

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 210

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

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

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

Election on MM / DD / YYYY in the State of

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

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

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY 06 / 07 / 2012

through

MM / DD / YYYY 06 / 30 / 2012

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 Collins Wakefield

Signature of Treasurer Collins Wakefield

[Electronically Filed]

Date

MM / DD / YYYY 10 / 15 / 2012

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
TOM RICE FOR CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 06 / 07 / 2012 To: M M / D D / Y Y Y Y 06 / 30 / 2012

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	97319.48	581632.68
(b) Total Contribution Refunds (from Line 20(d))	0.00	1500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	97319.48	580132.68
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	210942.17	669205.51
(b) Total Offsets to Operating Expenditures (from Line 14).....	128.57	1106.39
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	210813.60	668099.12
8. Cash on Hand at Close of Reporting Period (from Line 27).....	8553.56	
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).....	100000.00	

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 06 / 07 / 2012 To: M M / D D / Y Y Y Y 06 / 30 / 2012

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).....	89109.48	542032.68
(ii) Unitemized.....	3710.00	26600.00
(iii) TOTAL of contributions from individuals ▶	92819.48	568632.68
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	4500.00	13000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	97319.48	581632.68
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	50000.00	100000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	50000.00	100000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	128.57	1106.39
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)..... ▶	147448.05	682739.07

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	210942.17	669205.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	1500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1500.00
21. OTHER DISBURSEMENTS	0.00	3480.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	210942.17	674185.51

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	72047.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	147448.05
25. SUBTOTAL (add Line 23 and Line 24).....	219495.73
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	210942.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8553.56

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Amended to update donor information

Form/Schedule:
Transaction ID:

**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 76
	<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	

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) Linwood Altman		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 14 / 2012	
Mailing Address PO Box 164		Transaction ID : 20822.C1979	
City Pawleys Island	State SC	Zip Code 29585-0164	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) James Anderson		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 07 / 2012	
Mailing Address 2512 W. Edgefield Rd.		Transaction ID : 20822.C1949	
City Florence	State SC	Zip Code 29501-1919	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Charles Ingram Lumber Co.	Occupation Manager		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) Denise Apple		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2012	
Mailing Address 8800 N. Ocean Blvd.		Transaction ID : 20822.C2038	
City Myrtle Beach	State SC	Zip Code 29572-4419	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 5000.00		

SUBTOTAL of Receipts This Page (optional).....	3250.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 76
	<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

Full Name (Last, First, Middle Initial) A. James Apple		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2012	
Mailing Address 9407 Lake Dr.		Transaction ID : 20822.C2069	
City Myrtle Beach	State SC	Zip Code 29572-5007	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) B. Robert Steven Bass		Date of Receipt M M / D D / Y Y Y Y 06 / 14 / 2012	
Mailing Address 4708 Oleander Dr.		Transaction ID : 20822.C1980	
City Myrtle Beach	State SC	Zip Code 29577-5742	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Retired	Occupation Radiation Oncologist		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) C. Frank Beattie		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2012	
Mailing Address 494 Hopsewee Rd.		Transaction ID : 20822.C2042	
City Georgetown	State SC	Zip Code 29440-5598	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Hopsewee Plantation	Occupation CEO		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	5250.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 76
	<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)
Warren Beckham

Mailing Address **PO Box 7522**

City **Myrtle Beach** State **SC** Zip Code **29572-0013**

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

Name of Employer **Beckham Management, Inc.** Occupation **Management Services**

Receipt For: 2012
 Primary General
 Other (specify) **Runoff 2012**

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : 20822.C2033

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address **402 Fairway Rd.**

City **Myrtle Beach** State **SC** Zip Code **29572-4717**

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

Name of Employer **Self Employed** Occupation **Homemaker**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2012

Transaction ID : 20822.C1959

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address **917 Medical Cir.**

City **Myrtle Beach** State **SC** Zip Code **29572-4116**

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

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

Receipt For: 2012
 Primary General
 Other (specify) **Runoff 2012**

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 18 / 2012

Transaction ID : 20822.C1993

Amount of Each Receipt this Period
1500.00

Receipt

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 9 OF 76
	<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)
William Biggs

Mailing Address 1001 Plum Ln.

City Anderson State SC Zip Code 29621-3568

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 20 / 2012

Transaction ID : 20822.C2025

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 6386 Maplewild Rd.

City Nichols State SC Zip Code 29581-4108

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2012

Transaction ID : 20822.C1961

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 6386 Maplewild Rd.

City Nichols State SC Zip Code 29581-4108

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2012

Transaction ID : 20822.C1960

Amount of Each Receipt this Period
300.00

Receipt

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 10 OF 76
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stephen Boatwright

Mailing Address 100 White Dove Ln

City Myrtle Beach State SC Zip Code 29579-5326

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2084

Amount of Each Receipt this Period
 _____ 500.00

Receipt

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

Mailing Address PO Box 1175

City Myrtle Beach State SC Zip Code 29578-1175

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

Name of Employer Branton Law Firm Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
 _____ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2012

Transaction ID : 20822.C2017

Amount of Each Receipt this Period
 _____ 1000.00

Receipt

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

Mailing Address 715 Brockington Ln.

City Florence State SC Zip Code 29501-5775

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

Name of Employer Aiken Bridges Law Firm Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
 _____ 1799.93

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2012

Transaction ID : 20822.C2128

Amount of Each Receipt this Period
 _____ 799.93

In-Kind

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

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

_____ 2299.93

**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 76
	<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. Saunders Bridges
 Full Name (Last, First, Middle Initial)
 Mailing Address 715 Brockington Ln.
 City Florence State SC Zip Code 29501-5775
 FEC ID number of contributing federal political committee. C
 Name of Employer Aiken Bridges Law Firm Occupation Attorney
 Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012
 Election Cycle-to-Date 2799.93

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2012
Transaction ID : 20822.C2050
 Amount of Each Receipt this Period
 Receipt 1000.00

B. George Buchanan
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Bridge St.
 City Danville State VA Zip Code 24541-1404
 FEC ID number of contributing federal political committee. C
 Name of Employer Gbb Properties, Ll.c. Occupation Real Estate Developer
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date 1430.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2012
Transaction ID : 20822.C1962
 Amount of Each Receipt this Period
 Receipt 430.00

C. Eleanor Burns
 Full Name (Last, First, Middle Initial)
 Mailing Address 1213 Barnwell Blf.
 City Beaufort State SC Zip Code 29902-4100
 FEC ID number of contributing federal political committee. C
 Name of Employer Self Employed Occupation Homemaker
 Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012
 Election Cycle-to-Date 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012
Transaction ID : 20822.C2065
 Amount of Each Receipt this Period
 Receipt 250.00

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

1680.00

**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 76
	<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)
Carol Burroughs

Mailing Address 8215 Timber Ridge Rd.

City Conway	State SC	Zip Code 29526-9007
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FEC ID number of contributing federal political committee. **C**

Name of Employer BB&T	Occupation Account Manager
--------------------------	-------------------------------

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
1950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2060

Amount of Each Receipt this Period
 100.00

Receipt

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

Mailing Address 48 N. Basilica Ave.

City Hanahan	State SC	Zip Code 29410-8657
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2012

Transaction ID : 20822.C1987

Amount of Each Receipt this Period
 2500.00

Receipt

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

Mailing Address 1225 Partridge Rd.

City Spartanburg	State SC	Zip Code 29302-3329
---------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Healthcare
-----------------------------------	--------------------------

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2012

Transaction ID : 20822.C2012

Amount of Each Receipt this Period
 1000.00

Receipt

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

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

3600.00

**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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 13 OF 76

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Douglas Cecil

Mailing Address **PO Box 3347**

City **Spartanburg** State **SC** Zip Code **29304-3347**

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

Name of Employer **White Oak Manor** Occupation **President**

Receipt For: 2012
 Primary General
 Other (specify) **Runoff 2012**

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 20 / 2012

Transaction ID : 20822.C2016

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address **15 Valencia Cir.**

City **Myrtle Beach** State **SC** Zip Code **29572-4130**

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

Name of Employer **Senator Lindsey Graham** Occupation **Field Rep**

Receipt For: 2012
 Primary General
 Other (specify) **Runoff 2012**

Election Cycle-to-Date **400.05**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 20 / 2012

Transaction ID : 20822.C2129

Amount of Each Receipt this Period
400.05

In-Kind

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

Mailing Address **15 Valencia Cir.**

City **Myrtle Beach** State **SC** Zip Code **29572-4130**

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

Name of Employer **Senator Lindsey Graham** Occupation **Field Rep**

Receipt For: 2012
 Primary General
 Other (specify) **Runoff 2012**

Election Cycle-to-Date **1204.55**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 25 / 2012

Transaction ID : 20822.C2130

Amount of Each Receipt this Period
804.50

In-Kind

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

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

2204.55

**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 76
	<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)
Mary Connolly

Mailing Address 1639 Brookhaven Close NE

City Atlanta State GA Zip Code 30319-5501

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

Name of Employer Self Employed Occupation Homemaker

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2078

Amount of Each Receipt this Period
 Receipt 2000.00

B. Full Name (Last, First, Middle Initial)
T.J. Connolly, II

Mailing Address 1639 Brookhaven Close NE

City Atlanta State GA Zip Code 30319-5501

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

Name of Employer Connolly Realty Services, Inc. Occupation Real Estate

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2086

Amount of Each Receipt this Period
 Receipt 2000.00

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

Mailing Address 6466 Plantersville Rd.

City Georgetown State SC Zip Code 29440-9134

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2012

Transaction ID : 20822.C2020

Amount of Each Receipt this Period
 Receipt 250.00

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

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

4250.00

**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 76
	<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

Full Name (Last, First, Middle Initial) A. Richard Cooke		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 20 / 2012	
Mailing Address PO Box 808		Transaction ID : 20822.C2022	
City Lake View	State SC	Zip Code 29563-0808	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 1000.00	
Name of Employer Cooke Associates Inc.	Occupation President/CEO		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. Lloyd Coppedge		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 11 / 2012	
Mailing Address 315 Ocean View Dr.		Transaction ID : 20822.C1953	
City Myrtle Beach	State SC	Zip Code 29572-5648	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 1000.00	
Name of Employer Wolverine Brass	Occupation CEO		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) C. Gary Crawford		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2012	
Mailing Address PO Box 508		Transaction ID : 20822.C2066	
City Florence	State SC	Zip Code 29503-0508	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 500.00	
Name of Employer Self Employed	Occupation Attorney		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 76
	<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)
William Deschamps

Mailing Address 680 Fernwood Rd.

City Murrells Inlet State SC Zip Code 29576-7764

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 14 / 2012

Transaction ID : 20822.C1982

Amount of Each Receipt this Period
 Receipt **250.00**

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

Mailing Address 4221 Mayfair St., Ste. 203

City Myrtle Beach State SC Zip Code 29577-5757

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

Name of Employer Self Employed Occupation Accountant

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2059

Amount of Each Receipt this Period
 Receipt **200.00**

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

Mailing Address 125 Highway 501 W.

City Galivants Ferry State SC Zip Code 29544-7601

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

Name of Employer Self Employed Occupation Developer

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2190

Amount of Each Receipt this Period
 Memo **1000.00**

[MEMO ITEM]

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

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

450.00

**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 76
	<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)
Vernie Dove

Mailing Address 9409 Cove Dr.

City Myrtle Beach State SC Zip Code 29572-5003

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
605.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 21 / 2012

Transaction ID : 20822.C2031

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 402 43rd Ave., N.

City Myrtle Beach State SC Zip Code 29577-2711

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

Name of Employer Webster Rogers Occupation Accountant

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 26 / 2012

Transaction ID : 20822.C2073

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 300 N. Ocean Blvd.

City North Myrtle Beach State SC Zip Code 29582-2928

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

Name of Employer Avista Resort Occupation General Manager

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 14 / 2012

Transaction ID : 20822.C1975

Amount of Each Receipt this Period
1000.00

Receipt

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 18 OF 76
	<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)
Peter Fitzpatrick

Mailing Address PO Box 410

City Myrtle Beach State SC Zip Code 29578-0410

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

Name of Employer Self Employed Occupation Accountant

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 14 / 2012

Transaction ID : 20822.C1978

Amount of Each Receipt this Period
 Receipt 500.00

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

Mailing Address 805 Pamplico Hwy, Mall A, Ste. 230

City Florence State SC Zip Code 29505-6047

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

Name of Employer Carolinas Hospital Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2012

Transaction ID : 20822.C1999

Amount of Each Receipt this Period
 Receipt 2500.00

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

Mailing Address 518 Mount Gilead Rd.

City Murrells Inlet State SC Zip Code 29576-7713

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

Name of Employer Conway National Bank Occupation Commercial Banker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2012

Transaction ID : 20822.C1965

Amount of Each Receipt this Period
 Receipt 250.00

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 19 OF 76
	<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)
Marion Freeman

Mailing Address 518 Mount Gilead Rd.

City	State	Zip Code
Murrells Inlet	SC	29576-7713

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

Name of Employer	Occupation
Conway National Bank	Commercial Banker

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
 _____ 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 18 / 2012

Transaction ID : 20822.C1991

Amount of Each Receipt this Period
 _____ 250.00

Receipt

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

Mailing Address 3713 Savannah Loop

City	State	Zip Code
Oviedo	FL	32765-9204

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

Name of Employer	Occupation
Chubb Insurance	Loss Control

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 11 / 2012

Transaction ID : 20822.C1955

Amount of Each Receipt this Period
 _____ 250.00

Receipt

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

Mailing Address 5410 Hampton Cir.

City	State	Zip Code
Myrtle Beach	SC	29577-2306

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

Name of Employer	Occupation
Blue Green Corp.	Director

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 14 / 2012

Transaction ID : 20822.C1969

Amount of Each Receipt this Period
 _____ 2500.00

Receipt

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 20 OF 76
	<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

Full Name (Last, First, Middle Initial) Glenn Gullede		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 19 / 2012
Mailing Address 1598 Midway Rd.		Transaction ID : 20822.C2011
City Cheraw	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Requested	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) Kenneth Gunter		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2012
Mailing Address 1970 Gray Oaks Dr.		Transaction ID : 20822.C2046
City Conway	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer FBI Construction	Occupation Vice President	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Joe Hackler		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2012
Mailing Address 61 Bayberry Ln.		Transaction ID : 20822.C2072
City Myrtle Beach	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Restauranteur	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	850.00
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 21 OF 76
	<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)
Lynda Hardee

Mailing Address 1706 Magnolia Dr.

City	State	Zip Code
North Myrtle Beach	SC	29582-6130

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

Name of Employer	Occupation
Homemaker	Homemaker

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
 _____ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 21014.C3023

Amount of Each Receipt this Period
 _____ 2000.00

Receipt

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

Mailing Address 5704 Woodside Ave.

City	State	Zip Code
Myrtle Beach	SC	29577-2248

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

Name of Employer	Occupation
Harrington Construction	Contractor

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
 _____ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2079

Amount of Each Receipt this Period
 _____ 1000.00

Receipt

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

Mailing Address 708 21st Ave., N.

City	State	Zip Code
Myrtle Beach	SC	29577-7400

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

Name of Employer	Occupation
Self Employed	Oral Surgeon

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2058

Amount of Each Receipt this Period
 _____ 500.00

Receipt

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 22 OF 76
	<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

Full Name (Last, First, Middle Initial) Richard Heath		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 21 / 2012
Mailing Address PO Box 15969		Transaction ID : 20822.C2027
City Surfside Beach	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Accountant	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Edwin Hinds, Jr.		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2012
Mailing Address 144 Cabana Rd.		Transaction ID : 20822.C2074
City Myrtle Beach	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Bellamy Law Firm	Occupation Attorney	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) Michael Hogan		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2012
Mailing Address 1359 21st Ave., N.		Transaction ID : 20822.C2081
City Myrtle Beach	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Bbt Ps&h	Occupation Insurance Salesman	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 3000.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
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 23 OF 76
	<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

Full Name (Last, First, Middle Initial) A. Lawrence Holt		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 18 / 2012	
Mailing Address 1529 Cadiz Dr.		Transaction ID : 20822.C1990	
City Myrtle Beach	State SC	Zip Code 29579-5909	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 1000.00	
Name of Employer Coastal Cancer Society	Occupation Doctor		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 2100.00		

Full Name (Last, First, Middle Initial) B. David Horger		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 19 / 2012	
Mailing Address 612 Camellia Cir.		Transaction ID : 20822.C2001	
City Florence	State SC	Zip Code 29501-5701	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 250.00	
Name of Employer Self Employed	Occupation Physician		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Wanda Howard		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2012	
Mailing Address 1890 Arundel Rd.		Transaction ID : 20822.C2053	
City Myrtle Beach	State SC	Zip Code 29577-5907	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 500.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 76
	<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 Howle

Mailing Address 4220 Siwel Rd.

City Conway	State SC	Zip Code 29526-6418
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FEC ID number of contributing federal political committee.

Name of Employer Horry County Cooperative	Occupation Executive Vp
--	----------------------------

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 20822.C2043

Amount of Each Receipt this Period

Receipt

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

Mailing Address 530 Ridgewood Dr.

City Florence	State SC	Zip Code 29501-5520
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FEC ID number of contributing federal political committee.

Name of Employer Remax	Occupation Real Estate Broker
---------------------------	----------------------------------

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 20822.C2005

Amount of Each Receipt this Period

Receipt

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

Mailing Address 403 36th Ave. N.

City Myrtle Beach	State SC	Zip Code 29577-2919
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer Chicora Development	Occupation Realtor
---	-----------------------

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 20822.C2018

Amount of Each Receipt this Period

Receipt

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

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 25 OF 76
	<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)
Ra Johnson

Mailing Address 1831 Johnson Shortcut Rd.

City Galivants Ferry	State SC	Zip Code 29544-8377
-------------------------	-------------	------------------------

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

Name of Employer Johnson Farms	Occupation Owner
-----------------------------------	---------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2012

Transaction ID : 20822.C1966

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Tim Johnson, Jr.

Mailing Address 105 Park Ave

City Conway	State SC	Zip Code 29526-3630
----------------	-------------	------------------------

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 29 / 2012

Transaction ID : 20822.C2099

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 308 Ocean View Dr.

City Myrtle Beach	State SC	Zip Code 29572-5637
----------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Investor
-----------------------------------	------------------------

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2080

Amount of Each Receipt this Period
1000.00

Receipt

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 26 OF 76
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert Kilgo

Mailing Address **PO Box 583**

City **Darlington** State **SC** Zip Code **29540-0583**

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

Name of Employer **Self Employed** Occupation **Attorney**

Receipt For: 2012
 Primary General
 Other (specify) **Runoff 2012**

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 18 / 2012

Transaction ID : 20822.C1994

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address **7881 San Marcello Dr.**

City **Myrtle Beach** State **SC** Zip Code **29579-5944**

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

Name of Employer **First Federal Bank** Occupation **President**

Receipt For: 2012
 Primary General
 Other (specify) **Runoff 2012**

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 14 / 2012

Transaction ID : 20822.C1977

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address **10554 Ocean Hwy.**

City **Pawleys Island** State **SC** Zip Code **29585-6510**

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

Name of Employer **Lachicotte Realty** Occupation **Real Estate Sales**

Receipt For: 2012
 Primary General
 Other (specify) **Runoff 2012**

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 22 / 2012

Transaction ID : 20822.C2035

Amount of Each Receipt this Period
500.00

Receipt

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 27 OF 76
	<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

Full Name (Last, First, Middle Initial) William Lawson		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 12 / 2012	
Mailing Address 1220 Pinewood Cir		Transaction ID : 20822.C1968	
City Conway	State SC	Zip Code 29526-3442	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 100.00	
Name of Employer Turner Padgett Law Firm	Occupation Attorney		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) Thomas Leonard		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2012	
Mailing Address 376 Rum Gully Rd.		Transaction ID : 20822.C2051	
City Murrells Inlet	State SC	Zip Code 29576-7724	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 500.00	
Name of Employer State Farm Insurance	Occupation Insurance Sales		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) Andrew Lesnik		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 26 / 2012	
Mailing Address 265 Patterson Dr.		Transaction ID : 20822.C2054	
City Myrtle Beach	State SC	Zip Code 29572-5640	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period Receipt 500.00	
Name of Employer LHWH Advertising	Occupation Marketing		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 1500.00		

SUBTOTAL of Receipts This Page (optional).....	1100.00
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 28 OF 76
	<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)
Ann Lill

Mailing Address 802 Mast Ct.

City Murrells Inlet State SC Zip Code 29576-8727

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2012

Transaction ID : 20822.C1998

Amount of Each Receipt this Period
 Receipt 1000.00

Receipt 1100.00

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

Mailing Address 2114 N. Berwick Dr.

City Myrtle Beach State SC Zip Code 29575-5824

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

Name of Employer Lively Consulting Services Occupation Consulting

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : 20822.C2029

Amount of Each Receipt this Period
 Receipt 250.00

Receipt 250.00

C. Full Name (Last, First, Middle Initial)
D D Housing Resources, LLC

Mailing Address PO Box 160

City Aynor State SC Zip Code 29511-0160

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2064

Amount of Each Receipt this Period
 Receipt 1000.00

Receipt 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 29 OF 76
	<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)
Dennis Lofe

Mailing Address 41 Fernie Ln.

City Rembert State SC Zip Code 29128-9695

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

Name of Employer Gm Wilson Group Occupation Nursing Home Management

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2012

Transaction ID : 20822.C2013

Amount of Each Receipt this Period
 Receipt 500.00

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

Mailing Address 134 N. Gate Rd.

City Myrtle Beach State SC Zip Code 29572-5618

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 29 / 2012

Transaction ID : 20822.C2095

Amount of Each Receipt this Period
 Receipt 500.00

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

Mailing Address 3201 Mister Joe White Ave.

City Myrtle Beach State SC Zip Code 29577-6709

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

Name of Employer Mancill Electric Occupation Contractor

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2012

Transaction ID : 20822.C2023

Amount of Each Receipt this Period
 Receipt 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 30 OF 76
	<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)
Bob Mauragas

Mailing Address 1060 Spring Valley Way

City State Zip Code
Bishop GA 30621-1339

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

Name of Employer Occupation
National Golf Management President

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 22 / 2012

Transaction ID : 20822.C2036

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 500 15th Ave. S.

City State Zip Code
North Myrtle Beach SC 29582-3914

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

Name of Employer Occupation
Defender Resort Management President/CEO

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 15 / 2012

Transaction ID : 20822.C1985

Amount of Each Receipt this Period
2500.00

Receipt

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

Mailing Address 316 Wildwood Dunes Trl.

City State Zip Code
Myrtle Beach SC 29572-4749

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

Name of Employer Occupation
Grand Strad Regional Medical C Orthopedic Surgeon

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 22 / 2012

Transaction ID : 20822.C2044

Amount of Each Receipt this Period
250.00

Receipt

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 31 OF 76
	<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)
William Musser

Mailing Address 178 Alexander Circle

City Columbia State SC Zip Code 29206-4956

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

Name of Employer McNair Law Firm, PA Occupation Lawyer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 29 / 2012

Transaction ID : 20822.C2101

Amount of Each Receipt this Period
100.00

Receipt

B. Full Name (Last, First, Middle Initial)
John L. Napier

Mailing Address PO Box 2874

City Pawleys Island State SC Zip Code 29585-2874

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 12 / 2012

Transaction ID : 20822.C1964

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 3917 Kenilworth Rd.

City Columbia State SC Zip Code 29205-1503

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

Name of Employer Pitts Radiology Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 14 / 2012

Transaction ID : 20822.C1973

Amount of Each Receipt this Period
1000.00

Receipt

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

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

1600.00

**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 76
	<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)
W. Gairy Nichols

Mailing Address 128 Atlantic Ave.

City Murrells Inlet State SC Zip Code 29576-8008

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

Name of Employer Dunes Realty Occupation Realtor

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 21 / 2012

Transaction ID : 20822.C2032

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 501 Camellia Dr.

City Florence State SC Zip Code 29506-8335

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

Name of Employer ADP Occupation Salesperson

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 19 / 2012

Transaction ID : 20822.C2010

Amount of Each Receipt this Period
2500.00

Receipt

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

Mailing Address 800 E. Cheves St. Ste. 200

City Florence State SC Zip Code 29506-2651

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

Name of Employer Self Employed Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : 20822.C2091

Amount of Each Receipt this Period
1000.00

Receipt

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

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

3700.00

**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 33 OF 76
	<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)
Edward OConnor

Mailing Address 1544 Kadleston Way NE

City Sandy Springs State GA Zip Code 30319-2508

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2012

Transaction ID : 20822.C2041

Amount of Each Receipt this Period
 Receipt 2000.00

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

Mailing Address 7601 Kingswood Dr.

City Myrtle Beach State SC Zip Code 29572-4157

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012

Transaction ID : 20822.C1952

Amount of Each Receipt this Period
 Receipt 250.00

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

Mailing Address 217 81st Ave. N.

City Myrtle Beach State SC Zip Code 29572-4341

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

Name of Employer Retired Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 07 / 2012

Transaction ID : 20822.C1951

Amount of Each Receipt this Period
 Receipt 500.00

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 34 OF 76
	<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

Full Name (Last, First, Middle Initial) David Posek		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2012
Mailing Address 274 Doral Dr.		Transaction ID : 20822.C2037
City Pawleys Island	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Michel Qhirkew		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 11 / 2012
Mailing Address 32 Dolphin Point Dr.		Transaction ID : 20822.C1954
City Beaufort	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00
Name of Employer Self Employed	Occupation Engineer	Receipt
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) Ted Quantz		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 12 / 2012
Mailing Address 394 Dune Oaks Dr.		Transaction ID : 20822.C1956
City Georgetown	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Salesman	Receipt
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1286.89	

SUBTOTAL of Receipts This Page (optional).....	1600.00
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 35 OF 76
	<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)
Jc Ray

Mailing Address PO Box 416

City State Zip Code
Conway SC 29528-0416

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

Name of Employer Occupation
Ray Realty, Inc. Realtor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
590.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 07 / 2012

Transaction ID : 20822.C1950

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address PO Box 1773

City State Zip Code
Myrtle Beach SC 29578-1773

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 20 / 2012

Transaction ID : 20822.C2019

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 4509 Carriage Run Cir.

City State Zip Code
Murrells Inlet SC 29576-5862

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

Name of Employer Occupation
Self Employed Oral Surgeon

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 26 / 2012

Transaction ID : 20822.C2090

Amount of Each Receipt this Period
1000.00

Receipt

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 36 OF 76
	<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)
Janet Rockey

Mailing Address 790 Wallace Pate Dr.

City State Zip Code
Georgetown SC 29440-7089

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 20822.C2071

Amount of Each Receipt this Period

Receipt

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

Mailing Address PO Box 2398

City State Zip Code
Myrtle Beach SC 29578-2398

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 20822.C2087

Amount of Each Receipt this Period

Receipt

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

Mailing Address 4091 Coyledom Ct.

City State Zip Code
Myrtle Beach SC 29577-5878

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Global Physics Solutions Physicist

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : 20822.C2034

Amount of Each Receipt this Period

Receipt

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

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 37 OF 76
	<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

Full Name (Last, First, Middle Initial) David Searcy		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 14 / 2012	
Mailing Address 2228 Windsor Forest Dr.		Transaction ID : 20822.C1972	
City Florence	State SC	Zip Code 29501-2069	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Palmetto Packaging	Occupation President		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) Ed Shelley		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 22 / 2012	
Mailing Address PO Box 1024		Transaction ID : 20822.C2040	
City Murrells Inlet	State SC	Zip Code 29576-1024	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer Shelley Farms	Occupation Owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 4000.00		

Full Name (Last, First, Middle Initial) Rob Shore		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 21 / 2012	
Mailing Address 1610 Parkins Mill Rd.		Transaction ID : 20822.C2028	
City Greenville	State SC	Zip Code 29607-3644	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self Employed	Occupation Real Estate Appraiser		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	3000.00
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 38 OF 76
	<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 Shortt

Mailing Address 85 Bonnyneck Dr.

City State Zip Code
Georgetown SC 29440-7314

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 22 / 2012

Transaction ID : 20822.C2052

Amount of Each Receipt this Period
200.00

Receipt

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

Mailing Address 306 Wildwood Dunes Trl.

City State Zip Code
Myrtle Beach SC 29572-4749

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

Name of Employer Occupation
New South Companies Business Management

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 22 / 2012

Transaction ID : 20822.C2045

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address PO Box 1244

City State Zip Code
Conway SC 29528-1244

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

Name of Employer Occupation
Singleton, Burroughs & Young Attorney

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 14 / 2012

Transaction ID : 20822.C1976

Amount of Each Receipt this Period
200.00

Receipt

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

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

900.00

**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 76
	<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

Full Name (Last, First, Middle Initial) A. Christi Sloan		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 19 / 2012	
Mailing Address 112 Twinoak Ct.		Transaction ID : 20822.C2000	
City Myrtle Beach	State SC	Zip Code 29572-4431	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Self Employed	Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) B. Sammy Spann		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 18 / 2012	
Mailing Address 538 Fernwood Rd.		Transaction ID : 20822.C1996	
City Murrells Inlet	State SC	Zip Code 29576-7763	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Spann Roofing	Occupation Contractor		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 3500.00		

Full Name (Last, First, Middle Initial) C. John Springs		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 15 / 2012	
Mailing Address 411 Rum Gully Rd.		Transaction ID : 20822.C1984	
City Murrells Inlet	State SC	Zip Code 29576-7730	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Ponderosa, Inc.	Occupation Manager		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 1750.00		

SUBTOTAL of Receipts This Page (optional).....	3750.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 76
	<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)
Robert Stith

Mailing Address 1382 Lazar Pl.

City	State	Zip Code
Florence	SC	29501-5659

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

Name of Employer	Occupation
Self Employed	CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 29 / 2012

Transaction ID : 20822.C2097

Amount of Each Receipt this Period
 _____ 500.00

Receipt

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

Mailing Address 6615 S. Irby St.

City	State	Zip Code
Effingham	SC	29541-3577

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

Name of Employer	Occupation
McCall Farms	Owner

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2076

Amount of Each Receipt this Period
 _____ 1000.00

Receipt

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

Mailing Address 5111 N. Kings Hwy.

City	State	Zip Code
Myrtle Beach	SC	29577-2550

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

Name of Employer	Occupation
Remax Ocean Forest	Realtor

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2056

Amount of Each Receipt this Period
 _____ 150.00

Receipt

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

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

_____ 1650.00

**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 76
	<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

Full Name (Last, First, Middle Initial) A. Hank Thomas		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2012	
Mailing Address 804 Tillson Rd.		Transaction ID : 20822.C2092	
City North Myrtle Beach	State SC	Zip Code 29582-2848	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Century 21 Real Estate	Occupation Realtor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750.00		

Full Name (Last, First, Middle Initial) B. James Vaught		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2012	
Mailing Address 1406 Main St.		Transaction ID : 20822.C2093	
City Conway	State SC	Zip Code 29526-3567	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Vivian Vereen		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2012	
Mailing Address 302 Lafayette Rd.		Transaction ID : 20822.C2098	
City Myrtle Beach	State SC	Zip Code 29572-5401	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 275.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 875.00		

SUBTOTAL of Receipts This Page (optional).....	1775.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 76
	<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)
Dennis Wade

Mailing Address 1403 Highland Circle

City Myrtle Beach State SC Zip Code 29575-5858

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

Name of Employer The Jackson Companies Occupation President & CEO

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2012

Transaction ID : 20822.C2014

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
J. Collins Wakefield

Mailing Address 5912 Haskell Cir.

City Myrtle Beach State SC Zip Code 29577-2351

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

Name of Employer Occupation CFO

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 14 / 2012

Transaction ID : 20822.C1974

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address 377 W. Palmetto St.

City Florence State SC Zip Code 29501-4417

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

Name of Employer Sexton Dental Clinic, Inc. Occupation President/CEO

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 22 / 2012

Transaction ID : 20822.C2049

Amount of Each Receipt this Period
250.00

Receipt

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 43 OF 76
	<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

Full Name (Last, First, Middle Initial) A. Dennis Wheeler		Date of Receipt M M / D D / Y Y Y Y 06 / 20 / 2012	
Mailing Address 2483 River Bluff Ln.		Transaction ID : 20822.C2015	
City Mt Pleasant	State SC	Zip Code 29466-8671	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Laure Baye Healthcare	Occupation President/CEO		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) B. Roxanne Williams		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2012	
Mailing Address 404 36th Ave. N.		Transaction ID : 20822.C2083	
City Myrtle Beach	State SC	Zip Code 29577-2920	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) C. Di Wilson		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2012	
Mailing Address PO Box 1382		Transaction ID : 20822.C2039	
City Georgetown	State SC	Zip Code 29442-1382	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	2400.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 76
	<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

Full Name (Last, First, Middle Initial) A. Sylvia Wood		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2012	
Mailing Address 26 Chapin Cir.		Transaction ID : 20822.C2085	
City Myrtle Beach	State SC	Zip Code 29572-4405	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Alabama Theater	Occupation Manager		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Claire Yarborough		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2012	
Mailing Address 89 Barony Vw.		Transaction ID : 20822.C2062	
City Georgetown	State SC	Zip Code 29440-8203	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self Employed	Occupation Homemaker		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Tina Yates		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2012	
Mailing Address 815 Saint Charles Rd.		Transaction ID : 20822.C2088	
City North Myrtle Beach	State SC	Zip Code 29582-2845	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Hoskins Restaurant	Occupation Owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff 2012	Election Cycle-to-Date 2150.00		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	89109.48

**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 76
	<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)
International Paper PAC

Mailing Address 1101 Pennsylvania Ave., NW, Ste. 2

City Washington State DC Zip Code 20004-2514

FEC ID number of contributing federal political committee. **C** C00034405

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2068

Amount of Each Receipt this Period
 Receipt 1000.00

B. Full Name (Last, First, Middle Initial)
National Health Corporation PAC

Mailing Address PO Box 1398

City Murfreesboro State TN Zip Code 37133-1398

FEC ID number of contributing federal political committee. **C** C00153445

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2012

Transaction ID : 20822.C2021

Amount of Each Receipt this Period
 Receipt 1500.00

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

Mailing Address 1500 Industrial Rd.

City Greeneville State TN Zip Code 37745-3541

FEC ID number of contributing federal political committee. **C** C00371229

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2012

Transaction ID : 20822.C2089

Amount of Each Receipt this Period
 Receipt 1000.00

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 46 OF 76
	<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)
United Health Services Inc. PAC

Mailing Address 211 E. Doyle St.

City State Zip Code
Toccoa GA 30577-2960

FEC ID number of contributing federal political committee. **C** C00400135

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify) Runoff 2012

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 20 / 2012

Transaction ID : 20822.C2024

Amount of Each Receipt this Period
 Receipt
 1000.00

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).....

1000.00

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 47 OF 76
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Tom Rice

Mailing Address 5100 N. Ocean Blvd.

City Myrtle Beach State SC Zip Code 29577-2541

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

Name of Employer self-employed Occupation CPA

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2012

Transaction ID : 20822.C2147

Amount of Each Receipt this Period
50000.00

Loans Made/Guaranteed by Cand.

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 M / D 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 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).....

50000.00

50000.00

**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 48 OF 76			
	<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. Black Bear Golf Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address Highway 9		Amount of Each Disbursement this Period 250.00
City North Myrtle Beach	State SC	
Zip Code 29582-	Purpose of Disbursement Meeting Expense	Transaction ID : 20822.E118
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)	MEETING EXPENSE
State: District:		

Full Name (Last, First, Middle Initial) B. Cumulus Murrells Inlet		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address 11640 Highway 17 Bypass		Amount of Each Disbursement this Period 942.00
City Murrells Inlet	State SC	
Zip Code 29576-	Purpose of Disbursement Media Buy	Transaction ID : 20822.E158
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)	MEDIA BUY
State: District:		

Full Name (Last, First, Middle Initial) c. Huckaby Davis Lisker		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 228 S Washington St Ste 115		Amount of Each Disbursement this Period 2006.40
City Alexandria	State VA	
Zip Code 22314-5404	Purpose of Disbursement Compliance Consulting	Transaction ID : 20822.E198
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)	COMPLIANCE CONSULTING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3198.40
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 76			
	<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. Lands End		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address 444 Marina Dr.		Amount of Each Disbursement this Period 1083.24
City Georgetown	State SC	
Zip Code 29440-	Purpose of Disbursement Event Catering	Transaction ID : 20822.E217
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)	EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) B. Logan Furr		Date of Disbursement MM / DD / YYYY 06 / 20 / 2012
Mailing Address 3713 Savannah Loop Rd.		Amount of Each Disbursement this Period 658.92
City Oveido	State FL	
Zip Code 32765-	Purpose of Disbursement Salary	Transaction ID : 20822.E221
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)	SALARY
State: District:		

Full Name (Last, First, Middle Initial) c. Logan Furr		Date of Disbursement MM / DD / YYYY 06 / 29 / 2012
Mailing Address 3713 Savannah Loop Rd.		Amount of Each Disbursement this Period 187.01
City Oveido	State FL	
Zip Code 32765-	Purpose of Disbursement Salary	Transaction ID : 20822.E220
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)	SALARY
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1929.17
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 50 OF 76			
	<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. Longbeards		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 5040 Carolina Forest Blvd.		Amount of Each Disbursement this Period 1200.00
City Myrtle Beach	State SC Zip Code 29577-	
Purpose of Disbursement Event Catering	Candidate Name	Transaction ID : 20822.E222
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	EVENT CATERING

Full Name (Last, First, Middle Initial) B. Mclaughlin Company		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 1825 Brigadoone Ln.		Amount of Each Disbursement this Period 479.76
City Florence	State SC Zip Code 29505-3236	
Purpose of Disbursement Office Supplies	Candidate Name	Transaction ID : 20822.E241
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	OFFICE SUPPLIES

Full Name (Last, First, Middle Initial) c. Mgi Al-sc- Tri Media		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address PO Box 25818		Amount of Each Disbursement this Period 1230.00
City Richmond	State VA Zip Code 23260-5818	
Purpose of Disbursement Media Buy	Candidate Name	Transaction ID : 20822.E242
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	MEDIA BUY

SUBTOTAL of Disbursements This Page (optional).....	2909.76
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 76			
	<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. Quantum Of Florence			Date of Disbursement MM / DD / YYYY 06 / 20 / 2012
Mailing Address 181 E. Evans St., #311			Amount of Each Disbursement this Period 2692.80
City Florence	State SC	Zip Code 29506-	
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : 20822.E317
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)		MEDIA BUY
State: District:			

Full Name (Last, First, Middle Initial) B. Quantum Of Myrtle Beach			Date of Disbursement MM / DD / YYYY 06 / 11 / 2012
Mailing Address 4841 Hwy 17 Bypass South			Amount of Each Disbursement this Period 612.00
City Myrtle Beach	State SC	Zip Code 29577-	
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : 20822.E318
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)		MEDIA BUY
State: District:			

Full Name (Last, First, Middle Initial) c. Quantum Of Myrtle Beach			Date of Disbursement MM / DD / YYYY 06 / 11 / 2012
Mailing Address 4841 Hwy 17 Bypass South			Amount of Each Disbursement this Period 490.00
City Myrtle Beach	State SC	Zip Code 29577-	
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : 20822.E319
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)		MEDIA BUY
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	3794.80
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 76	
	<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 Phillips Group		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2012
Mailing Address 1117 Glenwood Rd.		Amount of Each Disbursement this Period 9701.55
City Columbia	State SC	
Zip Code 29204-3348	Purpose of Disbursement Fundraising Consulting	Transaction ID : 20822.E374
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)	FUNDRAISING CONSULTING
State: District:		

Full Name (Last, First, Middle Initial) B. Wrnn		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 1016 Ocala St.		Amount of Each Disbursement this Period 357.85
City Myrtle Beach	State SC	
Zip Code 29577-	Purpose of Disbursement Media Buy	Transaction ID : 20822.E442
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)	MEDIA BUY
State: District:		

Full Name (Last, First, Middle Initial) C. Wrnn		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 1016 Ocala St.		Amount of Each Disbursement this Period 749.70
City Myrtle Beach	State SC	
Zip Code 29577-	Purpose of Disbursement Media Buy	Transaction ID : 20822.E441
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)	MEDIA BUY
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9701.55
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 76			
	<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 06 / 20 / 2012
Mailing Address 605 19th Ave. N.		Amount of Each Disbursement this Period 38.53
City Myrtle Beach	State SC	Zip Code 29577-
Purpose of Disbursement Accounting	Category/ Type	
Candidate Name	Transaction ID : 20822.E85	
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:	ACCOUNTING	

Full Name (Last, First, Middle Initial) B. Accuchecks		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 605 19th Ave. N.		Amount of Each Disbursement this Period 38.53
City Myrtle Beach	State SC	Zip Code 29577-
Purpose of Disbursement Accounting	Category/ Type	
Candidate Name	Transaction ID : 20822.E84	
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:	ACCOUNTING	

Full Name (Last, First, Middle Initial) c. Jeff Alderman		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 1404 Reid Ct.		Amount of Each Disbursement this Period 500.00
City Myrtle Beach	State SC	Zip Code 29588-1917
Purpose of Disbursement Salary	Category/ Type	
Candidate Name	Transaction ID : 20822.E7	
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:	SALARY	

SUBTOTAL of Disbursements This Page (optional).....	577.06
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 76			
	<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. Banana Jack Murphy Productions			Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address PO Box 578			Amount of Each Disbursement this Period 500.00
City Loris	State SC	Zip Code 29569-	
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : 20822.E107
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)		MEDIA BUY
State: District:			

Full Name (Last, First, Middle Initial) B. Bi-lo			Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address Store #116			Amount of Each Disbursement this Period 22.17
City Myrtle Beach	State SC	Zip Code 29577-	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : 20822.E113
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)		MEETING EXPENSE
State: District:			

Full Name (Last, First, Middle Initial) C. Bi-lo			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address Store #116			Amount of Each Disbursement this Period 270.00
City Myrtle Beach	State SC	Zip Code 29577-	
Purpose of Disbursement Postage/Shipping		Category/ Type	Transaction ID : 20822.E112
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)		POSTAGE/SHIPPING
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	792.17
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 76			
	<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 06 / 20 / 2012
Mailing Address 20175 N. 67th Ave		Amount of Each Disbursement this Period 2541.11
City Glendale	State AZ	
Zip Code 85308-	Purpose of Disbursement Payroll Taxes	PAYROLL TAXES
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) B. BNC Bank		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 20175 N. 67th Ave		Amount of Each Disbursement this Period 1620.34
City Glendale	State AZ	
Zip Code 85308-	Purpose of Disbursement Payroll Taxes	PAYROLL TAXES
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. Saunders Bridges		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2012
Mailing Address 715 Brockington Ln.		Amount of Each Disbursement this Period 799.93
City Florence	State SC	
Zip Code 29501-5775	Purpose of Disbursement	IN KIND:
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).....	4961.38
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 76			
	<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. Susan Chapman		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address 15 Valencia Cir.		Amount of Each Disbursement this Period 400.05 Transaction ID : 20822.C2129IK
City Myrtle Beach	State SC	
Zip Code 29572-4130	Purpose of Disbursement	IN KIND:
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) B. Susan Chapman		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 15 Valencia Cir.		Amount of Each Disbursement this Period 804.50 Transaction ID : 20822.C2130IK
City Myrtle Beach	State SC	
Zip Code 29572-4130	Purpose of Disbursement	IN KIND:
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. Charles Crawford		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address 819 Shem Creek Cir		Amount of Each Disbursement this Period 1065.79 Transaction ID : 20822.E11
City Myrtle Beach	State SC	
Zip Code 29588-	Purpose of Disbursement Salary	SALARY
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).....	2270.34
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 76			
	<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. Charles Crawford			Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 819 Shem Creek Cir			Amount of Each Disbursement this Period 281.48
City Myrtle Beach	State SC	Zip Code 29588-	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : 20822.E10
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)		SALARY
State: District:			

Full Name (Last, First, Middle Initial) B. Jonathan Dix			Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 118 Mallard St			Amount of Each Disbursement this Period 300.00
City Greenville	State SC	Zip Code 29601-	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : 20822.E15
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)		SALARY
State: District:			

Full Name (Last, First, Middle Initial) c. Fed Ex			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012
Mailing Address 1170 Seabord St.			Amount of Each Disbursement this Period 10.89
City Myrtle Beach	State FL	Zip Code 29577-	
Purpose of Disbursement Postage/Shipping		Category/ Type	Transaction ID : 20822.E171
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)		POSTAGE/SHIPPING
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	592.37
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 76			
	<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		<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>06</td> <td></td> <td>14</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		14		2012
M M	/	D D	/	Y Y Y Y								
06		14		2012								
Mailing Address 1170 Seabord St.		Amount of Each Disbursement this Period										
City Myrtle Beach State FL Zip Code 29577-		<table border="1"> <tr> <td>20.90</td> </tr> </table>	20.90									
20.90												
Purpose of Disbursement Postage/Shipping		Transaction ID : 20822.E170										
Candidate Name		Category/Type										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		POSTAGE/SHIPPING										
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Fidelity Broadcasting		<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>06</td> <td></td> <td>11</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		11		2012
M M	/	D D	/	Y Y Y Y								
06		11		2012								
Mailing Address 3926 Wesley St Ste 301		Amount of Each Disbursement this Period										
City Myrtle Beach State SC Zip Code 29579-7307		<table border="1"> <tr> <td>856.80</td> </tr> </table>	856.80									
856.80												
Purpose of Disbursement Media Buy		Transaction ID : 20822.E181										
Candidate Name		Category/Type										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		MEDIA BUY										
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. Fidelity Broadcasting		<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>06</td> <td></td> <td>19</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	06		19		2012
M M	/	D D	/	Y Y Y Y								
06		19		2012								
Mailing Address 3926 Wesley St Ste 301		Amount of Each Disbursement this Period										
City Myrtle Beach State SC Zip Code 29579-7307		<table border="1"> <tr> <td>1666.00</td> </tr> </table>	1666.00									
1666.00												
Purpose of Disbursement Media Buy		Transaction ID : 20822.E180										
Candidate Name		Category/Type										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		MEDIA BUY										
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State:	District:											

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>2543.70</td> </tr> </table>	2543.70
2543.70		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 76			
	<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. Lowes Foods			Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address Store #234 Grand Dunes			Amount of Each Disbursement this Period 50.33
City Myrtle Beach	State SC	Zip Code 29577-	Transaction ID : 20822.E224
Purpose of Disbursement Event Catering		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	EVENT CATERING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Lowes Foods			Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address Store #234 Grand Dunes			Amount of Each Disbursement this Period 128.99
City Myrtle Beach	State SC	Zip Code 29577-	Transaction ID : 20822.E223
Purpose of Disbursement Event Catering		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	EVENT CATERING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) c. Tyson Grinstead			Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address 6239 Hoagie Creek			Amount of Each Disbursement this Period 1167.35
City Snow Camp	State NC	Zip Code 27349-	Transaction ID : 20822.E21
Purpose of Disbursement Salary		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1346.67
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 76			
	<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. Tyson Grinstead		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 6239 Hoagie Creek		Amount of Each Disbursement this Period 805.02
City Snow Camp	State NC Zip Code 27349-	
Purpose of Disbursement Salary	Candidate Name	Transaction ID : 20822.E20
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	SALARY

Full Name (Last, First, Middle Initial) B. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2012
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 125.00
City Myrtle Beach	State SC Zip Code 29577-5705	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : 20822.E208
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	TRAVEL

Full Name (Last, First, Middle Initial) c. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2012
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 60.00
City Myrtle Beach	State SC Zip Code 29577-5705	
Purpose of Disbursement Travel	Candidate Name	Transaction ID : 20822.E207
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	TRAVEL

SUBTOTAL of Disbursements This Page (optional).....	990.02
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 76	
	<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. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 63.50
City Myrtle Beach	State SC	
Zip Code 29577-5705	Purpose of Disbursement Travel	Transaction ID : 20822.E205
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)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) B. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 125.00
City Myrtle Beach	State SC	
Zip Code 29577-5705	Purpose of Disbursement Travel	Transaction ID : 20822.E206
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)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) C. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 71.50
City Myrtle Beach	State SC	
Zip Code 29577-5705	Purpose of Disbursement Travel	Transaction ID : 20822.E204
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)	TRAVEL
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	260.00
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 62 OF 76	
	<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. Marriott Courtyard		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2012
Mailing Address 2680 Hospitality Blvd.		Amount of Each Disbursement this Period 110.88
City Florence	State SC	
Zip Code 29501-	Purpose of Disbursement Travel	Transaction ID : 20822.E239
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)	TRAVEL
State: District:		

Full Name (Last, First, Middle Initial) B. Next Media Myrtle Beach		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address 1016 Ocala St.		Amount of Each Disbursement this Period 418.20
City Myrtle Beach	State SC	
Zip Code 29577-	Purpose of Disbursement Media Buy	Transaction ID : 20822.E246
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)	MEDIA BUY
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 2301 N. Kings Hwy.		Amount of Each Disbursement this Period 113.32
City Myrtle Beach	State SC	
Zip Code 29577-3040	Purpose of Disbursement Office Supplies	Transaction ID : 20822.E252
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)	OFFICE SUPPLIES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	642.40
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 76	
	<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. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 2301 N. Kings Hwy.		Amount of Each Disbursement this Period 28.33
City Myrtle Beach	State SC	
Zip Code 29577-3040	Purpose of Disbursement Office Supplies	Transaction ID : 20822.E251
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)	OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 2301 N. Kings Hwy.		Amount of Each Disbursement this Period 82.00
City Myrtle Beach	State SC	
Zip Code 29577-3040	Purpose of Disbursement Office Supplies	Transaction ID : 20822.E250
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)	OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 2301 N. Kings Hwy.		Amount of Each Disbursement this Period 171.12
City Myrtle Beach	State SC	
Zip Code 29577-3040	Purpose of Disbursement Office Supplies	Transaction ID : 20822.E249
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)	OFFICE SUPPLIES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	281.45
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 64 OF 76			
	<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. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 2301 N. Kings Hwy.		Amount of Each Disbursement this Period 108.95
City Myrtle Beach	State SC	
Zip Code 29577-3040	Purpose of Disbursement Office Supplies	Transaction ID : 20822.E248
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)	OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2012
Mailing Address 2301 N. Kings Hwy.		Amount of Each Disbursement this Period 103.58
City Myrtle Beach	State SC	
Zip Code 29577-3040	Purpose of Disbursement Office Supplies	Transaction ID : 20822.E247
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)	OFFICE SUPPLIES
State: District:		

Full Name (Last, First, Middle Initial) c. Tina Petkova		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 561 Bridgeport Dr.		Amount of Each Disbursement this Period 300.00
City Myrtle Beach	State SC	
Zip Code 29577-6748	Purpose of Disbursement Salary	Transaction ID : 20822.E36
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)	SALARY
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	512.53
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 76			
	<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. Piryx		Date of Disbursement MM / DD / YYYY 06 / 30 / 2012
Mailing Address 144 2nd St., 1st Fl.		Amount of Each Disbursement this Period 425.71
City San Francisco	State CA	
Zip Code 94105-	Purpose of Disbursement Online Processing	Transaction ID : 20822.E306
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)	ONLINE PROCESSING
State: District:		

Full Name (Last, First, Middle Initial) B. Jacob Rice		Date of Disbursement MM / DD / YYYY 06 / 20 / 2012
Mailing Address 5100 N. Ocean Blvd.		Amount of Each Disbursement this Period 865.89
City Myrtle Beach	State SC	
Zip Code 29577-2541	Purpose of Disbursement Salary	Transaction ID : 20822.E38
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)	SALARY
State: District:		

Full Name (Last, First, Middle Initial) c. Jacob Rice		Date of Disbursement MM / DD / YYYY 06 / 29 / 2012
Mailing Address 5100 N. Ocean Blvd.		Amount of Each Disbursement this Period 805.02
City Myrtle Beach	State SC	
Zip Code 29577-2541	Purpose of Disbursement Salary	Transaction ID : 20822.E37
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)	SALARY
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2096.62
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 66 OF 76			
	<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. Lee Ann Rice		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2012
Mailing Address 3771 Rice Hope Ct.		Amount of Each Disbursement this Period 1184.62
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	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Lee Ann Rice		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 3771 Rice Hope Ct.		Amount of Each Disbursement this Period 819.75
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	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Coggin Security		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address		Amount of Each Disbursement this Period 90.00
City	State	
Zip Code 0 -	Purpose of Disbursement Security System	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2094.37
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 76			
	<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 06 / 07 / 2012
Mailing Address 1043 Barr Road		Amount of Each Disbursement this Period 22422.05
City Lexington	State SC Zip Code 29072-	
Purpose of Disbursement Direct Mail	Candidate Name	Transaction ID : 20822.E343
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	DIRECT MAIL

Full Name (Last, First, Middle Initial) B. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 1043 Barr Road		Amount of Each Disbursement this Period 19631.78
City Lexington	State SC Zip Code 29072-	
Purpose of Disbursement Direct Mail	Candidate Name	Transaction ID : 20822.E342
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	DIRECT MAIL

Full Name (Last, First, Middle Initial) C. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2012
Mailing Address 1043 Barr Road		Amount of Each Disbursement this Period 4500.00
City Lexington	State SC Zip Code 29072-	
Purpose of Disbursement Research	Candidate Name	Transaction ID : 20822.E341
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	RESEARCH

SUBTOTAL of Disbursements This Page (optional).....	46553.83
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 76			
	<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 06 / 22 / 2012
Mailing Address 1043 Barr Road			Amount of Each Disbursement this Period 1258.54
City Lexington	State SC	Zip Code 29072-	
Purpose of Disbursement Signage		Category/ Type	Transaction ID : 20822.E338
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)		SIGNAGE
State: District:			

Full Name (Last, First, Middle Initial) B. Starboard Communications			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 1043 Barr Road			Amount of Each Disbursement this Period 968.65
City Lexington	State SC	Zip Code 29072-	
Purpose of Disbursement Tshirt/Bumper Stickers		Category/ Type	Transaction ID : 20822.E340
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)		TSHIRT/BUMPER STICKERS
State: District:			

Full Name (Last, First, Middle Initial) c. Starboard Communications			Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2012
Mailing Address 1043 Barr Road			Amount of Each Disbursement this Period 17140.00
City Lexington	State SC	Zip Code 29072-	
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : 20822.E339
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)		MEDIA BUY
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	19367.19
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 69 OF 76			
	<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 06 / 26 / 2012
Mailing Address 1043 Barr Road		Amount of Each Disbursement this Period 19286.00
City Lexington	State SC Zip Code 29072-	
Purpose of Disbursement Direct Mail	Candidate Name	Transaction ID : 20822.E331
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	DIRECT MAIL

Full Name (Last, First, Middle Initial) B. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 1043 Barr Road		Amount of Each Disbursement this Period 10776.00
City Lexington	State SC Zip Code 29072-	
Purpose of Disbursement Direct Mail	Candidate Name	Transaction ID : 20822.E332
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	DIRECT MAIL

Full Name (Last, First, Middle Initial) C. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 1043 Barr Road		Amount of Each Disbursement this Period 1132.16
City Lexington	State SC Zip Code 29072-	
Purpose of Disbursement Telemarketing	Candidate Name	Transaction ID : 20822.E334
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	TELEMARKETING

SUBTOTAL of Disbursements This Page (optional).....	31194.16
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 70 OF 76			
	<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. Starboard Communications			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 1043 Barr Road			Amount of Each Disbursement this Period 39865.00
City Lexington	State SC	Zip Code 29072-	
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : 20822.E333
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)		MEDIA BUY
State: District:			

Full Name (Last, First, Middle Initial) B. Starboard Communications			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 1043 Barr Road			Amount of Each Disbursement this Period 4000.00
City Lexington	State SC	Zip Code 29072-	
Purpose of Disbursement Direct Mail		Category/ Type	Transaction ID : 20822.E337
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)		DIRECT MAIL
State: District:			

Full Name (Last, First, Middle Initial) c. Starboard Communications			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address 1043 Barr Road			Amount of Each Disbursement this Period 12301.00
City Lexington	State SC	Zip Code 29072-	
Purpose of Disbursement Direct Mail		Category/ Type	Transaction ID : 20822.E335
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)		DIRECT MAIL
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	56166.00
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 76			
	<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 06 / 26 / 2012
Mailing Address 1043 Barr Road		Amount of Each Disbursement this Period 1486.25
City Lexington	State SC Zip Code 29072-	
Purpose of Disbursement Direct Mail	Candidate Name	Transaction ID : 20822.E336
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:	DIRECT MAIL

Full Name (Last, First, Middle Initial) B. The Mace Group, Llc		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address 108 N. Norfolk Way		Amount of Each Disbursement this Period 3983.82
City Goose Creek	State SC Zip Code 29445-7102	
Purpose of Disbursement Web Services	Candidate Name	Transaction ID : 20822.E368
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:	WEB SERVICES

Full Name (Last, First, Middle Initial) c. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address MB Main PO		Amount of Each Disbursement this Period 225.00
City Myrtle Beach	State SC Zip Code 29577-	
Purpose of Disbursement Postage/Shipping	Candidate Name	Transaction ID : 20822.E398
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:	POSTAGE/SHIPPING

SUBTOTAL of Disbursements This Page (optional).....	5695.07
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 72 OF 76	
	<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. United States Post Office		Date of Disbursement MM / DD / YYYY 06 / 21 / 2012
Mailing Address MB Main PO		Amount of Each Disbursement this Period 225.00
City Myrtle Beach	State SC	
Zip Code 29577-	Purpose of Disbursement Postage/Shipping	Transaction ID : 20822.E397
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)	POSTAGE/SHIPPING
State: District:		

Full Name (Last, First, Middle Initial) B. United States Post Office		Date of Disbursement MM / DD / YYYY 06 / 25 / 2012
Mailing Address MB Main PO		Amount of Each Disbursement this Period 90.00
City Myrtle Beach	State SC	
Zip Code 29577-	Purpose of Disbursement Postage/Shipping	Transaction ID : 20822.E396
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)	POSTAGE/SHIPPING
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement MM / DD / YYYY 06 / 10 / 2012
Mailing Address 551 Seaboard St.		Amount of Each Disbursement this Period 110.24
City Myrtle Beach	State SC	
Zip Code 29577-	Purpose of Disbursement Cell Phone	Transaction ID : 20822.E407
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)	CELL PHONE
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	425.24
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 73 OF 76	
	<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. Vonage Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address 23 Main St		Amount of Each Disbursement this Period 129.80
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone	Transaction ID : 20822.E428
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)	TELEPHONE
State: District:		

Full Name (Last, First, Middle Initial) B. Wal Mart		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2012
Mailing Address 10820 Kings Rd.		Amount of Each Disbursement this Period 126.41
City Myrtle Beach	State SC	
Zip Code 29577-	Purpose of Disbursement Tshirt/Bumper Stickers	Transaction ID : 20822.E436
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)	TSHIRT/BUMPER STICKERS
State: District:		

Full Name (Last, First, Middle Initial) c. Werpolitics, Llc		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 733 5th St., Ste. 220		Amount of Each Disbursement this Period 5000.00
City Washington	State DC	
Zip Code 20005-	Purpose of Disbursement Media Production	Transaction ID : 20822.E438
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)	MEDIA PRODUCTION
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5256.21
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 74 OF 76			
	<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. Jennifer Wilson		Date of Disbursement MM / DD / YYYY 06 / 20 / 2012
Mailing Address 137 N. Gate Rd.		Amount of Each Disbursement this Period 1135.84
City Myrtle Beach	State SC	
Zip Code 29572-5618	Purpose of Disbursement Salary	Transaction ID : 20822.E60
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)	SALARY
State: District:		

Full Name (Last, First, Middle Initial) B. Jennifer Wilson		Date of Disbursement MM / DD / YYYY 06 / 29 / 2012
Mailing Address 137 N. Gate Rd.		Amount of Each Disbursement this Period 1584.41
City Myrtle Beach	State SC	
Zip Code 29572-5618	Purpose of Disbursement Salary	Transaction ID : 20822.E59
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)	SALARY
State: District:		

Full Name (Last, First, Middle Initial) c. Travis Worthy		Date of Disbursement MM / DD / YYYY 06 / 20 / 2012
Mailing Address PO Box 14231		Amount of Each Disbursement this Period 1053.11
City Surfside Beach	State SC	
Zip Code 29587-4231	Purpose of Disbursement Salary	Transaction ID : 20822.E74
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)	SALARY
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3773.36
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 75 OF 76			
	<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. Travis Worthy		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address PO Box 14231		Amount of Each Disbursement this Period 454.45
City Surfside Beach	State SC	
Zip Code 29587-4231	Purpose of Disbursement Salary	Transaction ID : 20822.E73
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)	SALARY
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
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 M M / D D / Y Y Y Y
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).....	454.45
TOTAL This Period (last page this line number only).....	210380.27

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **TOM RICE FOR CONGRESS** Transaction ID : **LS20822.C2147**

LOAN SOURCE Full Name (Last, First, Middle Initial) Tom Rice	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
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
100000.00	0.00	100000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 / 31 / 2012	08 / 21 / 2012	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).....	▶	100000.00
TOTALS This Period (last page in this line only).....	▶	100000.00

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