

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

TOM RICE FOR CONGRESS

ADDRESS (number and street)

PO Box 70098

Check if different than previously reported. (ACC)

Myrtle Beach

SC

29572-0020

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00506048

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y 2016

through

M M /

D D /

Y Y Y Y 2016

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

Lisker, Lisa, , ,

Type or Print Name of Treasurer

Lisker, Lisa, , ,

Signature of Treasurer

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
TOM RICE FOR CONGRESS

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

	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))....	3000.00	8000.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	3000.00	8000.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	16308.64	57155.13
(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)).....	16308.64	57155.13
8. Cash on Hand at Close of Reporting Period (from Line 27).....	525309.50	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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 05/2016)

Write or Type Committee Name

TOM RICE FOR CONGRESS

Report Covering the Period: From: / 2016 To: / 2016

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).....	500.00	500.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	500.00	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	2500.00	7500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	3000.00	8000.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	3000.00	8000.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 11

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	16308.64	57155.13
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	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(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	0.00
21. OTHER DISBURSEMENTS	0.00	1150.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	16308.64	58305.13

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	538618.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	3000.00
25. SUBTOTAL (add Line 23 and Line 24).....	541618.14
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	16308.64
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	525309.50

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 11	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 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)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Chlopecki, Julie, , ,

Mailing Address 1547 Evers Dr

City Mc Lean	State VA	Zip Code 22101-5006
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FEC ID number of contributing federal political committee. **C**

Name of Employer Xenophon Strategies	Occupation Owner
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Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 15 / 2016

Transaction ID : A4133B39D963249C28FC

Amount of Each Receipt this Period
500.00

Memo Item

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 Y Y

Amount of Each Receipt this Period

Memo Item

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 Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	500.00

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 11	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AO SMITH CORPORATION POLITICAL ACTION COMMITTEE (AOSPAC)

Mailing Address 11270 W PARK PLACE

City MILWAUKEE	State WI	Zip Code 53223
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FEC ID number of contributing federal political committee. **C** C00104687

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 1500.00

Date of Receipt
 / / 12 / 28 / 2016

Transaction ID : **ADD8E0CEF8D624CD1BA9**

Amount of Each Receipt this Period
 , , 1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
American Public Power Association Public Ownership of Electric Resources PAC (POWER PAC)

Mailing Address 1875 Connecticut Avenue NW, #1200
Attn: Angela Cuyler

City Washington	State DC	Zip Code 20009-5715
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FEC ID number of contributing federal political committee. **C** C00161570

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

Receipt For: 2018
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 , , 1000.00

Date of Receipt
 / / 12 / 28 / 2016

Transaction ID : **A7E16EAE6810240A8995**

Amount of Each Receipt this Period
 , , 1000.00

Memo Item

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
 / /

Amount of Each Receipt this Period
 , ,

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	<input type="text" value=""/> , <input type="text" value=""/> , <input type="text" value=""/> 2500.00
TOTAL This Period (last page this line number only)..... ▶	<input type="text" value=""/> , <input type="text" value=""/> , <input type="text" value=""/> 2500.00

**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 7 OF 11			
	<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)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AccuChecks		Date of Disbursement
Mailing Address 605 19th Ave N		M M / D D / Y Y Y Y 12 / 06 / 2016
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Payroll Taxes		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 213.11
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9430B8BF5AC0437397D
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. AccuChecks		Date of Disbursement
Mailing Address 605 19th Ave N		M M / D D / Y Y Y Y 12 / 06 / 2016
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Payroll Service		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 48.75
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BDEA2E9AE42E04FDD884
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) c. Hughes, Tyler, , ,		Date of Disbursement
Mailing Address PO Box 70098		M M / D D / Y Y Y Y 12 / 06 / 2016
City Myrtle Beach	State SC	Zip Code 29572-0020
Purpose of Disbursement Salary		FEC Identification Number C
Candidate Name		Amount of Each Disbursement this Period 212.31
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BDB4A446DCF164A6CAA1
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	474.17
TOTAL 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 8 OF 11			
	<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)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Martin, Graham, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2016		
Mailing Address PO Box 70098			FEC Identification Number C		
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 237.62		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B74F85A2FD7754EC9BA8		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Boehm, Cassie, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2016		
Mailing Address PO Box 70098			FEC Identification Number C		
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 227.84		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : BBCF16CD411F042C28A8		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Davis, Terra, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2016		
Mailing Address PO Box 70098			FEC Identification Number C		
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 230.87		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B5990208A12144CCA908		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	696.33
TOTAL 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 9 OF 11	
	<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)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Martin, David, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016	
Mailing Address PO Box 960			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29578-0960	Amount of Each Disbursement this Period 268.83	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : BA297145A2F8A48CC82E	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Boehm, Cassie, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 227.83	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : BD1CAE55B5BAD40168B7	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Davis, Terra, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 230.88	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B8943FA0020D94C2AB04	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	727.54
TOTAL 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 10 OF 11	
	<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)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wyeth, Tyler, , ,			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016	
Mailing Address 1107 48th Avenue N. Suite 310A			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-5443	Amount of Each Disbursement this Period 330.01	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B502991E6DFAD46BA922	
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) B. AccuChecks			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016	
Mailing Address 605 19th Ave N			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-3103	Amount of Each Disbursement this Period 219.83	
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : B80975A2302EC43F2AF6	
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) c. AccuChecks			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2016	
Mailing Address 605 19th Ave N			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-3103	Amount of Each Disbursement this Period 38.11	
Purpose of Disbursement Payroll Service		Category/ Type	Transaction ID : B2406959023B9424EAAD	
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	587.95
TOTAL 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 11 OF 11	
	<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)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2016
Mailing Address 205 Pennsylvania Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1164
Purpose of Disbursement Software Rental	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 2400.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B7B8A441AFC9D437C9D7
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Huckaby Davis Lisker		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016
Mailing Address 228 S Washington St Ste 115		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-5404
Purpose of Disbursement Compliance Consulting	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 10567.99	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9D55075E79004EB4889
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Winfrey & Company		Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2016
Mailing Address 228 S Washington St Ste B7		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-5408
Purpose of Disbursement Event Catering/Site Rental	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 663.34	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B7CB1A00508E34F64A41
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	13631.33
TOTAL This Period (last page this line number only).....▶	16117.32