

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

12FE4M5

Gloria Bromell Tinubu for Congress

ADDRESS (number and street) ▼

PO Box 51348

Check if different than previously reported. (ACC)

Myrtle Beach

SC

29579

2. **FEC IDENTIFICATION NUMBER** ▼

C C00508242

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

SC

07

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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

Type or Print Name of Treasurer Mr Joseph Emerson Washington

Signature of Treasurer Mr Joseph Emerson Washington

[Electronically Filed]

Date

/  /

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

Office Use Only

**FEC FORM 3**  
(Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Gloria Bromell Tinubu for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	1975.00	3057.83
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1975.00	3057.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	9829.24	33270.72
(b) Total Offsets to Operating Expenditures (from Line 14).....	1524.15	1524.15
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	8305.09	31746.57
8. Cash on Hand at Close of Reporting Period (from Line 27).....	29.59	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	344152.38	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Gloria Bromell Tinubu for Congress**

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

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).....	1250.00	1500.00
(ii) Unitemized.....	725.00	1557.83
(iii) TOTAL of contributions from individuals ▶	1975.00	3057.83
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1975.00	3057.83
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	8500.00	23500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	8500.00	23500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	1524.15	1524.15
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	11999.15	28081.98

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	9829.24	33270.72
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	2500.00	2500.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	2500.00	2500.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	12329.24	35770.72

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	359.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11999.15
25. SUBTOTAL (add Line 23 and Line 24).....	12358.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	12329.24
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	29.59

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

Form/Schedule: F3A  
Transaction ID :

The debt to Robbin Shipp was overstated by \$1,500. The amendment corrects the error. To update debt changes on previous report.

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 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 558 Centennial Ln NW

City Atlanta State GA Zip Code 30313

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 29 / 2012

**Transaction ID : C9107949**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 8005 Springbrook Rd

City Columbia State SC Zip Code 29223

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2012

**Transaction ID : C9108265**

Amount of Each Receipt this Period  
250.00

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

Mailing Address Post Office Box 311  
108 Main Street , Kingstree SC 295

City Greeleyville State SC Zip Code 29056

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : C9121471**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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 7 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

Mailing Address 9631 BUSINESS CENTER DRIVE STE G

City RANCHO COCAMONGA State GA Zip Code 91730

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 27 / 2012

**Transaction ID : C9124547**

Amount of Each Receipt this Period  
 -2500.00

**[MEMO ITEM]**  
\*

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

Mailing Address 9631 BUSINESS CENTER DRIVE STE G

City RANCHO COCAMONGA State GA Zip Code 91730

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date 0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 27 / 2012

**Transaction ID : C9124548**

Amount of Each Receipt this Period  
 2500.00

**[MEMO ITEM]**  
\*

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 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).....

0.00

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 58
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 26 / 2012	
Mailing Address 1403 7th Ave		<b>Transaction ID : C9121469</b>	
City Conway State SC Zip Code 29526	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C H2SC07108	Name of Employer Coastal Carolina University		
Occupation Economist		Election Cycle-to-Date 23500.00	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 26 / 2012	
Mailing Address 1403 7th Ave		<b>Transaction ID : C9121470</b>	
City Conway State SC Zip Code 29526	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C H2SC07108	Name of Employer Coastal Carolina University		
Occupation Economist		Election Cycle-to-Date 23500.00	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2012	
Mailing Address 1403 7th Ave		<b>Transaction ID : C9128436</b>	
City Conway State SC Zip Code 29526	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C H2SC07108	Name of Employer Coastal Carolina University		
Occupation Economist		Election Cycle-to-Date 23500.00	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A. Grand Villas World TourBeach Vacations**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 590 River Oaks Dr.  
 City Myrtle Beach State SC Zip Code 29579  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 315.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 04 / 2012  
**Transaction ID : C9107946**  
 Amount of Each Receipt this Period  
 315.00

**B. T & S Properties Realty LLP**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1401 West Bobby Gerald Parkway  
 mailing address: Post Office Box 9  
 City Marion State SC Zip Code 29571  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2012  
**Transaction ID : C9108268**  
 Amount of Each Receipt this Period  
 800.00

**C. Time Warner Cable Media**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2024 Corporate Centre Drive Suite  
 City Myrtle Beach State SC Zip Code 29577  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 409.15

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2012  
**Transaction ID : C9121477**  
 Amount of Each Receipt this Period  
 409.15

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

1524.15  
 1524.15

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Amy Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 101 Mill St		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : D430889</b>
City Chesterfield	State SC	
Zip Code 29709	Purpose of Disbursement consulting srvs-field coordination	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 414.87 <b>Transaction ID : D430726</b>
City Wallace	State SC	
Zip Code 29596-5313	Purpose of Disbursement supplies, gas and refreshments	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 414.86 <b>Transaction ID : D430881</b>
City Wallace	State SC	
Zip Code 29596-5313	Purpose of Disbursement supplies, gas and refreshments	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	954.73
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 625.00 <b>Transaction ID : D430882</b>
City Wallace	State SC Zip Code 29596-5313	
Purpose of Disbursement consulting srvs- field direction		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 0.01 <b>Transaction ID : D431679</b>
City Wallace	State SC Zip Code 29596-5313	
Purpose of Disbursement gas and refreshments		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mr. Craig Conwell</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 1515 5th Ave		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : D430890</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement consulting services- field coordination		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	750.01
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Mr. Tyhesh Cross</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 45 Briarwood Pl		Amount of Each Disbursement this Period 634.15 <b>Transaction ID : D430900</b>
City Sanford	State NC	
Zip Code 27332-2509	Purpose of Disbursement travel expense-mileage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Mr. Tyhesh Cross</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 45 Briarwood Pl		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D430901</b>
City Sanford	State NC	
Zip Code 27332-2509	Purpose of Disbursement consulting srvs-photography/transportation	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Mrs. Regina Dyer</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address P.O. Box 438 Hwy 41A South		Amount of Each Disbursement this Period 875.00 <b>Transaction ID : D430891</b>
City Centenary	State SC	
Zip Code 29519	Purpose of Disbursement consulting srvs-field coordination	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1809.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 58
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. Mrs. Regina Dyer</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address P.O. Box 438 Hwy 41A South		Amount of Each Disbursement this Period 90.05
City Centenary	State SC	
Zip Code 29519		Transaction ID : D430892
Purpose of Disbursement travel expense- gas	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jacqueline Ellerbe-Shannon</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 106 Agerton St		Amount of Each Disbursement this Period 125.00
City Cheraw	State SC	
Zip Code 29520-3308		Transaction ID : D430888
Purpose of Disbursement consulting srvs-field coordination	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2012
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 450.00
City Atlanta	State GA	
Zip Code 30342		Transaction ID : D431272
Purpose of Disbursement charge back fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	665.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 279.92 <b>Transaction ID : D426162</b>
City Atlanta	State GA Zip Code 30342	
Purpose of Disbursement credit card processing fee	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Asa Fludd</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 1302 Valparairo Dr. Apt L2		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : D430886</b>
City Florence	State SC Zip Code 29501	
Purpose of Disbursement consulting srvs-field coordination	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ms Tyra Ford</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address 5020 Exodus Drive		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D430727</b>
City Georgetown	State SC Zip Code 29440	
Purpose of Disbursement consulting services-field coordination	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	654.92
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Donald Gilliard</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 2229 Front St.		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D430893</b>
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement consulting srvs-field coordination	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Donald Gilliard</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 2229 Front St.		Amount of Each Disbursement this Period 120.00 <b>Transaction ID : D430894</b>
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement travel expenses-gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Mr. Wayne Green</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 1924 Rocking Chair Ct		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D430884</b>
City Dillon	State SC	
Zip Code 29536	Purpose of Disbursement consulting srvs-field coordination	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	620.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : D426715</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services-finances	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : D427019</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services-financial srvs	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : D430899</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting srvs-financial services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

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

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

Full Name (Last, First, Middle Initial) <b>A. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2012
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : D430903</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting srvs-financial srvs	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : D430906</b>
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting srvs-financial srvs	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. HTC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012
Mailing Address Post Office Box 1819		Amount of Each Disbursement this Period 273.13 <b>Transaction ID : D431273</b>
City Conway	State SC	
Zip Code 29528-1819	Purpose of Disbursement telephone services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1073.13
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Ms. LaNina Linton</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 2140 Tillers Plow Row		Amount of Each Disbursement this Period 125.00 <b>Transaction ID : D430887</b>
City Effingham State SC Zip Code 29541	Purpose of Disbursement consulting srvs-field coordination	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NGP Van Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2012
Mailing Address 1101 15th Street NW Suite 500		Amount of Each Disbursement this Period 730.00 <b>Transaction ID : D431269</b>
City Washington State DC Zip Code 20005	Purpose of Disbursement campaign tracking,disbursement,contribution system	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Ms Mckean Nowlin</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 771 Murray Ave		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : D430883</b>
City Myrtle Beach State SC Zip Code 29577-1734	Purpose of Disbursement consulting fee-social media/communications	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1605.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Mr Reginald Poplus</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 2475 Enon Rd			Amount of Each Disbursement this Period -1000.00 <b>Transaction ID : D431216</b>
City Atlanta	State GA	Zip Code 30331	
Purpose of Disbursement Check 1577 voided - services not provided		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Robbin Shipp</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 154 Chester Dr.			Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D430880</b>
City Atlanta	State GA	Zip Code 30316	
Purpose of Disbursement consulting fee-general counsel		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Mr. Allen Thomas</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 1307 Academy Rd.			Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D430885</b>
City Bennettsville	State SC	Zip Code 29512	
Purpose of Disbursement consulting srvs-field coordination		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	-250.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 31 / 2012</b>
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period <b>400.06</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement cellular telephone services	Candidate Name	<b>Transaction ID : D431274</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B.</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	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C.</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	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>400.06</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>9382.05</b>

**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 21 OF 58	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : D430902</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement partial loan repayment	Category/Type 009	
Candidate Name <b>Gloria Bromell Tinubu</b>	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 07	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	2500.00

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L776

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

5000.00

Cumulative Payment To Date

2000.00

Balance Outstanding at Close of This Period

3000.00

**TERMS**

Date Incurred

M 12 / D 30 / Y 2011 Y

Date Due

M / D / Y none Y

Interest Rate

none % (apr)

Secured:

Yes  No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

3000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L777

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 02

D 01

Y 2012 Y

M M

D D

Y none Y

none

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

10000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L779

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M 02 / D 14 / Y 2012

Date Due

M / D / Y none

Interest Rate

none % (apr)

Secured:

Yes  No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

10000.00

**TOTALS** This Period (last page in this line only)..... ▶

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



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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Transaction ID : L792**  
**Gloria Bromell Tinubu for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
13000.00	0.00	13000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 05 / Y 2012 Y	M M / D D / Y none Y Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	13000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

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

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L800

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

Mailing Address  
1403 7th Ave

City State ZIP Code  
Conway SC 29526

Original Amount of Loan 51000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 51000.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred: M 03 / D 30 / Y 2012  
 Date Due: M / D / Y none  
 Interest Rate: none % (apr)  
 Secured:  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 51000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L802

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M 03 / D 14 / Y 2012 Y Y

Date Due

M M / D D / Y none Y Y Y Y

Interest Rate

none % (apr)

Secured:

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

10000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L803

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

03

14

2012

Date Due

non

Interest Rate

none

% (apr)

Secured:

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

10000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L818**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 14 / Y 2012	M / D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	25000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L823

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1403 7th Ave

City State ZIP Code  
Conway SC 29526

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 0.00 5000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 05 / D 21 / Y 2012 M M / D D / Y none none % (apr)  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... 5000.00

**TOTALS** This Period (last page in this line only).....

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L825

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

M 05 / D 30 / Y 2012

Date Due

M / D / Y none

Interest Rate

none % (apr)

Secured:

Yes  No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

25000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L826

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary  
 General  
 Other (specify) ▼

Mailing Address  
1403 7th Ave

City State ZIP Code  
Conway SC 29526

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
30000.00 0.00 30000.00

### TERMS

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (apr)  Yes  No

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

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

SUBTOTALS This Period This Page (optional)..... 30000.00

TOTALS This Period (last page in this line only).....

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



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

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Transaction ID : L828**  
Gloria Bromell Tinubu for Congress

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

Mailing Address  
1403 7th Ave

City State ZIP Code  
Conway SC 29526

Original Amount of Loan 30000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 30000.00
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**TERMS**

Date Incurred M 06 / D 07 / Y 2012	Date Due M M / D D / Y no due date	Interest Rate none % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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)..... ▶ 30000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

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

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L830

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

26000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

26000.00

### TERMS

Date Incurred

06 / 11 / 2012

Date Due

no due date

Interest Rate

0.00 % (apr)

Secured:

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

26000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L834

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Runoff

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

7000.00

Cumulative Payment To Date

5000.00

Balance Outstanding at Close of This Period

2000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 26 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

Yes  No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

2000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L839

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Runoff

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

3500.00

Cumulative Payment To Date

2500.00

Balance Outstanding at Close of This Period

1000.00

### TERMS

Date Incurred

M 07 / D 10 / Y 2012 Y Y

Date Due

M M / D D / Y no due date Y Y Y Y

Interest Rate

none % (apr)

Secured:

Yes  No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

1000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

NAME OF COMMITTEE (In Full) Transaction ID : L840  
**Gloria Bromell Tinubu for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff _____
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2500.00	1000.00	1500.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 30 / Y 2012	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	1500.00
<b>TOTALS</b> This Period (last page in this line only).....	

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

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

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L846

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

Mailing Address  
 1403 7th Ave  
 City State ZIP Code  
 Conway SC 29526

Original Amount of Loan 10000.00	Cumulative Payment To Date 1300.00	Balance Outstanding at Close of This Period 8700.00
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**TERMS**  
 Date Incurred: M 08 / D 06 / Y 2012  
 Date Due: M / D / Y none  
 Interest Rate: none % (apr)  
 Secured:  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 8700.00  
**TOTALS** This Period (last page in this line only)..... ▶ [ ]  
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L854

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000.00

0.00

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

08

17

2012

none

none

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

5000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L855**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Gloria Bromell Tinubu PERS FUNDS  
 Mailing Address 1403 7th Ave  
 Election: 2012  
 Primary  
 General  
 Other (specify) ▼

City State ZIP Code  
 Conway SC 29526

Original Amount of Loan 5000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5000.00
------------------------------------	------------------------------------	--

**TERMS**  
 Date Incurred: M 08 / D 20 / Y 2012  
 Date Due: M / D / Y none  
 Interest Rate: none % (apr)  
 Secured:  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 5000.00  
**TOTALS** This Period (last page in this line only)..... ▶ [ ]  
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.



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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L856

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

08

20

2012

none

none

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

10000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L862

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

3000.00

0.00

3000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

09

19

2012

no due date

0.00

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

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)..... ▶

3000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L868

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000.00

0.00

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M M / D D / Y Y Y Y  
10 / 25 / 2012

M M / D D / Y Y Y Y  
none

0.00 % (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

5000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L870**

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

Mailing Address  
1403 7th Ave

City State ZIP Code  
Conway SC 29526

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred: M 11 / D 01 / Y 2012  
Date Due: M / D / Y none  
Interest Rate: none % (apr)  
Secured:  Yes  No

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

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

**SUBTOTALS** This Period This Page (optional)..... ▶ 10000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L872

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

M 11 / D 13 / Y 2012 Y

Date Due

M / D / Y none Y

Interest Rate

none % (apr)

Secured:

Yes  No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

15000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L876

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

2500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2500.00

**TERMS**

Date Incurred

M 12 / D 26 / Y 2012

Date Due

M M / D D / Y no due date

Interest Rate

none % (apr)

Secured:

Yes  No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

2500.00

**TOTALS** This Period (last page in this line only)..... ▶

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

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L877

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

### TERMS

Date Incurred

M 12 /

D 26 /

Y 2012 Y

Date Due

M /

D /

no due date

Interest Rate

none

% (apr)

Secured:

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

5000.00

**TOTALS** This Period (last page in this line only)..... ▶

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

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

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Transaction ID : L879**  
**Gloria Bromell Tinubu for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 31 / Y 2012	M / D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	1000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	322700.00

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



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Amy Brown**

Nature of Debt (Purpose):  
consulting services-field coordination

Mailing Address 101 Mill St

City State Zip Code  
Chesterfield SC 29709

Outstanding Balance Beginning This Period  
125.00

**Transaction ID : D426855**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 125.00 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mr. David Brown**

Nature of Debt (Purpose):  
consulting services- field direction

Mailing Address 1941 Highway 177

City State Zip Code  
Wallace SC 29596-5313

Outstanding Balance Beginning This Period  
625.00

**Transaction ID : D426718**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 625.00 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mr. David Brown**

Nature of Debt (Purpose):  
campaign expenses

Mailing Address 1941 Highway 177

City State Zip Code  
Wallace SC 29596-5313

Outstanding Balance Beginning This Period  
829.73

**Transaction ID : D426860**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 829.73 0.00

- 1) **SUBTOTALS** This Period This Page (optional) ..... ▶
- 2) **TOTALS** This Period (last page this line number only) ..... ▶
- 3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶
- 4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Stephen Chand**

Mailing Address 418 Battey Drive

City State Zip Code  
Myrtle Beach SC 29588

Nature of Debt (Purpose):  
computer repair

Outstanding Balance Beginning This Period **Transaction ID : D426859**  
30.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 30.00 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mr. Craig Conwell**

Mailing Address 1515 5th Ave

City State Zip Code  
Conway SC 29526

Nature of Debt (Purpose):  
consulting services-field coordination

Outstanding Balance Beginning This Period **Transaction ID : D426856**  
125.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 125.00 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mr. Tyhesh Cross**

Mailing Address 45 Briarwood Pl

City State Zip Code  
Sanford NC 27332-2509

Nature of Debt (Purpose):  
consulting services-photography/transportation

Outstanding Balance Beginning This Period **Transaction ID : D426725**  
300.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 300.00 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 51 OF 58
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Tyhesh Cross</b>		Nature of Debt (Purpose): travel expense-mileage
Mailing Address 45 Briarwood Pl		
City State	Zip Code	
Sanford NC	27332-2509	

Outstanding Balance Beginning This Period	<b>Transaction ID : D426861</b>	
<input type="text" value="634.15"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="634.15"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ms. Eartha Davis</b>		Nature of Debt (Purpose): postage
Mailing Address 121 Marshall St.		
City State	Zip Code	
Mullins SC	29574	

Outstanding Balance Beginning This Period	<b>Transaction ID : D426866</b>	
<input type="text" value="47.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="47.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mrs. Regina Dyer</b>		Nature of Debt (Purpose): consulting services-field coordination
Mailing Address P.O. Box 438 Hwy 41A South		
City State	Zip Code	
Centenary SC	29519	

Outstanding Balance Beginning This Period	<b>Transaction ID : D426719</b>	
<input type="text" value="875.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="875.00"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mrs. Regina Dyer**

Mailing Address P.O. Box 438 Hwy 41A South

City State Zip Code  
Centenary SC 29519

Nature of Debt (Purpose):  
travel expense-gas

Outstanding Balance Beginning This Period **Transaction ID : D426863**  
90.05

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 90.05 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mrs. Irish A Eickhoff**

Mailing Address 632 Tattlesbury Drive

City State Zip Code  
Conway SC 29526

Nature of Debt (Purpose):  
office supplies

Outstanding Balance Beginning This Period **Transaction ID : D426865**  
28.76

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 28.76 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Jacqueline Ellerbe-Shannon**

Mailing Address 106 Agerton St

City State Zip Code  
Cheraw SC 29520-3308

Nature of Debt (Purpose):  
consulting services-field coordination

Outstanding Balance Beginning This Period **Transaction ID : D426854**  
125.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
0.00 125.00 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	0.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Asa Fludd**

Mailing Address 1302 Valparairo Dr. Apt L2

City State Zip Code  
 Florence SC 29501

Nature of Debt (Purpose):  
 consulting services-field coordination

Outstanding Balance Beginning This Period		<b>Transaction ID : D426852</b>	
<input type="text" value="125.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="125.00"/>	<input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Ms Tyra Ford**

Mailing Address 5020 Exodus Drive

City State Zip Code  
 Georgetown SC 29440

Nature of Debt (Purpose):  
 Consulting services-field coordination

Outstanding Balance Beginning This Period		<b>Transaction ID : D426733</b>	
<input type="text" value="250.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="250.00"/>	<input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Donald Gilliard**

Mailing Address 2229 Front St.

City State Zip Code  
 Georgetown SC 29440

Nature of Debt (Purpose):  
 consulting services-field organization

Outstanding Balance Beginning This Period		<b>Transaction ID : D426857</b>	
<input type="text" value="250.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="250.00"/>	<input type="text" value="0.00"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Donald Gilliard</b>		Nature of Debt (Purpose): travel expense- gas
Mailing Address 2229 Front St.		
City State Georgetown SC	Zip Code 29440	

Outstanding Balance Beginning This Period 120.00		<b>Transaction ID : D426864</b>	
Amount Incurred This Period 0.00	Payment This Period 120.00	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>		Nature of Debt (Purpose): travel expense-gas/food
Mailing Address 1403 7th Ave		
City State Conway SC	Zip Code 29526	

Outstanding Balance Beginning This Period 85.80		<b>Transaction ID : D426862</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 85.80	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Wayne Green</b>		Nature of Debt (Purpose): consulting services-field coordination
Mailing Address 1924 Rocking Chair Ct		
City State Dillon SC	Zip Code 29536	

Outstanding Balance Beginning This Period 250.00		<b>Transaction ID : D426737</b>	
Amount Incurred This Period 0.00	Payment This Period 250.00	Outstanding Balance at Close of This Period 0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	85.80
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶		

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Dwane Heyward</b>		Nature of Debt (Purpose): consulting services-financial services
Mailing Address 92 Abraham Pl		
City State	Zip Code	
Georgetown	SC 29440-6341	

Outstanding Balance Beginning This Period	<b>Transaction ID : D426716</b>	
1500.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	300.00	1200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lake Research Partners Inc</b>		Nature of Debt (Purpose): polling and survey services
Mailing Address 1726 M Street NW Suite 1100		
City State	Zip Code	
Washington	DC 20036	

Outstanding Balance Beginning This Period	<b>Transaction ID : D426709</b>	
7500.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	7500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ms. LaNina Linton</b>		Nature of Debt (Purpose): consulting services-field coordination
Mailing Address 2140 Tillers Plow Row		
City	State Zip Code	
Effingham	SC 29541	

Outstanding Balance Beginning This Period	<b>Transaction ID : D426853</b>	
125.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	125.00	0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	8700.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 56 OF 58
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mad Dog Mail Inc</b>		Nature of Debt (Purpose): campaign mailing/advertisement
Mailing Address 5542 First Coast Highway Suite 300		
City State	Zip Code	
Fernandina Beach	FL 32034	

Outstanding Balance Beginning This Period	<b>Transaction ID : D426708</b>	
<input type="text" value="1500.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1500.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Antonious Nesmith</b>		Nature of Debt (Purpose): postage
Mailing Address 420 West Cheves Apt C		
City State	Zip Code	
Florence	SC 29501	

Outstanding Balance Beginning This Period	<b>Transaction ID : D426858</b>	
<input type="text" value="70.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="70.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>NGP Van Inc</b>		Nature of Debt (Purpose): campaign tracking,disbursement,contribution system
Mailing Address 1101 15th Street NW Suite 500		
City State	Zip Code	
Washington	DC 20005	

Outstanding Balance Beginning This Period	<b>Transaction ID : D426713</b>	
<input type="text" value="730.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="730.00"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="1500.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Ms Mckean Nowlin**

Mailing Address 771 Murray Ave

City State Zip Code  
Myrtle Beach SC 29577-1734

Nature of Debt (Purpose):  
consulting services-social media/communications

Outstanding Balance Beginning This Period **750.00** Transaction ID : **D426722**

Amount Incurred This Period **0.00** Payment This Period **750.00** Outstanding Balance at Close of This Period **0.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**William Sengstacken**

Mailing Address 906 Teton Ave SE

City State Zip Code  
Atlanta GA 30312

Nature of Debt (Purpose):  
consulting services-social/pr

Outstanding Balance Beginning This Period **875.00** Transaction ID : **D426711**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **875.00**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Robbin Shipp**

Mailing Address 154 Chester Dr.

City State Zip Code  
Atlanta GA 30316

Nature of Debt (Purpose):  
consulting services-general counsel

Outstanding Balance Beginning This Period **1500.00** Transaction ID : **D426714**

Amount Incurred This Period **0.00** Payment This Period **500.00** Outstanding Balance at Close of This Period **1000.00**

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<b>1875.00</b>
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 58 OF 58
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James E. Smith Jr. P.A</b>	Nature of Debt (Purpose): legal services
Mailing Address 1422 Laurel Street	
City State Zip Code Columbia SC 29201	

Outstanding Balance Beginning This Period 1200.00	<b>Transaction ID : D426712</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Oblander Group LLC</b>	Nature of Debt (Purpose): consulting services-fundraising
Mailing Address 1100 Spring St Suite 360	
City State Zip Code Atlanta GA 30309	

Outstanding Balance Beginning This Period 8091.58	<b>Transaction ID : D426710</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8091.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Allen Thomas</b>	Nature of Debt (Purpose): consulting services-field coordination
Mailing Address 1307 Academy Rd.	
City State Zip Code Bennettsville SC 29512	

Outstanding Balance Beginning This Period 250.00	<b>Transaction ID : D426851</b>	
Amount Incurred This Period 0.00	Payment This Period 250.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	9291.58
2) <b>TOTALS</b> This Period (last page this line number only) .....	21452.38
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	322700.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	344152.38