOTAL O This Desired T				
JOIOIALS IIIIS PERIOD I	ms rage (optional)		<u> </u>	51000.00
<b>)TALS</b> This Period (last p	page in this line only	)	······	9 9
arm, outstanding halance	only to LINE 2 Sol	adula D. for thi	line If no Schodule D. come	forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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13a 13b

OF

Gloria Bromell Tinu LOAN SOURCE Full Tinubu, Gloria, B	Name (Last, First, Mic		☐ Memo Item	<b>x</b> Primary
Mailing Address 8 Laurel St				General Other (specify) ▼
City		State	ZIP Code	Personal Funds of the Candidate
Conway		SC	29526-5154	reisonal runus of the Candidate
Original Amount of Lo	oan	Cumulative Pa	ment To Date Bala	ance Outstanding at Close of This Period
	25000.00	2	0.00	25000.00
TERMS Date In	curred	Г	ate Due Interest Rat	
M05M / D14D	/ ž01ž <sup>Y</sup>	M M / D D		one % (apr) Yes X No
List All Endorsers or	Guarantors (if any) to	o Loan Source		
1. Full Name (Last, Fi	irst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9 9
2. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	7 7 7 7
3. Full Name (Last, Fir	rst, Middle Initial)	1	Name of Employer	
Mailing Address			Occupation	
011	la		Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9 9
4. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
0.0	lo	710.0	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7
URTOTALS This Pariod	This Page (optional)			22222
				25000.00
OTALS This Period (last	page in this line only	/)	·····	
Carry outstanding balance	ce only to LINE 3. Sch	edule D. for this	line. If no Schedule D. carry for	ward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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13a 13b

OF

AME OF COMMITTEE (In Gloria Bromell Tinu	bu for Congress			
Tinubu, Gloria, B	•	Idle Initial)	☐ Memo It	em Election: 2012  X Primary  General
Mailing Address 8 Laurel St				Other (specify)
City		State	ZIP Code	Personal Funds of the Candidate
Conway		SC	29526-5154	Personal Funds of the Candidate
Original Amount of Lo	an	Cumulative Page	yment To Date	Balance Outstanding at Close of This Period
	5000.00	,	0.00	5000.00
TERMS Date Inc	curred	С	Date Due Interest F	
M05M / D21D /	Y Ž01Ž Y	M M / D D	/ Y ňoně Y	none % (apr) Yes No
List All Endorsers or	Guarantors (if any) to	o Loan Source		
1. Full Name (Last, Fin	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
	la		Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9 9
3. Full Name (Last, Fire	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	Ctata	ZID Code	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7
4. Full Name (Last, First	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
	Ta	T=	Amount	
City	State	ZIP Code	Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,
NUDTOTAL O TILL D	This David ( ) "	•		
UBIUIALS This Period	rnis Page (optional)		<u> </u>	5000.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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<b>LOAN SOURCE</b> Full Name Tinubu, Gloria, Brom		ddle Initial)	Memo Item Election: 2012  x Primary General		
Mailing Address 8 Laurel St			Other (specify) ▼		
City		State SC	P Code  29526-5154  Personal Funds of the Candidat		
Original Amount of Loan		Cumulative Pa	ent To Date Balance Outstanding at Close of This Period		
25000.00			0.00 25000.00		
TERMS Date Incurred Date Du			Due Interest Rate (If none, enter 0)  Y none  none  % (apr)  Yes  Note    Note   Note    Note		
List All Endorsers or Guar	antors (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, M	iddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:		
3. Full Name (Last, First, M	iddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:		
4. Full Name (Last, First, M	iddle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:		
IBTOTALS This Period This	Page (optional)		25000.00		

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

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13b Transaction ID: VNW1ECAQFG6L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 30000.00 0.00 30000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none D04D M 06M Ž01Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 30000.00 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.

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

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AME OF COMMITTEE (I Gloria Bromell Tinu	ubu for Congress			
Tinubu, Gloria, E	n Election: 2012  x Primary  General			
Mailing Address 8 Laurel St	Other (specify) ▼			
City		State	ZIP Code	Personal Funds of the Candidate
Conway		SC	29526-5154	Fersonal Funds of the Candidate
Original Amount of Lo	oan	Cumulative Pa	yment To Date Ba	alance Outstanding at Close of This Period
	30000.00	7	0.00	30000.00
TERMS Date In	ncurred	С	ate Due Interest Ra	
<sup>M</sup> 06 <sup>M</sup> / <sup>D</sup> 07 <sup>D</sup>	/ Y Ž01Ž Y	M M / D D		none % (apr) Yes No
List All Endorsers or	Guarantors (if any) to	o Loan Source		
1. Full Name (Last, F	irst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	9
2. Full Name (Last, Fin	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
011	la		Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9 9
3. Full Name (Last, Fin	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
City		ZIP Code	Outstanding:	9 9
4. Full Name (Last, Fi	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	Amount City State ZIP Code Guaranteed			
City	State	ZIP Code	Outstanding:	9 9
SUBTOTALS This Period	This Page (optional)			20000.00
				30000.00
UIALS INIS Period (las	ι page in this line only		·····	
Carry outstanding balan	ce only to LINE 3. Sch	edule D. for this	s line. If no Schedule D. carry fo	rward to appropriate line of Summary.

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

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13b Transaction ID: VNW1ECAQFS7L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 26000.00 0.00 26000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>11 <sup>D</sup> M 06M Ž01Ž no due date x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 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.

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Transaction ID: VNW1ECAQFK0L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St ✗ Other (specify) ▼ Runoff City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 7000.00 6700.00 300.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none <sup>D</sup>26<sup>D</sup> M 06M Ž01Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 300.00 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.

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

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OF

IAME OF COMMITTEE (II Gloria Bromell Tinu	•	3	Transa	action ID : VNW1ECAQFW1L
LOAN SOURCE Full Tinubu, Gloria, B	Election: 2012 Primary General			
Mailing Address 8 Laurel St	▼ Other (specify) ▼ Runoff			
City		State	ZIP Code	Personal Funds of the Candidate
Conway		SC	29526-5154	r ersonal runus of the Candidate
Original Amount of Lo	oan	Cumulative Page	yment To Date Ba	lance Outstanding at Close of This Period
	2500.00	9	2000.00	500.00
TERMS Date In	ncurred	С	rate Due Interest Ra	
M06M / D30D	/ Ž01Ž Y	M M / D D		% (apr) Yes X No
List All Endorsers or	· · · · · · · · · · · · · · · · · · ·	o Loan Source		
1. Full Name (Last, F	irst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	te ZIP Code Amount Guaranteed Outstanding:		
2. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
	la		Amount Guaranteed	
City	State	ZIP Code	Outstanding:	, ,
3. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
O:t-	04-4-	7ID 0- 1-	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7 7 7
4. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
Amount		Amount Guaranteed		
City	State	ZIP Code	Outstanding:	7
SUBTOTALS This Period	This Page (optional)			500.00
				300.00
Carry outstanding baland	ce only to LINE 3. Sch	edule D. for this	s line. If no Schedule D. carry for	rward to appropriate line of Summary.

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

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Transaction ID: VNW1ECAQFX9L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St ✗ Other (specify) ▼ Runoff City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3500.00 2500.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none <sup>D</sup>10<sup>D</sup> M 07M Ž01Ž no due date x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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(check only one)

BER: **X** 13a 13b

LOAN SOURCE Full Name Tinubu, Gloria, Brom		ddle Initial)	☐ Memo Item
Mailing Address 8 Laurel St			Other (specify) ▼
City		State	IP Code  29526-5154  Personal Funds of the Candidate
Original Amount of Loan		Cumulative Pa	ent To Date Balance Outstanding at Close of This Perio
, , ,	10000.00	9	1300.00 8700.00
TERMS Date Incurred	ž01Ž <sup>Y</sup>	M M / D	e Due Interest Rate (If none, enter 0)  y none
List All Endorsers or Guar		to Loan Source	
1. Full Name (Last, First, N	Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, M	iddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, M	iddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, M	iddle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
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OF

		Tanasad'an ID MANAFOAGEAL				
NAME OF COMMITTEE (In Full)  Gloria Bromell Tinubu for Cong	rass	Transaction ID: VNW1ECAQFZ4L				
9		Memo Item Election: 2012				
	LOAN SOURCE Full Name (Last, First, Middle Initial)					
Tinubu, Gioria, Bromeii, ,	Tinubu, Gloria, Bromell, ,					
Mailing Address 8 Laurel St	Mailing Address 8 Laurel St					
City	State	ZIP Code  Responsibility of the Candidate				
Conway	SC	29526-5154				
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period				
5000.00		0.00 5000.00				
TERMS Date Incurred	С	Date Due Interest Rate Secured: (If none, enter 0)				
M08M / D17D / Y Z01Z Y	M M / D D	/ Y ňoně Y none % (apr) Yes X No				
List All Endorsers or Guarantors (if a	nv) to Loan Source					
Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City Sta	te ZIP Code	Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)	1	Name of Employer				
Mailing Address		Occupation				
		Amount				
City	te ZIP Code	Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City	te ZIP Code	Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)	l	Name of Employer				
Mailing Address		Occupation				
		Amount				
City	te ZIP Code	Guaranteed Outstanding:				
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Carry outstanding balance only to LINE 3	, Schedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.				

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OF

AME OF COMMITTEE (I Gloria Bromell Tin	ubu for Congress		Transaction ID : VNW1ECAQG02L	
Tinubu, Gloria, E	Memo Item Election: 2012 Primary General			
Mailing Address 8 Laurel St			Other (specify) ▼	
City		State	ZIP Code	
Conway		SC	29526-5154 Personal Funds of the Ca	andidate
Original Amount of L	oan	Cumulative Pa	ment To Date  Balance Outstanding at Close of Th	is Period
, , , , ,	5000.00		0.00 5000.	00
TERMS Date In	ncurred	Г	ate Due Interest Rate Secured: (If none, enter 0)	
M08M / D20D	/ <u>Y Ž01Ž</u> Y	M M / D D	/ Y ňoně Y none % (apr) Yes	x No
List All Endorsers or	Guarantors (if any) to	o Loan Source		
1. Full Name (Last, F	First, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
0.1		710.0	Amount Guaranteed	7
City	State	ZIP Code	Outstanding:	_
2. Full Name (Last, Fi	irst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
	la	T=15 0 1	Amount Guaranteed	7
City	State	ZIP Code	Outstanding:	_
3. Full Name (Last, Fi	irst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	7
City	State	ZIP Code	Guaranteed Outstanding:	_
4. Full Name (Last, Fi	irst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

Gloria Bromell Tinu				Let "	
Tinubu, Gloria, B	Election: 2012 Primary General				
Mailing Address 8 Laurel St	Mailing Address 8 Laurel St				
City		State	ZIP Code	✗ Personal Funds of the Candidate	
Conway		SC	29526-5154	1 croonary and or the canadate	
Original Amount of Lo	oan	Cumulative Pa	yment To Date E	Balance Outstanding at Close of This Period	
7	10000.00	7	0.00	10000.00	
TERMS Date In	ncurred	С	ate Due Interest F		
M08M / D20D	/ Ž01Ž Y	M M / D D	/ Y ňoně Y	none % (apr) Yes No	
List All Endorsers or	· · · · · · · · · · · · · · · · · · ·	o Loan Source			
1. Full Name (Last, Fi	irst, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , , ,	
2. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
	1-	T	Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9 9	
3. Full Name (Last, Fir	rst, Middle Initial)	•	Name of Employer		
Mailing Address			Occupation		
	la		Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9 9	
4. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
			Amount		
City	State	ZIP Code	Guaranteed Outstanding:	9 9	
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(check only one)

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AME OF COMMITTEE (In I Gloria Bromell Tinub	ou for Congress			action ID: VNW1ECAQG86L
LOAN SOURCE Full Na Tinubu, Gloria, Bro	m Election: 2012 Primary General			
Mailing Address 8 Laurel St				Other (specify) ▼
City		State	ZIP Code	
Conway		SC	29526-5154	Y Personal Funds of the Candidate
Original Amount of Loar	n	Cumulative Pa	ment To Date B	alance Outstanding at Close of This Period
3	3000.00		0.00	3000.00
TERMS Date Incu	ırred	Γ	ate Due Interest R	
M09M / P19P /	<sup>Y</sup> Ž01Ž <sup>Y</sup>	M M / D D		0.00 % (apr) Yes No
List All Endorsers or G	uarantors (if any) to	o Loan Source		
1. Full Name (Last, Firs	t, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
0"	lo	710.0	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7
2. Full Name (Last, First	, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
	la	T=15 0 .	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7
3. Full Name (Last, First	, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
	T-	T	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9
4. Full Name (Last, First	, Middle Initial)	'	Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9 9
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	ino raye (optional)			3000.00
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arny outstanding halance	only to LINE 2 Sol	edule D for this	line If no Schedule D. carry fo	prward to appropriate line of Summary.

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OF

_		100			
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	ess	Transaction ID : VNW1ECAQG36L			
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2012			
Tinubu, Gloria, Bromell, ,	Memo Item Primary  General				
Mailing Address 8 Laurel St	Mailing Address 8 Laurel St				
City	State	ZIP Code  Personal Funds of the Candidate			
Conway	SC	29526-5154 Personal Funds of the Candidate			
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period			
5000.00	,	0.00 5000.00			
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)			
M10M / D25D / Y Ž01Ž Y	M M / D D	y ňoně y 0.00 % (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			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer			
Mailing Address		Occupation			
		Amount Guaranteed			
City	ZIP Code	Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount Guaranteed			
City	ZIP Code	Outstanding:			
4. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
	·				
SUBTOTALS This Period This Page (options	ıl)	5000.00			
TOTALS This Period (last page in this line of	nly)	······			
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.			

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			13b
NAME OF COMMITTEE (In Full)	_	Tra	nsaction ID: VNW1ECAQGB9L
Gloria Bromell Tinubu for Congres	S		
LOAN SOURCE Full Name (Last, First, Mi	☐ Memo I	tem Election: 2012	
Tinubu, Gloria, Bromell, ,			Primary
Mailing Address			General Other (consist)
Mailing Address 8 Laurel St			Other (specify)   ———————————————————————————————————
City	State	ZIP Code	X Personal Funds of the Candidate
Conway	SC	29526-5154	
Original Amount of Loan	Cumulative Pay	ment To Date	Balance Outstanding at Close of This Period
10000.00	2	0.00	10000.00
TERMS Date Incurred	С	ate Due Interest (If none,	
M11M / D01D / Y Z01Z Y	M M / D D	/ Y ňoně Y	none % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	7 7 7
3. Full Name (Last, First, Middle Initial)	·	Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	· · · · · · · · · · · · · · · · · · ·
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	7
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Carry outstanding balance only to LINE 3. Sc	hadula D for this	line If no Schedule D. carry	forward to appropriate line of Summary

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OF

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	ME OF COMMITTEE (In Full) Ioria Bromell Tinubu for Co	ongres	5		Transa	ction ID : VNW1ECAQG60L				
	LOAN SOURCE Full Name (Last, Tinubu, Gloria, Bromell, ,	Election: 2012 Primary								
L	Mailing Address 8 Laurel St		✓ General Other (specify) ▼							
	City		State ZIP Co			Personal Funds of the Candidate				
Original Amount of Loan			Cumulative Payment To			ance Outstanding at Close of This Period				
					0.00					
	TERMS Date Incurred			Date Due	Interest Ra					
	M11M / D13D / Y Ž01Ž	Υ	M M / D D	/ Y	none					
	List All Endorsers or Guarantors (if any) to Loan Source									
	Full Name (Last, First, Middle Initial)				Name of Employer					
	Mailing Address			Occupation	ion					
-	City	State	ZIP Code		Amount Guaranteed					
			Zii Gode		o atotag.	7				
	2. Full Name (Last, First, Middle Ir	nitial)			Name of Employer  Occupation					
	Mailing Address									
	City	State	ZIP Code		Amount Guaranteed Outstanding:	9 9 9				
	3. Full Name (Last, First, Middle Ir	nitial)			Name of Employer  Occupation					
-	Mailing Address									
					Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	9 9				
	4. Full Name (Last, First, Middle Ir	nitial)		Name of Employer						
	Mailing Address			Occupation						
	City State ZIP Code				Amount Guaranteed					
	Oity	State	ZIF Code		Outstanding:	9				
SU	IBTOTALS This Period This Page (	(optional) ··				15000.00				
τn	TALS This Period (last page in this	s line only	·)							
	The rened (last page in the		,			y y				
Ca	arry outstanding balance only to LI	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry for	ward to appropriate line of Summary.				

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

PAGE 31 OF FOR LINE NUMBER: **x** 13a (check only one)

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECAQG10L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 2500.00 0.00 2500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none M 12M <sup>D</sup>26<sup>D</sup> Ž01Ž no due date x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 2500.00 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.

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

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OF

		100								
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	SS	Transaction ID : VNW1ECAQG44L								
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2012								
Tinubu, Gloria, Bromell, ,	Primary									
	<b>X</b> General									
Mailing Address 8 Laurel St		Other (specify)   ———————————————————————————————————								
City	State	ZIP Code  Personal Funds of the Candidate								
Conway	SC	29526-5154 Personal Funds of the Candidate								
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period								
5000.00		0.00 5000.00								
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)								
M12 <sup>M</sup> / D26 <sup>D</sup> / Y Ž01Ž Y	M M / D D	/ Yno due date none % (apr) Yes ✗ No								
List All Endorsers or Guarantors (if any)	List All Endorsers or Guarantors (if any) to Loan Source									
1. Full Name (Last, First, Middle Initial)		Name of Employer								
Mailing Address		Occupation								
		Amount								
City	ZIP Code	Guaranteed Outstanding:								
2. Full Name (Last, First, Middle Initial)		Name of Employer								
Mailing Address		Occupation								
		Amount								
City	ZIP Code	Guaranteed Outstanding:								
3. Full Name (Last, First, Middle Initial)		Name of Employer								
Mailing Address		Occupation								
		Amount								
City	ZIP Code	Guaranteed Outstanding:								
4. Full Name (Last, First, Middle Initial)	'	Name of Employer								
Mailing Address		Occupation								
		Amount								
City	ZIP Code	Guaranteed Outstanding:								
	·									
SUBTOTALS This Period This Page (optional	)	5000.00								
TOTALS This Period (last page in this line or	nly)	······································								
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.								

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

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13b Transaction ID: VNW1ECAQGA1L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none D31 D M 12M Ž01Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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					13b					
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress	Transaction ID : VNW1ECAQFY7L									
LOAN COURCE Full Name (Lost First Middle Initial)										
	Item   Ele	Primary								
Tinubu, Gloria, Bromell, ,		×	⊣ <u> </u>							
Mailing Address 8 Laurel St					Other (specify) ▼					
City	State	ZIP Code			Personal Funds of the Candidate					
Conway	Conway SC			526-5154 T Cristilal 1 unds of the Garidida						
Original Amount of Loan	Original Amount of Loan Cumulative Payment To				Date Balance Outstanding at Close of This Period					
1000.00	2	7	0.00 1000.00							
TERMS Date Incurred	D	Date Due	Interest (If none,		Secured:					
M06M / D03D / Y Ž01Š Y	M M / D D	/ Y 1	ňone y none % (apr) Yes X No							
List All Endorsers or Guarantors (if any) t	o Loan Source									
Full Name (Last, First, Middle Initial)		1	Name of Employer							
Mailing Address		(	Occupation							
		,	Amount							
City	ZIP Code		Guaranteed Outstanding:	-	, , , , , ,					
2. Full Name (Last, First, Middle Initial)	'	1	Name of Employer							
Mailing Address		(	Occupation							
			Amount							
City	ZIP Code		Guaranteed Outstanding:	7	7					
3. Full Name (Last, First, Middle Initial)		1	Name of Employer							
Mailing Address		(	Occupation							
			Amount							
City	ZIP Code	(	Guaranteed Outstanding:	7	,					
4. Full Name (Last, First, Middle Initial)		1	Name of Employer							
Mailing Address		(	Occupation							
			Amount							
City	ZIP Code		Guaranteed Outstanding:	7						
SUBTOTALS This Period This Page (optional)										
TOTALS This Period (last page in this line only)										
Carry outstanding balance only to LINE 3. Sci	nedule D. for this	e line If no	Schedule D. carry	forward	to appropriate line of Summary					

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

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13b Transaction ID: VNW1ECAQG28L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>28<sup>D</sup> M 06M ž013 no due date x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 500.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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13b Transaction ID: VNW1ECAQG93L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 200.00 0.00 200.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none D01D M 07M ž013 no due date x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 200.00 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.

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

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OF

NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECAQGG9L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3500.00 0.00 3500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none D09D M 07M ž013 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 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.

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OF

IAME OF COMMITTEE (II Gloria Bromell Tinu	ubu for Congress			action ID : VNW1ECAQGE3L		
Tinubu, Gloria, B		☐ Memo Iter	m Election: 2012 Primary General			
Mailing Address 8 Laurel St				Other (specify) ▼		
City		State	ZIP Code	V Davestal Funds of the Condidate		
Conway		SC	29526-5154	Personal Funds of the Candidate		
Original Amount of Lo	oan	Cumulative Page	ment To Date Ba	alance Outstanding at Close of This Period		
,	1500.00		0.00	1500.00		
TERMS Date In	ncurred	С	ate Due Interest Ra			
M09M / D30D	/ ¥ Ž013 Y	M M / D D	/ Y ňoně Y	none % (apr) Yes No		
List All Endorsers or	Guarantors (if any) to	o Loan Source				
1. Full Name (Last, F	irst, Middle Initial)		Name of Employer			
Mailing Address			Occupation	Occupation		
City	Ctata	ZID Code	Amount Guaranteed			
City	State	ZIP Code	Outstanding:			
2. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	Ctata	ZID Code	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9 9		
3. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
	la	o .	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	7		
4. Full Name (Last, Fir	rst, Middle Initial)	•	Name of Employer	Name of Employer		
Mailing Address			Occupation	Occupation		
	I -		Amount			
City	State	ZIP Code	Guaranteed Outstanding:	9		
	<b>'</b>	•				
SUBTOTALS This Period	This Page (optional)		·····	1500.00		
OTALS This Period (last	t page in this line only	·)				
Carry outstanding balance	ce only to LINE 3. Sch	edule D. for this	s line. If no Schedule D. carry fo	orward to appropriate line of Summary.		

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

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NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for C	ongress	6		Trai	nsaction ID: VNW1ECAQGN8L		
LOAN SOURCE Full Name (Last Tinubu, Gloria, Bromell, ,		Idle Initial)		☐ Memo I	Primary		
Mailing Address 8 Laurel St					✓ General Other (specify) ▼		
City		State	ZIP Co	de			
Conway		SC	29526	-5154	Personal Funds of the Candidate		
Original Amount of Loan		Cumulative Pay	yment To	Date	Balance Outstanding at Close of This Period		
, , , , , , , , , , , ,	00.00	2		0.00	700.00		
TERMS Date Incurred		D	ate Due	Interest (If none,			
M11M / D15D / Y 2013	Y	M M / D D	/ Y	ňoně <sup>Y</sup>	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors	(if any) to	o Loan Source					
1. Full Name (Last, First, Middle	Initial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	9 9		
2. Full Name (Last, First, Middle I	nitial)			Name of Employer			
Mailing Address			Occupation				
				Amount Guaranteed			
City	State	ZIP Code		Outstanding:	9 9		
3. Full Name (Last, First, Middle I	nitial)			Name of Employer			
Mailing Address				Occupation			
City	State	ZIP Code		Amount Guaranteed Outstanding:	7 7 7		
4. Full Name (Last, First, Middle I	nitial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	7 7 7 7		
SUBTOTALS This Period This Page	SUBTOTALS This Period This Page (optional)						
TOTALS This Period (last page in th					700.00		
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Carry outstanding balance only to L	INE 3, Sch	edule D, for this	s line. If	no Schedule D, carry	forward to appropriate line of Summary.		

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

FOR LINE NUMBER: (check only one)

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OF

IAME OF COMMITTEE (I Gloria Bromell Tin	ubu for Congress		Trans.	action ID : VNW1ECAQGH7L		
Tinubu, Gloria, E	Name (Last, First, Mic Bromell, ,	☐ Memo Iter	m Election: 2014  X Primary  General			
Mailing Address 8 Laurel St				Other (specify)		
City		State	ZIP Code	X Personal Funds of the Candidate		
Conway		SC	29526-5154	Fersonal Funds of the Candidate		
Original Amount of L	oan	Cumulative Page	yment To Date Ba	alance Outstanding at Close of This Period		
	10000.00	7	0.00	10000.00		
TERMS Date In	ncurred	С	Pate Due Interest Ra			
M02M / D13D	/ Ž014 Y	M M / D D		none % (apr) Yes No		
	Guarantors (if any) t	o Loan Source				
1. Full Name (Last, F	First, Middle Initial)		Name of Employer			
Mailing Address			Occupation	Occupation		
City	City State ZIP Code			, , , , , , , , ,		
2. Full Name (Last, Fi	rst, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
	I-		Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9 9		
3. Full Name (Last, Fi	rst, Middle Initial)	·	Name of Employer			
Mailing Address			Occupation			
0''		710.0	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9 9		
4. Full Name (Last, Fi	irst, Middle Initial)		Name of Employer			
Mailing Address			Occupation	Occupation		
C:t-	Ctata	ZID Code	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9		
SUBTOTALS This Period	d This Page (optional)			10000.00		
				10000.00		
			,	9 9		
Carry outstanding balan	ce only to LINE 3. Sch	edule D. for this	s line. If no Schedule D. carry fo	rward to appropriate line of Summary.		

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

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECAQGK2L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1350.00 0.00 1350.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none D09D M 05M ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1350.00 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.

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

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECB2ZK1L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1500.00 0.00 1500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 15D M 07M ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1500.00 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.

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

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECB2ZN7L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1800.00 0.00 1800.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>23<sup>D</sup> M 07M ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1800.00 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.

Use separate schedule(s) for each category of the

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**X** 13a Detailed Summary Page 13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECRDBQ2L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 15D <sup>M</sup>80<sup>M</sup> ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

AME OF COMMITTEE (I Gloria Bromell Tini	ubu for Congress		Trans	action ID: VNW1ECZ6ZM2L		
Tinubu, Gloria, E	•	Idle Initial)	☐ Memo Iter	m Election: 2014 Primary General		
Mailing Address 8 Laurel St				Other (specify)		
City		State	ZIP Code	N Demond Foods of the Oscillation		
Conway		SC	29526-5154	Personal Funds of the Candidate		
Original Amount of L	oan	Cumulative Pa	ment To Date Ba	alance Outstanding at Close of This Period		
,	6500.00		4000.00	2500.00		
TERMS Date In	ncurred	Г	ate Due Interest Ra			
M09M / D21D	/ ¥ ž014 ¥	M M / D D	/ Y ňoně Y	0.00 % (apr) Yes X No		
List All Endorsers or	Guarantors (if any) to	o Loan Source				
1. Full Name (Last, F	First, Middle Initial)		Name of Employer			
Mailing Address			Occupation	Occupation		
		710.0	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	yy		
2. Full Name (Last, Fi	rst, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
0"	la	710.0.1	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9 9		
3. Full Name (Last, Fi	rst, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
			Amount Guaranteed			
City	State	ZIP Code	Outstanding:	, , , , , ,		
4. Full Name (Last, Fi	rst, Middle Initial)	'	Name of Employer	Name of Employer		
Mailing Address			Occupation	Occupation		
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	9		
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				2500.00		
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arry outstanding balan	ce only to LINE 3. Sch	edule D. for this	line. If no Schedule D. carry fo	rward to appropriate line of Summary.		

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			Detailed Summar	y Page		13b
IAME OF COMMITTEE (In Full)  Transaction ID : VNW1ED3WER9L						
Gloria Bromell Tinubu for Congress						
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo	Item Elec	etion: 2012	
Tinubu, Gloria, Bromell, ,				×	Primary General	
Mailing Address 8 Laurel St					Other (specify) ▼	
City	State	ZIP Code	<del></del>			
Conway	SC	29526-5	154	X	Personal Funds of the C	andidate
Original Amount of Loan	Cumulative Page	yment To D	Date	Balance C	Outstanding at Close of Th	nis Period
500.00			0.00		500	.00
TERMS Date Incurred		Date Due	Interes		Secured:	
M09M / P21P / Y Ž014 Y	M M / D D	/ Y	(If none,	0.00	1 -	
					% (apr) Yes	X No
List All Endorsers or Guarantors (if any) t	o Loan Source		Name of Employer			
Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount			
City	ZIP Code		Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)	l		Name of Employer			
Mailing Address			Occupation			
			Amount			
City State	ZIP Code		Guaranteed Outstanding:	7	9	
3. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount			_
City	ZIP Code		Guaranteed Outstanding:	7		_
4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address		Occupation				
			Amount			_
City	ZIP Code		Guaranteed Outstanding:	9	9	_
SUBTOTALS This Period This Page (optional).	SUBTOTALS This Period This Page (optional) 500.00					
TOTALS This Period (last page in this line only	/)		·····•		, , , , , ,	
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	s line. If no	Schedule D, carry	forward t	to appropriate line of Su	mmary.

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

PAGE 47 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ED5M069L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10<sup>M</sup> none <sup>D</sup>16<sup>D</sup> ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 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.

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

FOR LINE NUMBER: (check only one)

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13a

OF

		100
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	ess	Transaction ID : VNW1ED85ZM5L
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2014
Tinubu, Gloria, Bromell, ,  Mailing Address 8 Laurel St		General Other (specify) ▼
City	State	ZIP Code
Conway	SC	29526-5154 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
6000.00	,	0.00 6000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M10 <sup>M</sup> / D29 <sup>D</sup> / Y Ž014 Y	M M / D D	/ Y ňoně Y none % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
011	710.0.1	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZID Code	Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
City	ZIP Code	Outstanding:
SUBTOTALS This Period This Page (optional	ıl)	
		, , , , , , , , , , , , , , , , , , , ,
TOTALS This Period (last page in this line of	nly)	<b>•</b>
Carry outstanding balance only to LINE 3, 9	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 49 OF
FOR LINE NUMBER:
(check only one)

**X** 13a 13b

NAME OF COMMITTEE (In F Gloria Bromell Tinub	•	5	Trans	saction ID : VNW1ED9S8Q8L		
LOAN SOURCE Full Na Tinubu, Gloria, Bro	•	☐ Memo Ite	Election: 2014 Primary  General			
Mailing Address 8 Laurel St				Other (specify) ▼		
City		State	ZIP Code	Personal Funds of the Candidate		
Conway		SC	29526-5154	1 Craomai i unua oi tire Gamaidate		
Original Amount of Loan		Cumulative Pay	yment To Date E	Balance Outstanding at Close of This Period		
	1100.00	7	0.00	1100.00		
TERMS Date Incur	rred	С	Date Due Interest F (If none, e			
M11 <sup>M</sup> / D04 <sup>D</sup> /	<sup>Y</sup> 2014 <sup>Y</sup>	M M / D D	/ Y ňoně Y	0.00 % (apr) Yes X No		
List All Endorsers or Gu	, ,,	o Loan Source	[N 65 ]			
1. Full Name (Last, First	, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	City State ZIP Code			Amount Guaranteed Outstanding:		
2. Full Name (Last, First,	Middle Initial)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
Cit.	04-4-	71D OI-	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	<u> </u>		
3. Full Name (Last, First,	Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed			
		ZIP Gode	Outstanding:	7 7 7		
4. Full Name (Last, First,	Middle Initial)		Name of Employer			
Mailing Address			Occupation	Occupation		
City	State	ZIP Code	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9 9		
SUBTOTALS This Period Tr	nis Page (optional)			1100.00		
TOTALS This Period (last pa	age in this line only	v)	·····	9 9 9		
Carry outstanding halance	only to LINE 3 Sol	nedule D for this	s line. If no Schedule D. corrus	orward to appropriate line of Summary.		
Carry outstanding palance	only to LINE 3, Sch	ieaule D, for this	s line. It no Schedule D, carry f	orward to appropriate line of Summary.		

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

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OF

						130
AME OF COMMITTEE (In Full)  Gloria Bromell Tinubu for Co	ngres	5			Transa	ction ID : VNW1EDAEJQ4L
LOAN SOURCE Full Name (Last, Finubu, Gloria, Bromell, ,	irst, Mic	ddle Initial)			Memo Item	Primary
Mailing Address 8 Laurel St						X General Other (specify) ▼
City		State	ZIP Cod	e		Personal Funds of the Candidate
Conway		SC	29526-5	5154		1 ersonal runus of the Candidate
Original Amount of Loan		Cumulative Pay	yment To [	Date	Bal	ance Outstanding at Close of This Period
900.	00		9	0.00	)	900.00
TERMS Date Incurred		D	ate Due		Interest Rat	
M11M / D04D / Y Ž014	Υ	M M / D D	/ Y	ňone <sup>Y</sup>		one % (apr) Yes X No
List All Endorsers or Guarantors (	if any) t	o Loan Source				
1. Full Name (Last, First, Middle In	itial)			Name of Em	ployer	
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed		
2. Full Name (Last, First, Middle Init	tial\			Outstanding:  Name of Em		9 9
2. Full Name (Last, First, Middle IIII	liai)			. ,		
Mailing Address				Occupation		
City	State	ZIP Code		Guaranteed Outstanding:		7
3. Full Name (Last, First, Middle Init	tial)	•		Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		7
4. Full Name (Last, First, Middle Init	tial)			Name of Employer		
Mailing Address			Occupation			
211	<u> </u>			Amount Guaranteed		
City	State	ZIP Code		Outstanding:		9 9
SUBTOTALS This Period This Page (optional)						
OTALS This Period (last page in this line only)						
Carry outstanding balance only to LIN	E 3, Sch	nedule D, for this	s line. If n	o Schedule	D, carry for	ward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

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OF

						100
AME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Co	ongres	S			Transac	ction ID : VNW1EDAEJT7L
LOAN SOURCE Full Name (Last, Tinubu, Gloria, Bromell, ,	First, Mid	ddle Initial)			Memo Item	Election: 2014 Primary  General
Mailing Address 8 Laurel St						Other (specify)
City		State	ZIP Cod			Personal Funds of the Candidate
Conway		SC	29526-5	5154		To some fundo or ano canadato
Original Amount of Loan		Cumulative Pay	yment To [			ance Outstanding at Close of This Period
1200	0.00		9	0.00		1200.00
TERMS Date Incurred		D	Date Due		Interest Rate (If none, ente	
M11M / D14D / Y 2014	Y	M M / D D	/ Y	ňone <sup>Y</sup>		one % (apr) Yes X No
List All Endorsers or Guarantors	, ,,	o Loan Source				
1. Full Name (Last, First, Middle I	nitial)			Name of Em	ployer	
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
2. Full Name (Last, First, Middle In	itial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		7
3. Full Name (Last, First, Middle In	itial)			Name of Employer		
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		7
4. Full Name (Last, First, Middle In	itial)			Name of Employer		
Mailing Address				Occupation		
	la			Amount Guaranteed		
City State ZIP Code				Outstanding:		9 9 9
UBTOTALS This Period This Page (optional)						
TOTALS This Period (last page in this	line only	y)				7 7 7 7
Carry outstanding balance only to LI	NE 3, Sc	hedule D, for this	s line. If n	o Schedule	D, carry for	ward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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13a

OF

_						130		
	ME OF COMMITTEE (In Full) Horia Bromell Tinubu for Co	ongres	3		Transa	ction ID : VNW1EDKFXC7L		
	LOAN SOURCE Full Name (Last, Tinubu, Gloria, Bromell, ,	First, Mic	☐ Memo Item	Election: 2014 Primary				
	Mailing Address 8 Laurel St				General Other (specify) ▼			
	City		State	ZIP Co		Personal Funds of the Candidate		
	Conway		SC	29526				
	Original Amount of Loan	.33	Cumulative Pay	yment To	Date Ba	lance Outstanding at Close of This Period 501.33		
	TERMS Date Incurred			Date Due	Interest Ra			
	M12 <sup>M</sup> / D30 <sup>D</sup> / Y Ž014	Y	M M / D D	/ Y	TIOTIC	one % (apr) Yes X No		
	List All Endorsers or Guarantors	(if any) to	o Loan Source					
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer			
	Mailing Address				Occupation			
	City State ZIP Code				Amount Guaranteed Outstanding:			
	2. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address				Occupation			
		I_			Amount Guaranteed			
	City	State	ZIP Code			7		
	3. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address				Occupation			
	City	State	ZIP Code		Amount Guaranteed Outstanding:			
	4. Full Name (Last, First, Middle In	itial)			Name of Employer			
	Mailing Address			Occupation				
	0''		710.0		Amount Guaranteed			
	City	State	ZIP Code		Outstanding:	9 9		
SI	<b>UBTOTALS</b> This Period This Page (	optional)				501.33		
T	OTALS This Period (last page in this	line only	<i>y</i> )			7 7 7 7		
	carry outstanding balance only to III	NE 3. Sch	nedule D. for this	s line. If	no Schedule D. carry for	ward to appropriate line of Summary.		
. ~	a, Jarotanania Balance of ity to Eli	,	, 101 1111	11	Joneans D, Juny 101	appropriate mic or cumillary.		

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

PAGE 53 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1EE17QP0L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 600.00 0.00 600.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>13<sup>D</sup> M 07M Ž015 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 600.00 TOTALS This Period (last page in this line only) ..... 363351.33 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)

PAGE 54 OF FOR LINE NUMBER: (check only one)

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X	10

54

	during Louis			10
NA	ME OF COMMITTEE (In Full)			
C	Gloria Bromell Tinubu	for C	onarace	
_				
Ī	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  Lake Research Partners Inc			Nature of Debt (Purpose): polling and survey services
ſ	Mailing Address 1726 M St NW			
	Ste 1100			
	City	State	Zip Code	
	Washington	DC	20036-4528	
	Outstanding Balance Beginning This Period			Transaction ID: VNS3P9H64F1
	6500.00			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	6500.00
Į	,		,	
ſ	B. Full Name (Last, First, Middle Initial) of Deb	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		
	Poplus, Reginald, , ,			Consulting Services - management
	ling Address 2475 Enon Rd SW			
	011			
	City	State	Zip Code	
	Atlanta	GA	30331-7843	
	Outstanding Balance Beginning This Period			Transaction ID: VNS3P9H64P7
	4191.66			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	4191.66
	0.00		0.00	4191.00
ļ	O. F. II Nove (Leaf First Middle 1979) of Date			
	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Smith, James, E., , Jr., Esq.			Nature of Debt (Purpose):
				legal services
- }				
	Mailing Address 1718 Hollywood Dr			
}	City	State	Zip Code	
	Columbia	State	·	
}	Columbia	30	29205-3216	
	Outstanding Balance Beginning This Period			Transaction ID: VNS3P9H6589
	600.00			
	, , , ,			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
	0.00		0.00	600.00
	, , , ,		7	7 7 7
1)	SUBTOTALS This Period This Page (optional)			11291.66
		<u> </u>		11201.00
2)	TOTALS This Period (last page this line number only)			11291.66
				11201.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				<b>3</b> 63351.33
_				
۵۱	ADD 2) and 3) and carry forward to appropri	ate line of S	Summary Page (last page only)	374642 99