

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)

1107 48th Ave., N.

Suite 310-A

Check if different than previously reported. (ACC)

Myrtle Beach

SC

29577

2. FEC IDENTIFICATION NUMBER ▼

C C00506048

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

SC

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

07 / 01 / 2013

through

M M / D D / Y Y Y Y

09 / 30 / 2013

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

Type or Print Name of Treasurer J. Wakefield

Signature of Treasurer J. Wakefield

[Electronically Filed]

Date

M M / D D / Y Y Y Y

10 / 13 / 2013

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

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))....	118665.99	517505.82
(b) Total Contribution Refunds (from Line 20(d))	650.00	2650.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	118015.99	514855.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	62729.24	303568.64
(b) Total Offsets to Operating Expenditures (from Line 14).....	348.00	494.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	62381.24	303073.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	341675.32	
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).....	54000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

TOM RICE FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2013 To: M M / D D / Y Y Y Y 09 / 30 / 2013

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).....	55902.49	289102.49
(ii) Unitemized.....	1675.00	3475.00
(iii) TOTAL of contributions from individuals ▶	57577.49	292577.49
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	61088.50	224928.33
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	118665.99	517505.82
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.)	348.00	494.75
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)..... ▶	119013.99	518000.57

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	62729.24	303568.64
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	46000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	46000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	650.00	650.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	650.00	2650.00
21. OTHER DISBURSEMENTS	24575.00	65125.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	87954.24	417343.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	310615.57
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	119013.99
25. SUBTOTAL (add Line 23 and Line 24).....	429629.56
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	87954.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	341675.32

**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 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Nancy L. Player

Mailing Address 420 Rosewood Dr

City Florence State SC Zip Code 29501-5454

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 17 / 2013

Transaction ID : A61A864309F2B4638A97

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Robert N. Hinson

Mailing Address 1254 Highway 15-401 E

City Bennettsville State SC Zip Code 29512-7114

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

Name of Employer Southern States Coop Inc Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 22 / 2013

Transaction ID : A9F434523A48B40899A8

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Dr. Stephen Imbeau MD

Mailing Address 950 Park Ave

City Florence State SC Zip Code 29501-5734

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

Name of Employer Allergy, Asthma, And Sinus Cen Occupation Owner/founder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 26 / 2013

Transaction ID : A019A794D3780428881F

Amount of Each Receipt this Period
 500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Thomas D. Turner

Mailing Address 1418 Center Rd

City Timmonsville State SC Zip Code 29161-7983

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

Name of Employer Turners Custom Auto Glass Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 09 / 2013

Transaction ID : A5192B773BB1D4260AFA

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Randy Key

Mailing Address 510 Azalea Ln

City Florence State SC Zip Code 29501-5718

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

Name of Employer Key Architecture Occupation Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2013

Transaction ID : A2EE2F9DCA8504D31B16

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Dr. Brian Sang

Mailing Address 2809 Shedwell Court

City Florence State SC Zip Code 29501-5324

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

Name of Employer Self Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : A79E2A8E65CD949BCAB6

Amount of Each Receipt this Period
 250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Michael Morgan

Mailing Address 719 Waters Avenue

City Florence	State SC	Zip Code 29501-4618
------------------	-------------	------------------------

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

Name of Employer Palmetto Oral & Maxillofacial	Occupation Surgeon
---------------------------------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : AFD42FA658C524B0BB8D

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Cb Askins Jr.

Mailing Address 700 Rivers St

City Lake City	State SC	Zip Code 29560-2914
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FEC ID number of contributing federal political committee. **C**

Name of Employer Askins Family LLC	Occupation Real Estate
---------------------------------------	---------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2013

Transaction ID : A8FA0A959B59E408BBB7

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Kenneth Gunter Jr.

Mailing Address 1970 Gray Oaks Dr

City Conway	State SC	Zip Code 29526-7426
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FEC ID number of contributing federal political committee. **C**

Name of Employer Fbi Construction	Occupation Vice President
--------------------------------------	------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : A9FE93E209D5F4C388BC

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael Beer

Mailing Address 6943 Lerwick Ct

City State Zip Code
Alexandria VA 22315-5717

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

Name of Employer Occupation
Williams & Jensen Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2013

Transaction ID : A67B3D59260224E928A4

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. William C Miller

Mailing Address 1038 Papermill Court NW

City State Zip Code
Washington DC 20007-3619

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

Name of Employer Occupation
Business Roundtable Senior VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 11 / 2013

Transaction ID : A1DF32956D8EC4100BA8

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
B. Webb Jones Jr.

Mailing Address 2234 Windsor Forest Dr

City State Zip Code
Florence SC 29501-2069

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

Name of Employer Occupation
Self Employed Periodonist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 18 / 2013

Transaction ID : A4509EF72AA77444CA2C

Amount of Each Receipt this Period
2600.00

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

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

3350.00

**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 9 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Clyde T. Padgett

Mailing Address 1502 Cherokee Rd

City Florence	State SC	Zip Code 29501-4552
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Dentist
-----------------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2013

Transaction ID : A7C8FABB5183242DFAEB

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. Joseph David Moss

Mailing Address 642 Ascot Dr

City Florence	State SC	Zip Code 29501-1913
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Dentist
-----------------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 19 / 2013

Transaction ID : A23F8BE08FD954BE8BA3

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Michael A. Tongour

Mailing Address 4937 Tilden Street NW

City Washington	State DC	Zip Code 20016-2331
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FEC ID number of contributing federal political committee. **C**

Name of Employer Tch Group, Llc	Occupation Government Relations
------------------------------------	------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 09 / 2013

Transaction ID : A32DFD43FF5734798877

Amount of Each Receipt this Period
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sherwin Welch

Mailing Address 1416 Lazar Pl

City Florence	State SC	Zip Code 29501-5672
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FEC ID number of contributing federal political committee. **C**

Name of Employer Heritage Home Of Florence, Inc	Occupation President
----------------------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : A14F3C9D4C9C642E89D8

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Leslie H. McDonald

Mailing Address PO Box 99

City Tatum	State SC	Zip Code 29594-0099
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Homemaker
-----------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 19 / 2013

Transaction ID : A2A922420630A42D79F9

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Marsha S Bryant

Mailing Address 3031 Hoffmeyer Rd

City Florence	State SC	Zip Code 29501-7553
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pee Dee Pediatric Dentistry	Occupation Admin. Assistant
-------------------------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 26 / 2013

Transaction ID : AE809E4D71BC84C0FAE9

Amount of Each Receipt this Period
250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Heyward King

Mailing Address 180 H L King Dr

City	State	Zip Code
Lake City	SC	29560-4449

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

Name of Employer	Occupation
W. Lee Flowers & Co., Inc.	Wholesale & Retail Grocer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 09 / 2013

Transaction ID : AA7D57E8E624449FA9F0

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Dr. Luther Fred Carter

Mailing Address 4822 E Palmetto St

City	State	Zip Code
Florence	SC	29506-4530

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

Name of Employer	Occupation
Francis Marion University	President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : A3022C1D3AD8048F88C7

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Daniel Ervin

Mailing Address 617 Rosewood Dr

City	State	Zip Code
Florence	SC	29501-5457

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

Name of Employer	Occupation
Self Employed	Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2013

Transaction ID : AC14B16A5162E4C8CA9F

Amount of Each Receipt this Period
2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Leonard Hoogenboom

Mailing Address PO Box 5658

City Florence	State SC	Zip Code 29502-5658
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Cpa
-----------------------------------	-------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 12 / 2013

Transaction ID : ADF4A9C9A9404F3E9DA

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Phillip Lowe

Mailing Address 3001 Drake Shore Dr

City Florence	State SC	Zip Code 29501-8344
------------------	-------------	------------------------

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

Name of Employer Lowes Therapy	Occupation Physical Therapist
-----------------------------------	----------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : A42F5DA0418F848689AA

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dr. F. Gregg Jones MD

Mailing Address 531 Ridgewood Dr

City Florence	State SC	Zip Code 29501-5519
------------------	-------------	------------------------

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

Name of Employer Medical Anesthesia Consultants	Occupation Anesthesiologist
----------------------------------------------------	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 25 / 2013

Transaction ID : AE320F2FC57224BBE914

Amount of Each Receipt this Period
250.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Chris Scott

Mailing Address 1520 Cherokee Rd

City Florence	State SC	Zip Code 29501-4552
------------------	-------------	------------------------

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

Name of Employer Pearce Land Company, Llc	Occupation Manager
----------------------------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : AEBAAA95F4EC94CD1B54

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lincoln L. Privette

Mailing Address PO Box 19

City Darlington	State SC	Zip Code 29540-0019
--------------------	-------------	------------------------

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

Name of Employer Privette Enterprises	Occupation President
------------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 22 / 2013

Transaction ID : AD7B7601647ED452D8E4

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Anne Ervin

Mailing Address 617 Rosewood Dr

City Florence	State SC	Zip Code 29501-5457
------------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2013

Transaction ID : A78AAC40989714217800

Amount of Each Receipt this Period
2500.00

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

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

3000.00

**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 14 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Patti Smith

Mailing Address 530 Prestwick Dr

City State Zip Code
Florence SC 29501-8735

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

Name of Employer Occupation
Prime Rate Senior VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2013

Transaction ID : AD92834F334F64BA2AFB

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
W. Henry Johnson,

Mailing Address 71 Rivers Street

City State Zip Code
Lake City SC 29560

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

Name of Employer Occupation
W. Lee Flowers & Co., Inc. Grocer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2013

Transaction ID : A037A54105A344582975

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Kenneth L. Willeford MD

Mailing Address P.O. Box 6589

City State Zip Code
Ocean Isle Beach NC 28469-0589

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

Name of Employer Occupation
Self Doctor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 09 / 2013

Transaction ID : A7DBCA3F3A8174789833

Amount of Each Receipt this Period
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. Allen Martin

Mailing Address 10095 Lawyers Road

City Vienna	State VA	Zip Code 22181-2939
----------------	-------------	------------------------

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

Name of Employer The Livingston Group	Occupation Partner
------------------------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 09 / 2013

Transaction ID : AD58CFB2C807E426CBC0

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Ronnie Hribar

Mailing Address 5040 Carolina Forest Blvd

City Myrtle Beach	State SC	Zip Code 29579-3579
----------------------	-------------	------------------------

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

Name of Employer Longbeard's Grill	Occupation Owner
---------------------------------------	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 14 / 2013

Transaction ID : A79F4AA7E46CA4BA0985

Amount of Each Receipt this Period
500.00

In-kind:Catering

C. Full Name (Last, First, Middle Initial)
Austin Gilbert Jr.

Mailing Address PO Box 3009

City Florence	State SC	Zip Code 29502-3009
------------------	-------------	------------------------

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

Name of Employer Gilbert Construction Company	Occupation Owner
--------------------------------------------------	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 08 / 2013

Transaction ID : AFFC243FE118F4A49ACF

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Marshall Flowers

Mailing Address 2300 N Governor Williams Hwy

City State Zip Code
Darlington SC 29540-8707

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

Name of Employer Occupation
Sun Construction, Inc. President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : A2DCEEED154284C0EA06

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Frank B. Rogers III

Mailing Address 111 Colonial Dr

City State Zip Code
Bennettsville SC 29512-3450

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

Name of Employer Occupation
Southern Cotton Growers Inc. Chairman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : A47F293E388424F5390E

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. John Jebaily

Mailing Address 1811 S Irby St
Ste 109

City State Zip Code
Florence SC 29505-3444

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

Name of Employer Occupation
Century 21 Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2013

Transaction ID : A7EBF3D111C95467DAAB

Amount of Each Receipt this Period
250.00

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

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

3850.00

**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 17 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jane B. Rogers

Mailing Address 1101 Highway 15-401 West

City State Zip Code
Bennettsville SC 29512-3580

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : A74C1DDBA7BED40FDB9E

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Thaddeus E. Strom

Mailing Address 4919 Sedgwick Street NW

City State Zip Code
Washington DC 20016-2326

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

Name of Employer Parry, Romani, DeConcini & Symms Occupation Vice President for Congressional Relat

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2013

Transaction ID : AB9A44D84F1124D91A99

Amount of Each Receipt this Period
250.00

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

Mailing Address 908 Eldon Drive

City State Zip Code
Alexandria VA 22302-2218

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

Name of Employer Nat'l. Automatic Merchandising Assn Occupation Senior VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
202.49

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2013

Transaction ID : ABB6A97D3603F4877873

Amount of Each Receipt this Period
202.49

In-kind: Catering

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

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

702.49

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James Frazier

Mailing Address 725 Bucksport Rd

City Conway State SC Zip Code 29527-7970

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

Name of Employer Horry County Occupation Council member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 08 / 2013

Transaction ID : AD9A8F0D84F814FCBA69

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Dr. Jim Schuster

Mailing Address 623 Aire Acres Rd

City Timmonsville State SC Zip Code 29161-9522

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

Name of Employer Self Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : ABD364384EE7B467585C

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Jill Heiden Lewis

Mailing Address 500 Oleander Dr

City Florence State SC Zip Code 29501-5730

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

Name of Employer Florence Darlington Technical Occupation VP Institutional Advancement &

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 18 / 2013

Transaction ID : A01BE04EDA0804B7AB04

Amount of Each Receipt this Period
 250.00

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

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

1000.00

**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 19 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Dean Lorenz

Mailing Address 608 Fairway Dr

City Florence	State SC	Zip Code 29501-5510
------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Physician
-----------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2013

Transaction ID : A9874329CF3144019BCF

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Frank M. Rogers

Mailing Address PO Box 6289

City Florence	State SC	Zip Code 29502-6289
------------------	-------------	------------------------

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

Name of Employer Webster Rogers	Occupation Accountant
------------------------------------	--------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : A693D35B1F3DD417495C

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Neal Thigpen

Mailing Address 1610 W. Hillside Ave

City Florence	State SC	Zip Code 29501-5608
------------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : AE1189746A2B5453A80D

Amount of Each Receipt this Period
1000.00

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

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

2250.00

**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 20 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R. L. Brock

Mailing Address **PO Box 296**

City **Blenheim** State **SC** Zip Code **29516-0296**

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

Name of Employer **Marlboro Water Co. Inc.** Occupation **Management Consultant**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 30 / 2013

Transaction ID : AFC61F4976E40427FAE2

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ethel A Nobles

Mailing Address **6995 Lester Street SW**

City **Ocean Isle Beach** State **NC** Zip Code **28469-5727**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 30 / 2013

Transaction ID : A865B90126DAD4953850

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. J. Frank Chisholm

Mailing Address **722 N Beaverdam Dr**

City **Florence** State **SC** Zip Code **29501-1987**

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

Name of Employer **Palmetto Arabians LLC** Occupation **Self Employed**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 15 / 2013

Transaction ID : AFB2C337533754CC28A9

Amount of Each Receipt this Period
1000.00

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

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

2250.00

**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 21 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Evans Holland

Mailing Address **PO Box 5387**

City **Florence** State **SC** Zip Code **29502-5387**

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

Name of Employer **Self Employed** Occupation **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
07 / 30 / 2013

Transaction ID : A9268FF01EC8C4758AF9

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
F. Schipman Johnston

Mailing Address **2647 Ascot Dr**

City **Florence** State **SC** Zip Code **29501-1969**

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

Name of Employer **Crown Beverages, Inc.** Occupation **President/ceo**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
07 / 30 / 2013

Transaction ID : A51B64966DE264A97A26

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Stephen Francis

Mailing Address **4810 33rd Road N**

City **Arlington** State **VA** Zip Code **22207-2802**

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

Name of Employer **Ernst & Young** Occupation **Senior Manager**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
08 / 08 / 2013

Transaction ID : A02171A87364A43B285D

Amount of Each Receipt this Period
500.00

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Gene Ho

Mailing Address 2024 Ayershire Lane

City Myrtle Beach State SC Zip Code 29575-5816

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

Name of Employer Self Occupation Photographer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 14 / 2013

Transaction ID : A909BC35B837244F7B82

Amount of Each Receipt this Period
 500.00

In-kind: Photography

B. Full Name (Last, First, Middle Initial)
Mr. M Jack Sanders

Mailing Address 2713 Cypress Bend Rd

City Florence State SC Zip Code 29506-8339

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

Name of Employer Sonoco Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 16 / 2013

Transaction ID : AF2CBC859E1EA426784F

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
Mr. Julius Parris

Mailing Address 1009 Lindberg Dr

City Florence State SC Zip Code 29501-5653

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

Name of Employer First Reliance Bank Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 20 / 2013

Transaction ID : AA96E3F18DA914ACA9F7

Amount of Each Receipt this Period
 250.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 1547 Evers Dr

City State Zip Code
Mc Lean VA 22101-5006

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

Name of Employer Occupation
Xenophon Strategies Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2013

Transaction ID : A4B78013D0E164BA7B4C

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Britt T. Poston

Mailing Address 807 Oldfield Cir

City State Zip Code
Florence SC 29501-2011

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

Name of Employer Occupation
Zaxbys Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2013

Transaction ID : A84FB3FCAA9BA45DD9FF

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert Colones

Mailing Address 2511 Abbey Way

City State Zip Code
Florence SC 29501-2904

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

Name of Employer Occupation
Mcleod Regional Medical Center CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : AF8E9899898144777911

Amount of Each Receipt this Period
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Joel W. Dyson

Mailing Address 200 Caston Way Ln

City Cheraw	State SC	Zip Code 29520-5576
----------------	-------------	------------------------

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

Name of Employer Cheraw Healthcare	Occupation Administrator
---------------------------------------	-----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 19 / 2013

Transaction ID : ADFE0F1E3201E4BC8A02

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Gregory Redick Scott

Mailing Address 10711 Maplecrest Ln

City Potomac	State MD	Zip Code 20854-6362
-----------------	-------------	------------------------

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

Name of Employer Gregory R. Scott	Occupation Consultant
--------------------------------------	--------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 23 / 2013

Transaction ID : A728D96022E9441EF98F

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Thomas C. Ewart

Mailing Address 1208 McIntosh Woods Road

City Florence	State SC	Zip Code 29501-4579
------------------	-------------	------------------------

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

Name of Employer First Reliance Bank	Occupation Banker
-----------------------------------------	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : A1B22AFD9919F4C6BBDC

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. James Anderson

Mailing Address 2512 W Edgefield Rd

City Florence	State SC	Zip Code 29501-1919
------------------	-------------	------------------------

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

Name of Employer Charles Ingram Lumber Co.	Occupation Manager
-----------------------------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : AB599E81DEEB041BFA3E

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Valerie Moliterno

Mailing Address 409 39th Ave N

City Myrtle Beach	State SC	Zip Code 29577-2703
----------------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2013

Transaction ID : AB7563ED71B3F415F8EB

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Martin Taylor Whitmer Jr

Mailing Address 2915 King St

City Alexandria	State VA	Zip Code 22302-3513
--------------------	-------------	------------------------

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

Name of Employer WHITMER & WORRALL LLC	Occupation Partner
-------------------------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2013

Transaction ID : A8A7F3BEC6064406CB1F

Amount of Each Receipt this Period
500.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Larry Bartol

Mailing Address 4221 Byrnes Blvd

City Florence State SC Zip Code 29506-8335

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

Name of Employer Self Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 22 / 2013

Transaction ID : AEA628F7C1A6446489C6

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Furman Brodie

Mailing Address 1214 Dunvegan Rd

City Florence State SC Zip Code 29501-5628

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

Name of Employer Charles Ingram Lumber Co. Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : A027B1FFF998B40E7A73

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Dr. Charles Maxwell

Mailing Address 441 Country Club Dr

City Johnsonville State SC Zip Code 29555-6608

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

Name of Employer Self Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 15 / 2013

Transaction ID : A2AF0E62EEA384CF482B

Amount of Each Receipt this Period
 500.00

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

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

3250.00

**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 27 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Douglas O'Tuel

Mailing Address 726 Lakeshore Dr

City State Zip Code
Bennettville SC 29512-2208

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

Name of Employer Occupation
Self-employed Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : AB42763015B0446178F3

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dr. E. Coy Irvin Jr.

Mailing Address 555 E Cheves St

City State Zip Code
Florence SC 29506-2617

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

Name of Employer Occupation
Mcleod Regional Medical Center VP Medical Services

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : A766C4D44718A42E087A

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Edward Floyd

Mailing Address 805 Pamplico Hwy
Mall A, Suite 230

City State Zip Code
Florence SC 29505-6047

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

Name of Employer Occupation
Carolinas Hospital Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 25 / 2013

Transaction ID : A591D7E89797B49CEA5B

Amount of Each Receipt this Period
2000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rick Saunders

Mailing Address 1901 Kensington St

City Florence	State SC	Zip Code 29505-3256
------------------	-------------	------------------------

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

Name of Employer First Reliance Bank	Occupation CEO
-----------------------------------------	-------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2013

Transaction ID : AFB835A42552247C3A80

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Robert E Adams

Mailing Address 1301 Kennedy Road

City Lugoff	State SC	Zip Code 29078-8753
----------------	-------------	------------------------

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

Name of Employer Fbi Construction	Occupation President
--------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : AB17D2273625F47E5964

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Reamer B. King

Mailing Address 1328 Wisteria Dr

City Florence	State SC	Zip Code 29501-5645
------------------	-------------	------------------------

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

Name of Employer King Cadillac	Occupation President
-----------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2013

Transaction ID : A6EBF729369934951824

Amount of Each Receipt this Period
1000.00

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

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

3000.00

**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 29 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Henry Swink

Mailing Address 6615 S Irby St

City Effingham State SC Zip Code 29541-3577

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

Name of Employer Mccall Farms Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 11 / 2013

Transaction ID : A16ADEE26D1D4430FA23

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Palmetto Commercial Real Estate

Mailing Address 1831 W. Evans Street Suite 325

City Florence State SC Zip Code 29501-3397

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 20 / 2013

Transaction ID : A0C7FFD5CF0B44AAB8A6

Amount of Each Receipt this Period
 250.00

See Memo

C. Full Name (Last, First, Middle Initial)
Mr. Drew Chaplin

Mailing Address 1831 W. Evans St Suite 325

City Florence State SC Zip Code 29501-3397

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

Name of Employer Palmetto Commercial Real Estate Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 20 / 2013

Transaction ID : AEC04E04FECE047D795E

Amount of Each Receipt this Period
 250.00

Partner Memo

[MEMO ITEM]
 Partnership: Palmetto Commercial Real Estate

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 73
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Pearce Land Company Llc

Mailing Address 1943 Hoffmeyer Rd
Ste A

City Florence State SC Zip Code 29501-3939

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : A0A23C9B330F04AAD890

Amount of Each Receipt this Period
 500.00

Memo Evans Holland

B. Full Name (Last, First, Middle Initial)
Dr. Evans Holland

Mailing Address PO Box 5387

City Florence State SC Zip Code 29502-5387

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

Name of Employer Occupation
Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : AAABF3C00C04C494480C

Amount of Each Receipt this Period
 500.00

Memo Partnership

[MEMO ITEM]
Partnership: Pearce Land Company Llc

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

55902.49

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NRA- Political Victory Fund

Mailing Address 11250 Waples Mill Rd

City State Zip Code
Fairfax VA 22030-6003

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 30 / 2013

Transaction ID : A500F89CA35624167BE5

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Transportation Intermediaries Association PAC

Mailing Address 1625 Prince Street
Suite 200

City State Zip Code
Alexandria VA 22314-2883

FEC ID number of contributing federal political committee. **C** C00335091

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2013

Transaction ID : ABBA2DAF9330946C5863

Amount of Each Receipt this Period
 3000.00

C. Full Name (Last, First, Middle Initial)
Realtors Pac

Mailing Address 430 N Michigan Ave # 60611

City State Zip Code
Chicago IL 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2013

Transaction ID : AD35D707D983C40119F0

Amount of Each Receipt this Period
 1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. CULAC PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 601 Pennsylvania Ave. NW
 South Building, Suite 600
 City Washington State DC Zip Code 20004-2601
 FEC ID number of contributing federal political committee. **C C00007880**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2013
Transaction ID : AB1C8E9224EF84F6DB20
 Amount of Each Receipt this Period
 3000.00
 Amount of Each Receipt this Period
 4000.00

B. AICPA PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 220 Leigh Farm Rd.
 City Durham State NC Zip Code 27707-8110
 FEC ID number of contributing federal political committee. **C C00077321**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2013
Transaction ID : ABCCA81DCF4B74399A4D
 Amount of Each Receipt this Period
 1588.50
 Amount of Each Receipt this Period
 10000.00

C. ARCHIPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1735 New York Ave. NW
 City Washington State DC Zip Code 20006-5209
 FEC ID number of contributing federal political committee. **C C00139071**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2013
Transaction ID : A5F9F514611714712AF5
 Amount of Each Receipt this Period
 1000.00
 Amount of Each Receipt this Period
 1000.00

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

5588.50

**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 33 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) General Atomics PAC		Date of Receipt M M / D D / Y Y Y Y Y 08 / 26 / 2013
Mailing Address P.O. Box 22930		Transaction ID : A5AC8EDAB7B164F05BF2
City San Diego	State CA	
FEC ID number of contributing federal political committee. C C00215285		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00	

Full Name (Last, First, Middle Initial) Asian American Hotel Owner Association PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013
Mailing Address 228 S. Washington Street Suite 115		Transaction ID : AC57B139705BB44DC991
City Alexandria	State VA	
FEC ID number of contributing federal political committee. C C00336743		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) Deloitte Federal PAC		Date of Receipt M M / D D / Y Y Y Y Y 07 / 24 / 2013
Mailing Address PO Box 365		Transaction ID : A2684535931DE4B89A91
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00211318		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 9000.00	

SUBTOTAL of Receipts This Page (optional).....	8500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
The Boeing Company PAC

Mailing Address 1200 Wilson Blvd

City Arlington State VA Zip Code 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 8500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2013

Transaction ID : A3418ECA3220D4D50AC5

Amount of Each Receipt this Period
 500.00

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

Mailing Address 101 Constitution Ave. NW, Ste. 500

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00109819

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 26 / 2013

Transaction ID : A5707B1C700E24B00AB2

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
K & L Gates LLP PAC

Mailing Address 1601 K Street NW

City Washington State DC Zip Code 20006-1682

FEC ID number of contributing federal political committee. **C** C00395970

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 09 / 2013

Transaction ID : ACAFD696135504F9FB53

Amount of Each Receipt this Period
 500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American Optometric Association PAC

Mailing Address 1505 Prince St., Ste. 300

City Alexandria State VA Zip Code 22314-2874

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2013

Transaction ID : AD6B39904D91E4370996

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Food Marketing Institute Political Action Committee

Mailing Address 2345 Crystal Drive Suite 800

City Arlington State VA Zip Code 22202-4813

FEC ID number of contributing federal political committee. **C** C00014555

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2013

Transaction ID : A16FF32A03D184C76828

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Deloitte Federal PAC

Mailing Address PO Box 365

City Washington State DC Zip Code 20044-0365

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2013

Transaction ID : A66CA2F3EE3B84979996

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Owner Operator Independent Drivers Assoc PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 1000

City Grain Valley State MO Zip Code 64029-1000

FEC ID number of contributing federal political committee. **C** C00236778

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2013

Transaction ID : A838B97320A9844C7B66

Amount of Each Receipt this Period
 1000.00

B. Lockheed Martin Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 2121 Crystal Drive Suite 100

City Arlington State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2013

Transaction ID : A1C55648A583D4818A63

Amount of Each Receipt this Period
 1000.00

C. Duke Energy Corporation PAC

Full Name (Last, First, Middle Initial)
Mailing Address 550 S. Tryon Street

City Charlotte State NC Zip Code 28202-4200

FEC ID number of contributing federal political committee. **C** C00083535

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2013

Transaction ID : A9F34C7B20D7B4167A71

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

**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 37 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Koch Industries, Inc. PAC

Mailing Address 600 14th Street NW
Suite 800

City Washington State DC Zip Code 20005-2099

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 27 / 2013

Transaction ID : A7F284511457C444892A

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Publix Super Markets, Inc. Associates PAC

Mailing Address P.O. Box 407

City Lakeland State FL Zip Code 33802-0407

FEC ID number of contributing federal political committee. **C C00400705**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 08 / 2013

Transaction ID : A218491554EDC47ABAC7

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
GOOGLE NETPAC

Mailing Address 1101 New York Ave NW Fl 2
Second Floor

City Washington State DC Zip Code 20005-4344

FEC ID number of contributing federal political committee. **C C00428623**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 08 / 2013

Transaction ID : A792737878F8E4AC1824

Amount of Each Receipt this Period
 1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Farm Credit Council Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 50 F Street, NW
Suite 900

City Washington State DC Zip Code 20001-1530

FEC ID number of contributing federal political committee. **C C00193631**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 08 / 2013

Transaction ID : A4A552E881D344C77B79

Amount of Each Receipt this Period
 1000.00

B. General Electric Company PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1299 Pennsylvania Ave NW
Suite 900

City Washington State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C C00024869**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 30 / 2013

Transaction ID : AECADF168D3F4441A8A1

Amount of Each Receipt this Period
 1500.00

C. BIKES PAC

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 2359

City Boulder State CO Zip Code 80306-2359

FEC ID number of contributing federal political committee. **C C00372862**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 09 / 2013

Transaction ID : A589CD6ED871B4164BF8

Amount of Each Receipt this Period
 500.00

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

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

3000.00

**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 39 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American Dental PAC

Mailing Address 1111 14th St., NW

City Washington State DC Zip Code 20005-5603

FEC ID number of contributing federal political committee. **C C0000729**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 08 / 2013

Transaction ID : A8F5197990EA94C918E2

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Action Committee for Rural Electrification PAC

Mailing Address 4301 Wilson Blvd.

City Arlington State VA Zip Code 22203-1867

FEC ID number of contributing federal political committee. **C C00002972**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2013

Transaction ID : A10BF3A30A68F498D8F5

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
United Technologies Corporation PAC

Mailing Address 1101 Pennsylvania Ave NW Fl 10
10th Floor

City Washington State DC Zip Code 20004-2566

FEC ID number of contributing federal political committee. **C C00035683**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2013

Transaction ID : AC49FA87640FD4290830

Amount of Each Receipt this Period
1000.00

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

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

4000.00

**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 40 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Wells Fargo & Co. Employees PAC

Mailing Address Wells Fargo Ctr Mac N9305-084
Sixth & Marquette

City Minneapolis State MN Zip Code 55479-0001

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2013

Transaction ID : AC7A8F6235C4A499B911

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Realtors Pac

Mailing Address 430 N Michigan Ave # 60611

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2013

Transaction ID : AE38EC6D288B847E3A6D

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Blue Cross Blue Shield of SC PAC

Mailing Address I-20 at Alpine Rd.

City Columbia State SC Zip Code 29219-0001

FEC ID number of contributing federal political committee. **C** C00406850

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2013

Transaction ID : A9EC9947C042048E0807

Amount of Each Receipt this Period
2500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Tallon for Congress Committee

Mailing Address 2734 Cypress Bend Rd.

City Florence	State SC	Zip Code 29506-8352
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00153684

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : AB6B3EF85F4994AF3AFC

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
American Bankers Association PAC

Mailing Address 1120 Connecticut Ave NW

City Washington	State DC	Zip Code 20036-3905
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004275

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : A2E0A8A729806440FB28

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Textile PAC

Mailing Address 469 Hospital Dr
Suite C

City Gastonia	State NC	Zip Code 28054-4779
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00405555

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 26 / 2013

Transaction ID : AF41545CB6107468FB42

Amount of Each Receipt this Period

1000.00

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

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

3000.00

**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 42 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Committee for the Advancement of Cotton

Mailing Address PO Box 2995

City Cordova State TN Zip Code 38088-2995

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : AB346941AE4434023BD5

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
National Restaurant Association PAC

Mailing Address 2055 L St NW Suite 700

City Washington State DC Zip Code 20036-4985

FEC ID number of contributing federal political committee. **C** C00003764

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2013

Transaction ID : AD81C1D7385194F1FB07

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
The Boeing Company PAC

Mailing Address 1200 Wilson Blvd

City Arlington State VA Zip Code 22209-2300

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : AB2B6B9ECF973425AB50

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Duke Energy Corporation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 550 S. Tryon Street
 City State Zip Code
 Charlotte NC 28202-4200
 FEC ID number of contributing federal political committee. **C C00083535**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 08 / 2013
Transaction ID : AD95EAB64EDEB477CA40
 Amount of Each Receipt this Period
 1500.00
 Election Cycle-to-Date
 3500.00

B. Owner Operator Independent Drivers Assoc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1000
 City State Zip Code
 Grain Valley MO 64029-1000
 FEC ID number of contributing federal political committee. **C C00236778**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2013
Transaction ID : A9EF1F3CF00FF4C93911
 Amount of Each Receipt this Period
 1000.00
 Election Cycle-to-Date
 2000.00

C. Deloitte Federal PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 365
 City State Zip Code
 Washington DC 20044-0365
 FEC ID number of contributing federal political committee. **C C00211318**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2013
Transaction ID : A4B8E808DB8AB44889E1
 Amount of Each Receipt this Period
 5000.00
 Election Cycle-to-Date
 9000.00

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

7500.00

**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 44 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
American Bankers Association PAC

Mailing Address 1120 Connecticut Ave NW

City Washington State DC Zip Code 20036-3905

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 23 / 2013

Transaction ID : AB0B3D3E02A0F4DAFB07

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Committee for the Advancement of Cotton

Mailing Address PO Box 2995

City Cordova State TN Zip Code 38088-2995

FEC ID number of contributing federal political committee. **C C00023028**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 27 / 2013

Transaction ID : A4AC34ED105C64F82AED

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ernst & Young PAC

Mailing Address 1101 New Your Avenue, NW

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 13 / 2013

Transaction ID : A28EA51A970D94652942

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Committee for the Advancement of Southeast Cotton

Mailing Address 139 Prominence Court
Suite 110

City Dawsonville State GA Zip Code 30534-8940

FEC ID number of contributing federal political committee. **C** C00300426

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 30 / 2013

Transaction ID : A60FA757232F142EA805

Amount of Each Receipt this Period
 2500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2500.00

61088.50

**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 46 OF 73
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
US House of Representatives Gift Shop

Mailing Address Longworth Building

City Washington State DC Zip Code 20515-0001

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 02 / 2013

Transaction ID : A54CB3D36935242568D4

Amount of Each Receipt this Period
 348.00

Office Supplies-Refund

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

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

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

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

348.00

348.00

**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 47 OF 73			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Ronnie Hribar		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2013
Mailing Address 5040 Carolina Forest Blvd		Amount of Each Disbursement this Period 500.00 Transaction ID : B79F4AA7E46CA4BA0985
City Myrtle Beach	State SC	
Zip Code 29579-3579	Purpose of Disbursement In-kind:Catering	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Eric Dell		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address 908 Eldon Drive		Amount of Each Disbursement this Period 202.49 Transaction ID : BBB6A97D3603F4877873
City Alexandria	State VA	
Zip Code 22302-2218	Purpose of Disbursement In-kind:Catering	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Mr. Gene Ho		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2013
Mailing Address 2024 Ayershire Lane		Amount of Each Disbursement this Period 500.00 Transaction ID : B909BC35B837244F7B82
City Myrtle Beach	State SC	
Zip Code 29575-5816	Purpose of Disbursement In-kind:Photography	Category/Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1202.49
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 48 OF 73	
	<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. Transfirst		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 12202 Airport Way Ste 100		Amount of Each Disbursement this Period 14.55 Transaction ID : B821CD5361AE2423BB1B
City Broomfield	State CO Zip Code 80021-2596	
Purpose of Disbursement Merchant Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2013
Mailing Address 2301 N Kings Hwy		Amount of Each Disbursement this Period 150.30 Transaction ID : BB949D1F0C60E46679C7
City Myrtle Beach	State SC Zip Code 29577-3040	
Purpose of Disbursement Office Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Parkway Office Plaza, Llc		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2013
Mailing Address 1113 48th Ave N		Amount of Each Disbursement this Period 250.00 Transaction ID : BF7DBEA50BEDD4D32B19
City Myrtle Beach	State SC Zip Code 29577-5441	
Purpose of Disbursement Rent		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	414.85
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 49 OF 73			
	<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. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2013
Mailing Address 1043 Barr Rd		Amount of Each Disbursement this Period 1000.00 Transaction ID : B7BE5914B06E847A5910
City Lexington	State SC Zip Code 29072-8648	
Purpose of Disbursement Strategic Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Fed Ex		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2013
Mailing Address 1170 Seaboard St		Amount of Each Disbursement this Period 18.52 Transaction ID : BCC4A3E8134D64017BC0
City Myrtle Beach	State SC Zip Code 29577-6517	
Purpose of Disbursement Shipping	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Vonage Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2013
Mailing Address 23 Main St		Amount of Each Disbursement this Period 18.26 Transaction ID : B3456612BE5874980BD8
City Holmdel	State NJ Zip Code 07733-2136	
Purpose of Disbursement Telephone	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1036.78
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 50 OF 73			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lee Ann Rice		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2013
Mailing Address 3771 Rice Hope Ct		Amount of Each Disbursement this Period 1274.06 Transaction ID : B977FCE640E904BD6BFB
City Myrtle Beach	State SC	
Zip Code 29577-5950	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bnc Bank		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2013
Mailing Address 20175 N 67th Ave		Amount of Each Disbursement this Period 553.63 Transaction ID : B708E3B09C3164540AE3
City Glendale	State AZ	
Zip Code 85308-7000	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Winfrey & Company		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2013
Mailing Address 228 S Washington St Ste B7		Amount of Each Disbursement this Period 2155.93 Transaction ID : B9F5740ECF37F4A6DBA8
City Alexandria	State VA	
Zip Code 22314-5408	Purpose of Disbursement Fundraising Consulting/Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3983.62
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 51 OF 73			
	<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. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2013
Mailing Address Store #338		Amount of Each Disbursement this Period 64.70 Transaction ID : BBB490BCF8F634E9D84C
City Myrtle Beach	State SC	
Purpose of Disbursement Meeting Expense-Food/Beverage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Winfrey & Company		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2013
Mailing Address 228 S Washington St Ste B7		Amount of Each Disbursement this Period 10192.80 Transaction ID : B56BACA47631E4EE2AB5
City Alexandria	State VA	
Purpose of Disbursement Fundraising Consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Bnc Bank		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 20175 N 67th Ave		Amount of Each Disbursement this Period 552.29 Transaction ID : B77E8CE559022444EA82
City Glendale	State AZ	
Purpose of Disbursement Payroll Taxes		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	10809.79
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 52 OF 73			
	<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 M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 28.19 Transaction ID : B0D9F3BA2B92C46BC933
City Myrtle Beach	State SC	
Purpose of Disbursement Payroll Processing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Lee Ann Rice		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2013
Mailing Address 3771 Rice Hope Ct		Amount of Each Disbursement this Period 1274.06 Transaction ID : BD7749D9AC1EF4C709F6
City Myrtle Beach	State SC	
Purpose of Disbursement Salary	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. US House of Representatives Gift Shop		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2013
Mailing Address Longworth Building		Amount of Each Disbursement this Period 1963.10 Transaction ID : BEE7230C3EDA64ECD819
City Washington	State DC	
Purpose of Disbursement Office Supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3265.35
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 53 OF 73			
	<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. The Mace Group, Llc		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2013
Mailing Address 108 N Norfolk Way		Amount of Each Disbursement this Period 6468.75 Transaction ID : B1CF97230E47F412CA01
City State Zip Code Goose Creek SC 29445-7102	Purpose of Disbursement Web Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Thread Logic		Date of Disbursement M M / D D / Y Y Y Y 07 / 26 / 2013
Mailing Address 18190 Dairy Ln Ste 204		Amount of Each Disbursement this Period 1273.30 Transaction ID : B0437E8B00C834340843
City State Zip Code Jordan MN 55352-4560	Purpose of Disbursement Advertising-Campaign Hats	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. BagsandBowsonline.com		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2013
Mailing Address 236 Spring St., NW		Amount of Each Disbursement this Period 328.30 Transaction ID : B94978A463F714B759CD
City State Zip Code Atlanta GA 30303-1004	Purpose of Disbursement Office Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8070.35
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 54 OF 73			
	<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)		Date of Disbursement	
A. Fed Ex		M M / D D / Y Y Y Y 07 / 29 / 2013	
Mailing Address 1170 Seaboard St		Amount of Each Disbursement this Period	
City Myrtle Beach State SC Zip Code 29577-6517		686.17	
Purpose of Disbursement Printing		Transaction ID : BB69762D4FECA4BFF9B0	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. Promoshade Inc.		M M / D D / Y Y Y Y 07 / 30 / 2013	
Mailing Address 10197 E San Salvador Dr		Amount of Each Disbursement this Period	
City Scottsdale State AZ Zip Code 85258-8707		548.04	
Purpose of Disbursement Advertising: Campaign Mugs		Transaction ID : B1FA8E35CE7BA4520BF3	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. Transfirst		M M / D D / Y Y Y Y 08 / 01 / 2013	
Mailing Address 12202 Airport Way Ste 100		Amount of Each Disbursement this Period	
City Broomfield State CO Zip Code 80021-2596		94.54	
Purpose of Disbursement Merchant Fees		Transaction ID : B3441DB4532A543A99AF	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	686.17
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 55 OF 73			
	<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. Victors Bistro & Garden Room		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2013
Mailing Address 1247 S Irby St		Amount of Each Disbursement this Period 6146.95 Transaction ID : B87448308AB834FE3876
City Florence	State SC	
Zip Code 29505-2754	Purpose of Disbursement Event Catering/Site Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Andrukitis Printing		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2013
Mailing Address 50 East St., SE		Amount of Each Disbursement this Period 696.95 Transaction ID : B8F8BBD5DA7144F1B9BD
City Washington	State DC	
Zip Code 20003-2620	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Lee Ann Rice		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2013
Mailing Address 3771 Rice Hope Ct		Amount of Each Disbursement this Period 1274.06 Transaction ID : B67A2AFBC78B54F93850
City Myrtle Beach	State SC	
Zip Code 29577-5950	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8117.96
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 56 OF 73			
	<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. Bnc Bank		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2013
Mailing Address 20175 N 67th Ave		Amount of Each Disbursement this Period 520.11 Transaction ID : BA163B9F0C73343B4928
City Glendale	State AZ	
Zip Code 85308-7000	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Accuchecks		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2013
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 28.19 Transaction ID : BED440487B35D4529993
City Myrtle Beach	State SC	
Zip Code 29577-3103	Purpose of Disbursement Payroll Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Vonage Inc.		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2013
Mailing Address 23 Main St		Amount of Each Disbursement this Period 18.26 Transaction ID : B43D4510CC4AB4B0E8DD
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	566.56
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 57 OF 73	
	<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. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2013
Mailing Address 1043 Barr Rd		Amount of Each Disbursement this Period 1000.00 Transaction ID : B0A7EF1DD81724D9AB2C
City Lexington	State SC Zip Code 29072-8648	
Purpose of Disbursement Strategic Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2013
Mailing Address Mb Main PO		Amount of Each Disbursement this Period 140.00 Transaction ID : BF3A16C090FA946DE80A
City Myrtle Beach	State SC Zip Code 29577-0000	
Purpose of Disbursement PO Box Rental	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Parkway Office Plaza, Llc		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2013
Mailing Address 1113 48th Ave N		Amount of Each Disbursement this Period 250.00 Transaction ID : B76EC3AD7BD4140098D9
City Myrtle Beach	State SC Zip Code 29577-5441	
Purpose of Disbursement Rent	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1390.00
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 58 OF 73	
	<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. Winfrey & Company		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2013
Mailing Address 228 S Washington St Ste B7		Amount of Each Disbursement this Period 3747.27 Transaction ID : B610047C030154801AAB
City Alexandria	State VA Zip Code 22314-5408	
Purpose of Disbursement Fundraising Consulting/catering		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Accuchecks		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2013
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 28.19 Transaction ID : B457ED8C529AB4B84B24
City Myrtle Beach	State SC Zip Code 29577-3103	
Purpose of Disbursement Payroll Processing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Lee Ann Rice		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2013
Mailing Address 3771 Rice Hope Ct		Amount of Each Disbursement this Period 1274.06 Transaction ID : B0E993D2E53E3456AAC2
City Myrtle Beach	State SC Zip Code 29577-5950	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5049.52
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 59 OF 73			
	<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. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2013
Mailing Address 1043 Barr Rd		Amount of Each Disbursement this Period 1595.80 Transaction ID : B84ABA5FA97ED469B9DC
City Lexington State SC Zip Code 29072-8648	Purpose of Disbursement Printing	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bnc Bank		Date of Disbursement M M / D D / Y Y Y Y 08 / 20 / 2013
Mailing Address 20175 N 67th Ave		Amount of Each Disbursement this Period 520.11 Transaction ID : BA42FDB7F9C104CD88CD
City Glendale State AZ Zip Code 85308-7000	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Huckaby Davis Lisker		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2013
Mailing Address 228 S Washington St Ste 115		Amount of Each Disbursement this Period 2004.50 Transaction ID : BAE4FCBEB2A0848129E7
City Alexandria State VA Zip Code 22314-5404	Purpose of Disbursement Compliance Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4120.41
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 60 OF 73			
	<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. Transfirst		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2013
Mailing Address 12202 Airport Way Ste 100		Amount of Each Disbursement this Period 12.55 Transaction ID : BE2C7E4CD8B2043D3A67
City Broomfield State CO Zip Code 80021-2596	Purpose of Disbursement Merchant Fees	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Lee Ann Rice		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2013
Mailing Address 3771 Rice Hope Ct		Amount of Each Disbursement this Period 1274.05 Transaction ID : B2D7B70336AD04929A28
City Myrtle Beach State SC Zip Code 29577-5950	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Bnc Bank		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2013
Mailing Address 20175 N 67th Ave		Amount of Each Disbursement this Period 520.12 Transaction ID : B64D371412D3E4CC5B36
City Glendale State AZ Zip Code 85308-7000	Purpose of Disbursement Payroll Taxes	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1806.72
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 61 OF 73	
	<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 M M / D D / Y Y Y Y 09 / 05 / 2013
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 28.19 Transaction ID : B8424BFE99B7145DBB6D
City Myrtle Beach	State SC Zip Code 29577-3103	
Purpose of Disbursement Payroll Processing	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Vonage Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2013
Mailing Address 23 Main St		Amount of Each Disbursement this Period 18.26 Transaction ID : B1B0B07B054AE4DDB8EC
City Holmdel	State NJ Zip Code 07733-2136	
Purpose of Disbursement Telephone	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Burroughs Co. Property Management		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2013
Mailing Address PO Box 1605		Amount of Each Disbursement this Period 550.00 Transaction ID : B82B1D5F6282548D785D
City Conway	State SC Zip Code 29528-1605	
Purpose of Disbursement Event Site Rental	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	596.45
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 62 OF 73	
	<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. Craven's Grant HOA Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2013
Mailing Address PO Box 2308		Amount of Each Disbursement this Period 500.00 Transaction ID : BAC4ED66AFA1B46C589F
City Pawleys Island	State SC	
Zip Code 29585-2308	Purpose of Disbursement Event Site Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Craven's Grant HOA Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2013
Mailing Address PO Box 2308		Amount of Each Disbursement this Period 500.00 Transaction ID : B49BEE55C48374D83AFE
City Pawleys Island	State SC	
Zip Code 29585-2308	Purpose of Disbursement Event Site Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Parkway Office Plaza, Llc		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2013
Mailing Address 1113 48th Ave N		Amount of Each Disbursement this Period 250.00 Transaction ID : B2FFF8A6C38A64786B0E
City Myrtle Beach	State SC	
Zip Code 29577-5441	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1250.00
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 63 OF 73	
	<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. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2013
Mailing Address 1043 Barr Rd		Amount of Each Disbursement this Period 1000.00 Transaction ID : BE4C5368C0BF042E5AAA
City Lexington	State SC Zip Code 29072-8648	
Purpose of Disbursement Strategic Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Dunes Club		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2013
Mailing Address 9000 N Ocean Blvd		Amount of Each Disbursement this Period 207.36 Transaction ID : B8B22550AE7C84E6AA82
City Myrtle Beach	State SC Zip Code 29572-4424	
Purpose of Disbursement Advertising-Campaign Hats	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. House Members Dining Room		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2013
Mailing Address Capitol 117		Amount of Each Disbursement this Period 152.52 Transaction ID : BE36A95E60A874189ABC
City Washington	State DC Zip Code 20001	
Purpose of Disbursement Meeting Expense	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1359.88
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 64 OF 73			
	<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. Chris Needham		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2013
Mailing Address 5508 Whistling Duck Dr.		Amount of Each Disbursement this Period 500.00 Transaction ID : B14AA1AAF3D2E412A875
City North Myrtle Beach	State SC Zip Code 29582-9340	
Purpose of Disbursement Web Consulting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Lee Ann Rice		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2013
Mailing Address 3771 Rice Hope Ct		Amount of Each Disbursement this Period 1274.07 Transaction ID : B085F7F49A9804671BE1
City Myrtle Beach	State SC Zip Code 29577-5950	
Purpose of Disbursement Salary	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2013
Mailing Address Mb Main PO		Amount of Each Disbursement this Period 138.00 Transaction ID : B1D79737A1B70492BAD9
City Myrtle Beach	State SC Zip Code 29577-0000	
Purpose of Disbursement Postage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1912.07
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 65 OF 73			
	<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. Bnc Bank		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2013
Mailing Address 20175 N 67th Ave		Amount of Each Disbursement this Period 520.10 Transaction ID : B28AC0D50798846D08DA
City Glendale	State AZ	
Zip Code 85308-7000	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Accuchecks		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2013
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 28.19 Transaction ID : BE5339B042D924CCE9EE
City Myrtle Beach	State SC	
Zip Code 29577-3103	Purpose of Disbursement Payroll Processing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Duplicates Ink		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2013
Mailing Address 2408 Main St.		Amount of Each Disbursement this Period 500.00 Transaction ID : BAC2E8E1CC5D141D4B19
City Conway	State SC	
Zip Code 29526-3344	Purpose of Disbursement Direct Mail Production	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1048.29
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 66 OF 73			
	<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. Sea Captains House		Date of Disbursement
Mailing Address 3000 N Ocean Blvd		M M / D D / Y Y Y Y 09 / 25 / 2013
City Myrtle Beach	State SC	Zip Code 29577-3046
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 26.35
Candidate Name		Transaction ID : BEC8FFF74A1CD41A6B8C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) B. Usair		Date of Disbursement
Mailing Address 4000 E Sky Harbor Blvd		M M / D D / Y Y Y Y 09 / 30 / 2013
City Phoenix	State AZ	Zip Code 85034-3802
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 591.70
Candidate Name		Transaction ID : B5572D57FDB994AC9996
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

Full Name (Last, First, Middle Initial) c. House Members Dining Room		Date of Disbursement
Mailing Address Capitol 117		M M / D D / Y Y Y Y 09 / 30 / 2013
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 79.05
Candidate Name		Transaction ID : B6A2331C1A43E4BB9A44
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	697.10
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 67 OF 73			
	<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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2013
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 58.50 Transaction ID : BA009FF23CEB14B3BB92
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement Online Processing	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tom Rice		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2013
Mailing Address 5100 N Ocean Blvd		Amount of Each Disbursement this Period 4060.13 Transaction ID : BED8204BCAD2F4D57B0E
City Myrtle Beach	State SC Zip Code 29577-2541	
Purpose of Disbursement See Memos	Category/Type	
Candidate Name Tom Rice		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2013
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 1712.36 Transaction ID : BBC1C71F5A6AF421C80C [MEMO ITEM]
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement Catering/Meeting Food/Beverage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4118.63
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 68 OF 73	
	<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. Usair		Date of Disbursement MM / DD / YYYY 09 / 11 / 2013
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 2208.50
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Travel	Transaction ID : B1400B76A321840999EE
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	61502.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 73	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dr. Jim Schuster		Date of Disbursement MM / DD / YYYY 08 / 01 / 2013
Mailing Address 623 Aire Acres Rd		Amount of Each Disbursement this Period \$ 500.00 Transaction ID : B9749FF7F9B2F4D73AEA
City Timmonsville	State SC Zip Code 29161-9522	
Purpose of Disbursement Refund: Refund	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	\$ 500.00
TOTAL This Period (last page this line number only).....	\$ 500.00

**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 70 OF 73	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. National Republican Congressional Cmte.		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2013
Mailing Address 320 First St., SE		Amount of Each Disbursement this Period 20875.00 Transaction ID : B6AA897C24A974BD1A8E
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement Transfer	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Horry County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2013
Mailing Address 2351 Highway 501 S		Amount of Each Disbursement this Period 1000.00 Transaction ID : BE17FAEF416AC4F5E864
City Conway State SC Zip Code 29526	Purpose of Disbursement Contribution	
Candidate Name Horry County Republican Party	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Voice for Freedom		Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2013
Mailing Address 412 S. Capital St., SE Ste. B		Amount of Each Disbursement this Period 2000.00 Transaction ID : B2547784DF7B848079AE
City Washington State DC Zip Code 20003-4066	Purpose of Disbursement Contribution	
Candidate Name Voice for Freedom	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2013 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2013 Other2013	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	23875.00
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 71 OF 73			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Grand Strand Young Republicans		Date of Disbursement										
Mailing Address PO Box 2533		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>23</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	09		23		2013
M M	/	D D	/	Y Y Y Y								
09		23		2013								
City	State	Zip Code										
Myrtle Beach	SC	29578-2533										
Purpose of Disbursement Contribution	<input type="text"/>											
Candidate Name	<input type="text"/>											
Office Sought:	House	Disbursement For: 2014										
	Senate	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General										
	President	<input type="checkbox"/> Other (specify)										
State:	District:											
		Amount of Each Disbursement this Period										
		<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00									
500.00												
Transaction ID : BED2E10E15ED54D5F961												

Full Name (Last, First, Middle Initial) B.		Date of Disbursement										
Mailing Address		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y								
City	State	Zip Code										
Purpose of Disbursement	<input type="text"/>											
Candidate Name	<input type="text"/>											
Office Sought:	House	Disbursement For:										
	Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General										
	President	<input type="checkbox"/> Other (specify)										
State:	District:											
		Amount of Each Disbursement this Period										
		<input type="text"/>										

Full Name (Last, First, Middle Initial) C.		Date of Disbursement										
Mailing Address		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	M M	/	D D	/	Y Y Y Y					
M M	/	D D	/	Y Y Y Y								
City	State	Zip Code										
Purpose of Disbursement	<input type="text"/>											
Candidate Name	<input type="text"/>											
Office Sought:	House	Disbursement For:										
	Senate	<input type="checkbox"/> Primary <input type="checkbox"/> General										
	President	<input type="checkbox"/> Other (specify)										
State:	District:											
		Amount of Each Disbursement this Period										
		<input type="text"/>										

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00
500.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td>24375.00</td> </tr> </table>	24375.00
24375.00		

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **TOM RICE FOR CONGRESS** Transaction ID : **C0C785D4DCBF0461EAF3**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Tom Rice** *[PERSONAL FUNDS]* Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address
5100 N Ocean Blvd

City State ZIP Code
Myrtle Beach SC 29577-2541

Original Amount of Loan 50000.00	Cumulative Payment To Date 40500.00	Balance Outstanding at Close of This Period 9500.00
-------------------------------------	----------------------------------------	--------------------------------------------------------

TERMS

Date Incurred M 03 / D 31 / Y 2012	Date Due M M / D D / Y On Demand	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	-------------------------------------	-------------------------------	---------------------------------------------------------------------------------

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	[] 9500.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **TOM RICE FOR CONGRESS** Transaction ID : **C1955110F2BCF4ACF973**

LOAN SOURCE Full Name (Last, First, Middle Initial) Tom Rice	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff2012
Mailing Address 5100 N Ocean Blvd		

City	State	ZIP Code
Myrtle Beach	SC	29577-2541

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	5500.00	44500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 19 / Y 2012 Y	M M / D D / Y On Demand Y Y Y Y	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	44500.00
TOTALS This Period (last page in this line only).....	▶	54000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.