

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

X

NEW (N)

OR

AMENDED (A)

SC

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on

MM / DD / YYYY

in the State of

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

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

Election on

MM / DD / YYYY
11 / 06 / 2012

in the State of

SC

5. Covering Period

MM / DD / YYYY
10 / 18 / 2012

through

MM / DD / YYYY
11 / 26 / 2012

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

Type or Print Name of Treasurer Mr Joseph Emerson Washington

Signature of Treasurer Mr Joseph Emerson Washington

[Electronically Filed]

Date

MM / DD / YYYY
12 / 06 / 2012

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

Office Use Only

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))....	61094.83	291631.45
(b) Total Contribution Refunds (from Line 20(d))	0.00	1250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	61094.83	290381.45
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	96123.34	590172.43
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	96123.34	590172.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	359.68	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	350757.07	

For further information contact:

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

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 Total as of <input type="text" value="MM 11"/> / <input type="text" value="DD 06"/> / <input type="text" value="YYYY 2012"/> (date of general election)	COLUMN C Total for <input type="text" value="MM 11"/> / <input type="text" value="DD 07"/> / <input type="text" value="YYYY 2012"/> (date after general election) through <input type="text" value="MM 11"/> / <input type="text" value="DD 26"/> / <input type="text" value="YYYY 2012"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="25025.00"/>	<input type="text" value="134438.01"/>	<input type="text" value="250.00"/>
(ii) Unitemized		
<input type="text" value="12569.83"/>	<input type="text" value="63163.44"/>	<input type="text" value="832.83"/>
(iii) Total of contributions from individuals		
<input type="text" value="37594.83"/>	<input type="text" value="197601.45"/>	<input type="text" value="1082.83"/>
(b) Political Party Committees		
<input type="text" value="4000.00"/>	<input type="text" value="4000.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="19500.00"/>	<input type="text" value="82500.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 116

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	7530.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
61094.83	291631.45	1082.83
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
30000.00	317000.00	15000.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
30000.00	317000.00	15000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	359.31	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
91094.83	608990.76	16082.83

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 116

Write or Type Committee Name

Gloria Bromell Tinubu for Congress

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

II. DISBURSEMENTS

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="96123.34"/>	<input type="text" value="590172.43"/>	<input type="text" value="23441.48"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="2500.00"/>	<input type="text" value="8800.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="2500.00"/>	<input type="text" value="8800.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="0.00"/>	<input type="text" value="1250.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 116

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	1250.00	0.00
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21. OTHER DISBURSEMENTS

0.00	1050.00	0.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

98623.34	601272.43	23441.48
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

61094.83	290381.45	1082.83
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

96123.34	590172.43	23441.48
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7888.19
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	91094.83
25. SUBTOTAL (add Line 23 and Line 24).....	98983.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	98623.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	359.68

**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 116
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

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

Mailing Address Post Office Box 536

City Nichols State SC Zip Code 29581

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

Name of Employer South Carolina Government Occupation Representative

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : C8941911

Amount of Each Receipt this Period
300.00

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

Mailing Address 100 Island View Cir

City Elgin State SC Zip Code 29045-9180

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

Name of Employer Parker Poe Adams & Bernstein Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2012

Transaction ID : C8936491

Amount of Each Receipt this Period
1000.00

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

Mailing Address Post Office Box 186

City Timmonsville State SC Zip Code 29161-1205

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

Name of Employer Foe Toe Mprints Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : C8938459

Amount of Each Receipt this Period
100.00

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

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

1400.00

**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 116
	<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

Full Name (Last, First, Middle Initial) Steele Bremner		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 18 / 2012
Mailing Address 204 Emerson Loop		Transaction ID : C8920935
City Pawleys Island	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) David Brown		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 06 / 2012
Mailing Address 1941 Highway 177		Transaction ID : C9108192
City Wallace	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 155.00
Name of Employer N/A	Occupation N/A	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 391.36	* In-Kind: election day expenses

Full Name (Last, First, Middle Initial) Linda Byrd		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 109 Penal St		Transaction ID : C8933877
City Darlington	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer self employed	Occupation cosmotolgist	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	1855.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 116
	<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)
Nancy Cave

Mailing Address 106 Jutland Ln

City State Zip Code
Georgetown SC 29440

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

Name of Employer Occupation
SC COASTAL CONSERVATION LEAGUES Office Director

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 01 / 2012

Transaction ID : C8944772

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Cesar for our Atlanta

Mailing Address 676 Queen St SW

City State Zip Code
Atlanta GA 30310-2612

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2012

Transaction ID : C8953068

Amount of Each Receipt this Period
650.00

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

Mailing Address 522 Wisteria Dr

City State Zip Code
Florence SC 29501-5756

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

Name of Employer Occupation
Florence School District One teacher

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
11 / 01 / 2012

Transaction ID : C8943722

Amount of Each Receipt this Period
250.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 116
	<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

Full Name (Last, First, Middle Initial) R F Davis		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 2315 Bluff Rd		Transaction ID : C8918270
City Marion	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1200.00
Name of Employer Self Employed	Occupation Pastor	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1200.00	

Full Name (Last, First, Middle Initial) Enviro Agscience, Inc		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2012
Mailing Address Post Office Box 23285		Transaction ID : C9108238
City Columbia	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Emma Fakiya		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 30 / 2012
Mailing Address 7835 Somerset Ct		Transaction ID : C8940592
City Greenbelt	State MD	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Howard University Hospital	Occupation Nursing	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 116
	<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)
Florence County Democratic Party

Mailing Address P.O. Box 13063

City Florence State SC Zip Code 29504

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : C8944819

Amount of Each Receipt this Period
 260.00

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

Mailing Address 701 Smith St.

City Marion State SC Zip Code 29571

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

Name of Employer Occupation
 People Alliance for Change employee

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : C8940604

Amount of Each Receipt this Period
 250.00

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

Mailing Address 527 Mockingbird Ave

City Myrtle Beach State SC Zip Code 29577-5028

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

Name of Employer Occupation
 retired retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2012

Transaction ID : C8931627

Amount of Each Receipt this Period
 250.00

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

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

760.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 116
	<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)
Sheila C Gallagher

Mailing Address 1717 Raven Drive

City Florence	State SC	Zip Code 29505
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FEC ID number of contributing federal political committee. **C**

Name of Employer South Carolina Democratic Party	Occupation Florence County Democratic Chair
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Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		01		2012

Transaction ID : C8944770

Amount of Each Receipt this Period
200.00

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

Mailing Address 653 Council Rd.

City Salters	State SC	Zip Code 29590
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pee Dee Baptist Association	Occupation Executive Board Member
---	--------------------------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		30		2012

Transaction ID : C8938561

Amount of Each Receipt this Period
300.00

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

Mailing Address 1071 Highway 1 S

City Cheraw	State SC	Zip Code 29520
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FEC ID number of contributing federal political committee. **C**

Name of Employer Grooms Funeral Home and Memorial Chape	Occupation Owner
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Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11		08		2012

Transaction ID : C8956237

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 116
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

Full Name (Last, First, Middle Initial) A. Charles Hall		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 2107 E Lake Rd NE		Transaction ID : C8936964
City Atlanta State GA Zip Code 30307-1835	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 275.00
Name of Employer Retired	Occupation landscape architect	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00	

Full Name (Last, First, Middle Initial) B. Committee To Elect Hank Johnson		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 4262 Clausell Ct		Transaction ID : C8936756
City Decatur State GA Zip Code 30035-1914	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer U. S. House of Representatives	Occupation U. S. Representative	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Richard Harpootlian		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address PO Box 1090		Transaction ID : C8903058
City Columbia State SC Zip Code 29202-1090	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4500.00
Name of Employer Self	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	Election Cycle-to-Date 4500.00	

SUBTOTAL of Receipts This Page (optional).....	3025.00
TOTAL This Period (last page this line number only).....	3025.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 116
	<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)
Jaime Harrison

Mailing Address 11 Arsenal Hill Ct

City Columbia State SC Zip Code 29201-2766

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

Name of Employer Podesta Group Occupation Principal

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : C8922046

Amount of Each Receipt this Period
300.00

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

Mailing Address Post Office Box 544

City Marion State SC Zip Code 29701

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

Name of Employer American Waste Systems Occupation Owner

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
 10 / 23 / 2012

Transaction ID : C8941879

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Sara T Hudson

Mailing Address 410 Wood Street

City Georgetown State SC Zip Code 29440

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
365.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : C8931590

Amount of Each Receipt this Period
65.00

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

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

615.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 116
	<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

Full Name (Last, First, Middle Initial) George Jebaily		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 19 / 2012
Mailing Address Post Office Box 1871		Transaction ID : C8906389
City Florence	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Jebaily Law Firm	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Mary Jeffcoat		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 24 / 2012
Mailing Address PO Box 3678		Transaction ID : C8920255
City Myrtle Beach	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Long Bay Professional Services	Occupation Consultant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Joan D Johnakin		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2012
Mailing Address P.O. Box 1201		Transaction ID : C8941972
City Bennettsville	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Marlboro County Child Protective Servi	Occupation Director	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 116
	<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

Full Name (Last, First, Middle Initial) A. Jonas Kennedy		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2012	
Mailing Address 1043 Kennedy Rd		Transaction ID : C8942000	
City Bennettsville	State SC	Zip Code 29512	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Owner/Farmer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) B. Jonas Kennedy		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2012	
Mailing Address 1043 Kennedy Rd		Transaction ID : C8942001	
City Bennettsville	State SC	Zip Code 29512	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed	Occupation Owner/Farmer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. Noel Khalil		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2012	
Mailing Address 1718 Peachtree St NW Ste 684		Transaction ID : C8926276	
City Atlanta	State GA	Zip Code 30309-2496	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer Columbia Residential	Occupation Real Estate		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 116
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

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

A. Full Name (Last, First, Middle Initial)
Louis B Lynn

Mailing Address 85 Olde Springs Rd

City Columbia State SC Zip Code 29223

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

Name of Employer Enviro-Ag Services Occupation Horticulturist/Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : C8910469

Amount of Each Receipt this Period
500.00

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

Mailing Address 616 8th Ave S

City Surfside Beach State SC Zip Code 29575-3324

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

Name of Employer Self Occupation Writer

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
 10 / 18 / 2012

Transaction ID : C8899050

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Dr. Preston McKeever-Floyd

Mailing Address PO Box 391

City Conway State SC Zip Code 29528-0391

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

Name of Employer Coastal Carolina University Occupation Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2012

Transaction ID : C8952455

Amount of Each Receipt this Period
100.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 116
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

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

A. Full Name (Last, First, Middle Initial)
Joan Meacham

Mailing Address 496 Golf Dr

City State Zip Code
Georgetown SC 29440-8448

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

Name of Employer Occupation
prudential myrtle beach real estate realtor/retired state employee

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
10 / 23 / 2012

Transaction ID : C8918324

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
John Wesley Miller Jr.

Mailing Address 1501 N Carnaby Cir

City State Zip Code
Florence SC 29506-6800

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

Name of Employer Occupation
Retired Grants Administrator

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2012

Transaction ID : C8918510

Amount of Each Receipt this Period
500.00

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

Mailing Address 2218 Wellwood Rd

City State Zip Code
Marion SC 29571

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

Name of Employer Occupation
HealthSouth of Florence Hospital System Registered Nurse

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
10 / 23 / 2012

Transaction ID : C8942766

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 116
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

A. Full Name (Last, First, Middle Initial)
Joseph Moyer

Mailing Address 1556 Brookgreen Dr

City Myrtle Beach State SC Zip Code 29577-5870

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

Name of Employer Allergy, Asthma & Sinus Center Occupation Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : C8941192

Amount of Each Receipt this Period
1000.00

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

Mailing Address Post Office Box 5

City Hopkins State SC Zip Code 29061

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

Name of Employer South Carolina State Legislature Occupation Representative

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : C8917065

Amount of Each Receipt this Period
1000.00

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

Mailing Address 420 W Cheves ST

City Florence State SC Zip Code 29501

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

Name of Employer Nesmith Insurance Agency, LLC Occupation Agent

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2012

Transaction ID : C9101069

Amount of Each Receipt this Period
500.00

* In-Kind: florence office rental

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 116
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

A. Full Name (Last, First, Middle Initial)
Harry Ott

Mailing Address 461 Bull Swamp Rd

City State Zip Code
Saint Matthews SC 29135

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

Name of Employer Occupation
SC State Legislature Minority Leader

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : C8928022

Amount of Each Receipt this Period
1000.00

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

Mailing Address 873 Long Point Rd

City State Zip Code
Mount Pleasant SC 29464-8203

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

Name of Employer Occupation
Retired Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : C8941191

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Aprile Pittman M.D.

Mailing Address 805 Forest Overlook Dr SW

City State Zip Code
Atlanta GA 30331-7389

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

Name of Employer Occupation
Concentra Medical Centers Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2012

Transaction ID : C8946682

Amount of Each Receipt this Period
1500.00

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 116
	<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

Full Name (Last, First, Middle Initial) A. Susan Redge		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 20 / 2012
Mailing Address 1102 Osprey Ct		Transaction ID : C8905430
City Murrells Inlet	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SCDMH	Occupation physician	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) B. Michael Roberts		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 18 / 2012
Mailing Address 106 Furman Cir		Transaction ID : C8903529
City Conway	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Coastal Carolina University	Occupation Dean	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1050.00	

Full Name (Last, First, Middle Initial) C. James Sanderson		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2012
Mailing Address PO Box 777		Transaction ID : C8940506
City Georgetown	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer ArcelorMittal Steel	Occupation Union President	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	1250.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 116
	<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)
Carlottia Scott

Mailing Address 1675 Southwood Dr

City State Zip Code
Surfside Beach SC 29575-5329

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

Name of Employer Occupation
N/A Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 03 / 2012

Transaction ID : C8947520

Amount of Each Receipt this Period
200.00

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

Mailing Address 6514 Bryant St. Apt 1

City State Zip Code
Myrtle Beach SC 29572

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

Name of Employer Occupation
retired retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 22 / 2012

Transaction ID : C8910466

Amount of Each Receipt this Period
300.00

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

Mailing Address 3500 Lenox Rd NE
Ste 1500

City State Zip Code
Atlanta GA 30326-4231

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

Name of Employer Occupation
me Lawyer

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
10 / 27 / 2012

Transaction ID : C8929802

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 116
	<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)
Joel Thayer

Mailing Address PO Box 15117

City Florence State SC Zip Code 29506-0117

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

Name of Employer Francis Marion University Occupation College Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : C8926803

Amount of Each Receipt this Period
 500.00

850.00

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

Mailing Address PO Box 15117

City Florence State SC Zip Code 29506-0117

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

Name of Employer Francis Marion University Occupation College Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2012

Transaction ID : C8936953

Amount of Each Receipt this Period
 100.00

850.00

C. Full Name (Last, First, Middle Initial)
Milton Troy II

Mailing Address PO Box 412

City Mullins State SC Zip Code 29574-0412

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

Name of Employer n/a Occupation Retired Military

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : C8920225

Amount of Each Receipt this Period
 100.00

220.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 116
	<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)
Milton Troy II

Mailing Address PO Box 412

City Mullins State SC Zip Code 29574-0412

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

Name of Employer n/a Occupation Retired Military

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : C8947883

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Jacquelyn Troy-Johnson

Mailing Address 5014 Milton Troy Ave.

City Mullins State SC Zip Code 29574

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

Name of Employer Troy Johnson Intergenerational Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2012

Transaction ID : C8940608

Amount of Each Receipt this Period
300.00

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

Mailing Address 4610 Moonbeam Ct

City Myrtle Beach State SC Zip Code 29579

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

Name of Employer retired Occupation retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2012

Transaction ID : C8920219

Amount of Each Receipt this Period
250.00

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

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

570.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 116
	<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)
Women's Campaign Forum PAC

Mailing Address 1900 L Street NW Suite 500

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

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
 10 / 22 / 2012

Transaction ID : C8931589

Amount of Each Receipt this Period
250.00

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

Mailing Address 1556 Brookgreen Dr

City Myrtle Beach State SC Zip Code 29577-5870

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

Name of Employer Occupation
Allergy, Asthma & Sinus Center Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : C8947251

Amount of Each Receipt this Period
-500.00

[MEMO ITEM]
*

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

Mailing Address 1556 Brookgreen Dr

City Myrtle Beach State SC Zip Code 29577-5870

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

Name of Employer Occupation
Allergy, Asthma & Sinus Center Physician

Receipt For: 2012
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : C8947250

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
*

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

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

250.00

25025.00

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

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

FOR LINE NUMBER: PAGE 26 OF 116
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
South Carolina Democratic Party

Mailing Address PO Box 5965

City Columbia State SC Zip Code 29250

FEC ID number of contributing federal political committee. **C** C00007658

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2012

Transaction ID : C8928310

Amount of Each Receipt this Period
4000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

4000.00

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 116
	<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)
COMMUNICATION WORKERS OF AMERICA

Mailing Address 501 THIRD STREET NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C70000211

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : C8910228

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

Mailing Address 7234 PARKWAY DRIVE

City HANOVER State MD Zip Code 21076

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2012

Transaction ID : C8929237

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
MACHINISTS NON PARTISAN POLITICAL LEAGUE OF THE INTERNATIONAL ASSOCIATION OF MACHINISTS &

Mailing Address 9000 MACHINISTS PLACE

City UPPER MARLBORO State MD Zip Code 20772

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : C8908905

Amount of Each Receipt this Period
5000.00

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 116
	<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

Full Name (Last, First, Middle Initial) OPEIU		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2012
Mailing Address 80 EIGHTH AVENUE SUITE 610		Transaction ID : C8941931
City NEW YORK	State NY	
Zip Code 10011		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C70004650	Name of Employer	Occupation
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2012
Mailing Address 1750 NEW YORK AVENUE, NW		Transaction ID : C8941928
City WASHINGTON	State DC	
Zip Code 20006		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00007542	Name of Employer	Occupation
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 06 / 2012
Mailing Address THREE PARK PLACE		Transaction ID : C9097493
City ANNAPOLIS	State MD	
Zip Code 21401		Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C C00012476	Name of Employer	Occupation
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

SUBTOTAL of Receipts This Page (optional).....	4500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 116
	<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)
UNITED TRANSPORTATION UNION POLITICAL ACTION COMMITTEE (UTU PAC)

Mailing Address 24950 COUNTRY CLUB BLVD, STE 340

City NORTH OLMSTED State OH Zip Code 44070

FEC ID number of contributing federal political committee. **C** C00001636

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2012

Transaction ID : C8933499

Amount of Each Receipt this Period
 5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

5000.00

19500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 116
	<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) A. Gloria Bromell Tinubu		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2012	
Mailing Address 1403 7th Ave		Transaction ID : C8925918	
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		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 324530.00		

Full Name (Last, First, Middle Initial) B. Gloria Bromell Tinubu		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2012	
Mailing Address 1403 7th Ave		Transaction ID : C8943258	
City Conway State SC Zip Code 29526	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C H2SC07108	Name of Employer Coastal Carolina University Occupation Economist		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 324530.00		

Full Name (Last, First, Middle Initial) C. Gloria Bromell Tinubu		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 13 / 2012	
Mailing Address 1403 7th Ave		Transaction ID : C9097494	
City Conway State SC Zip Code 29526	Amount of Each Receipt this Period 15000.00		
FEC ID number of contributing federal political committee. C H2SC07108	Name of Employer Coastal Carolina University Occupation Economist		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15000.00		

SUBTOTAL of Receipts This Page (optional).....	30000.00
TOTAL This Period (last page this line number only).....	30000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 116		
	<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

A. A-1 Signs & Graphics

Full Name (Last, First, Middle Initial)
Mailing Address 1610 4th ave

City Conway State SC Zip Code 29526

Purpose of Disbursement campaign signs

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 37.50

Transaction ID : D426023

B. Abar Hutton Media

Full Name (Last, First, Middle Initial)
Mailing Address 6190 Grovdale Ct Suite 200

City Alexandria State VA Zip Code 22310

Purpose of Disbursement media buy- television promo

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 24 / 2012

Amount of Each Disbursement this Period: 4520.00

Transaction ID : D421599

c. Abar Hutton Media

Full Name (Last, First, Middle Initial)
Mailing Address 6190 Grovdale Ct Suite 200

City Alexandria State VA Zip Code 22310

Purpose of Disbursement media buy- television promo

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 23 / 2012

Amount of Each Disbursement this Period: 7020.00

Transaction ID : D421600

SUBTOTAL of Disbursements This Page (optional) 11577.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 116			
	<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) A. Abar Hutton Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 6190 Grovdale Ct Suite 200		Amount of Each Disbursement this Period 5520.00 Transaction ID : D421601
City Alexandria State VA Zip Code 22310	Purpose of Disbursement media buy- television promo	
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. Abar Hutton Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 6190 Grovdale Ct Suite 200		Amount of Each Disbursement this Period 5020.00 Transaction ID : D421751
City Alexandria State VA Zip Code 22310	Purpose of Disbursement media buy- television promo	
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) C. Abar Hutton Media		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 6190 Grovdale Ct Suite 200		Amount of Each Disbursement this Period 10520.00 Transaction ID : D422148
City Alexandria State VA Zip Code 22310	Purpose of Disbursement media buy- television promo	
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:		

SUBTOTAL of Disbursements This Page (optional).....	21060.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 116			
	<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) A. Ellen Baldwin			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 903 Georgetown St			Amount of Each Disbursement this Period 100.00 Transaction ID : D422135
City Marion	State SC	Zip Code 29571	
Purpose of Disbursement gotv field ops-travel		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. Ellen Baldwin			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 903 Georgetown St			Amount of Each Disbursement this Period 100.00 Transaction ID : D422124
City Marion	State SC	Zip Code 29571	
Purpose of Disbursement gotv field ops-travel		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) c. Linda Becote			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 222 Cameron Lance			Amount of Each Disbursement this Period 450.00 Transaction ID : D422118
City Florence	State SC	Zip Code 29501	
Purpose of Disbursement gotv field ops-travel		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:			

SUBTOTAL of Disbursements This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 116	
	<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) A. Linda Becote		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 222 Cameron Lance		Amount of Each Disbursement this Period 450.00 Transaction ID : D422131
City Florence	State SC	
Zip Code 29501	Purpose of Disbursement gotv field ops-travel expense	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. Amy Brown		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 201 Mill St		Amount of Each Disbursement this Period 250.00 Transaction ID : D424337
City Chesterfield	State SC	
Zip Code 29709	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:	

Full Name (Last, First, Middle Initial) c. Mr. David Brown		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 1250.00 Transaction ID : D424342
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:	

SUBTOTAL of Disbursements This Page (optional).....	1950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 116	
	<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) A. Mr. David Brown		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 155.00 Transaction ID : D426717
City Wallace	State SC Zip Code 29596-5313	
Purpose of Disbursement election day expenses		* In-Kind Received
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:	Category/Type	

Full Name (Last, First, Middle Initial) B. City of Conway		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address Post Office 1507		Amount of Each Disbursement this Period 42.06 Transaction ID : D425964
City Conway	State SC Zip Code 29528-1075	
Purpose of Disbursement water/sewage/trash collection services		* In-Kind Received
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:	Category/Type	

Full Name (Last, First, Middle Initial) c. Conway National Bank		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address PO Box 320		Amount of Each Disbursement this Period 30.00 Transaction ID : D426045
City Conway	State SC Zip Code 29528	
Purpose of Disbursement stop payment fee		* In-Kind Received
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:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	227.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 116			
	<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) A. Conway National Bank		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address PO Box 320		Amount of Each Disbursement this Period 155.85
City Conway	State SC	
Zip Code 29528	Purpose of Disbursement check printing	Transaction ID : D422149
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. Mr. Craig Conwell		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1515 5th Ave		Amount of Each Disbursement this Period 250.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement consulting services-field coordination	Transaction ID : D424338
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) c. Mr. Craig Conwell		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1515 5th Ave		Amount of Each Disbursement this Period 100.00
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement gotv election day expense	Transaction ID : D422256
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:		

SUBTOTAL of Disbursements This Page (optional).....	505.85
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 116	
	<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) A. Cornerstone 501 Plaza Escrow Act		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1780 Highway 501		Amount of Each Disbursement this Period 1904.41 Transaction ID : D424331
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement office rent	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. Mr. Tyhesh Cross		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 45 Briarwood Pl		Amount of Each Disbursement this Period 600.00 Transaction ID : D424345
City Sanford	State NC	
Zip Code 27332-2509	Purpose of Disbursement consulting services-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 <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Cumulus Broadcast System		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 11640 Hwy 17 Bypass		Amount of Each Disbursement this Period 2093.00 Transaction ID : D421928
City Murrells Inlet	State SC	
Zip Code 29576	Purpose of Disbursement radio advertisement	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:	

SUBTOTAL of Disbursements This Page (optional).....	4597.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 116			
	<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) A. Cumulus Broadcast System		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 11640 Hwy 17 Bypass		Amount of Each Disbursement this Period 2657.00
City Murrells Inlet	State SC Zip Code 29576	
Purpose of Disbursement radio advertisement	Candidate Name	Transaction ID : D421670
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. Cumulus Broadcast System		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 11640 Hwy 17 Bypass		Amount of Each Disbursement this Period 2657.00
City Murrells Inlet	State SC Zip Code 29576	
Purpose of Disbursement radio advertisement	Candidate Name	Transaction ID : D421671
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Ms. Eartha Davis		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 121 Marshall St.		Amount of Each Disbursement this Period 150.00
City Mullins	State SC Zip Code 29574	
Purpose of Disbursement gotv field op-travel	Candidate Name	Transaction ID : D422137
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	5464.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 116			
	<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) A. Dollar General #8531		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 33.02
City Conway	State SC Zip Code 29526	
Purpose of Disbursement purchase of prepaid cell	Category/Type	Transaction ID : D425987
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. Dollar General #8531		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 33.02
City Conway	State SC Zip Code 29526	
Purpose of Disbursement purchase of prepaid cell	Category/Type	Transaction ID : D425989
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) c. Dollar General #8531		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 33.02
City Conway	State SC Zip Code 29526	
Purpose of Disbursement purchase of prepaid cell	Category/Type	Transaction ID : D425990
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:		

SUBTOTAL of Disbursements This Page (optional).....	99.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 116			
	<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) A. Dollar General #8531		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 33.02
City Conway	State SC	Zip Code 29526
Purpose of Disbursement purchase prepaid cell	Category/Type	
Candidate Name	Transaction ID : D425991	
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. Dollar General #8531		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period 13.77
City Conway	State SC	Zip Code 29526
Purpose of Disbursement office supplies	Category/Type	
Candidate Name	Transaction ID : D426019	
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) c. Mrs. Regina Dyer		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address P.O. Box 438 Hwy 41A South		Amount of Each Disbursement this Period 875.00
City Centenary	State SC	Zip Code 29519
Purpose of Disbursement consulting services-field coordination	Category/Type	
Candidate Name	Transaction ID : D424343	
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:		

SUBTOTAL of Disbursements This Page (optional).....	921.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 116			
	<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) A. Mrs. Regina Dyer		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address P.O. Box 438 Hwy 41A South		Amount of Each Disbursement this Period 200.00 Transaction ID : D422255
City Centenary	State SC Zip Code 29519	
Purpose of Disbursement gotv election day expense		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. Jacqueline Ellerbe-Shannon		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 106 Agerton St		Amount of Each Disbursement this Period 100.00 Transaction ID : D422249
City Cheraw	State SC Zip Code 29520-3308	
Purpose of Disbursement gotv election day expense		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) c. Jacqueline Ellerbe-Shannon		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 106 Agerton St		Amount of Each Disbursement this Period 250.00 Transaction ID : D424336
City Cheraw	State SC Zip Code 29520-3308	
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:		

SUBTOTAL of Disbursements This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 116			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) A. Barbara Faison		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 2229 Front St		Amount of Each Disbursement this Period 350.00 Transaction ID : D422128
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement gotv field ops-travel expense	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. Barbara Faison		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 2229 Front St		Amount of Each Disbursement this Period 350.00 Transaction ID : D422115
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement gotv field ops- travel	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) c. Helen Felder		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00 Transaction ID : D422258
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement cleaning 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	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	775.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 116			
	<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) A. Helen Felder		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00 Transaction ID : D425967
City Conway	State SC	
Purpose of Disbursement cleaning services	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. Helen Felder		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00 Transaction ID : D425968
City Conway	State SC	
Purpose of Disbursement cleaning services	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) C. Helen Felder		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00 Transaction ID : D426394
City Conway	State SC	
Purpose of Disbursement cleaning services	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:		

SUBTOTAL of Disbursements This Page (optional).....	225.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 116			
	<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) A. Fidelity Broadcasting		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address Post Office Box 2830		Amount of Each Disbursement this Period 1146.00
City Myrtle Beach	State SC	Zip Code 29578
Purpose of Disbursement radio promo/advertisement	Category/Type	
Candidate Name	Transaction ID : D419277	
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. Fidelity Broadcasting		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address Post Office Box 2830		Amount of Each Disbursement this Period 1477.00
City Myrtle Beach	State SC	Zip Code 29578
Purpose of Disbursement radio promo/advertisement	Category/Type	
Candidate Name	Transaction ID : D421591	
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) c. First Data Corporation		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 680.33
City Atlanta	State GA	Zip Code 30342
Purpose of Disbursement credit card processing fee	Category/Type	
Candidate Name	Transaction ID : D422893	
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:		

SUBTOTAL of Disbursements This Page (optional).....	3303.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 116			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) A. Asa Fludd		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1302 Valparairo Dr. Apt L2		Amount of Each Disbursement this Period 250.00 Transaction ID : D424334
City Florence	State SC	
Zip Code 29501	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	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Asa Fludd		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1302 Valparairo Dr. Apt L2		Amount of Each Disbursement this Period 250.00 Transaction ID : D422254
City Florence	State SC	
Zip Code 29501	Purpose of Disbursement gotv election day expense	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) c. Ms Tyra Ford		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 5020 Exodus Drive		Amount of Each Disbursement this Period 250.00 Transaction ID : D422257
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement gotv election day expense	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)	

SUBTOTAL of Disbursements This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 116			
	<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) A. Ms Tyra Ford		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 5020 Exodus Drive		Amount of Each Disbursement this Period 500.00 Transaction ID : D424346
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:	

Full Name (Last, First, Middle Initial) B. Phillis Gibson		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 418 Palm St		Amount of Each Disbursement this Period 350.00 Transaction ID : D422116
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement gotv field ops-travel	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) C. Phillis Gibson		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 418 Palm St		Amount of Each Disbursement this Period 350.00 Transaction ID : D422129
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement gotv field ops-travel expense	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:	

SUBTOTAL of Disbursements This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 116			
	<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) A. Pat Gibson-Hyde Moore			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012		
Mailing Address 1007 Kershaw St			Amount of Each Disbursement this Period 200.00		
City Florence	State SC	Zip Code 29506	Transaction ID : D422130		
Purpose of Disbursement gotv field ops-travel expense		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. Pat Gibson-Hyde Moore			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012		
Mailing Address 1007 Kershaw St			Amount of Each Disbursement this Period 200.00		
City Florence	State SC	Zip Code 29506	Transaction ID : D422117		
Purpose of Disbursement gotv field ops-travel		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) c. Donald Gilliard			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012		
Mailing Address 2229 Front St.			Amount of Each Disbursement this Period 335.00		
City Georgetown	State SC	Zip Code 29440	Transaction ID : D421597		
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:					

SUBTOTAL of Disbursements This Page (optional).....	735.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 116			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) A. Donald Gilliard		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 2229 Front St.		Amount of Each Disbursement this Period 500.00
City Georgetown	State SC	Zip Code 29440
Purpose of Disbursement consulting services-field organization		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:	

Transaction ID : D424339

Full Name (Last, First, Middle Initial) B. Gloria Bromell Tinubu		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 40.00
City Conway	State SC	Zip Code 29526
Purpose of Disbursement forgiveness of debt		Category/ Type
Candidate Name Gloria Bromell Tinubu		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC	District: 07	

Transaction ID : D427030

[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. Gloria Bromell Tinubu		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 76.87
City Conway	State SC	Zip Code 29526
Purpose of Disbursement forgiveness of debt		Category/ Type
Candidate Name Gloria Bromell Tinubu		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: SC	District: 07	

Transaction ID : D427031

[MEMO ITEM]

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 116			
	<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) A. Gloria Bromell Tinubu		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 500.00
City Conway State SC Zip Code 29526	Purpose of Disbursement partial repayment of loan	Transaction ID : D422110
Candidate Name Gloria Bromell Tinubu	Category/Type	
Office Sought: <input checked="" 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: SC District: 07		

Full Name (Last, First, Middle Initial) B. Glory Communications (WPDT Gospel 105.1)		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address PO Box 1057		Amount of Each Disbursement this Period 1420.00
City Lake City State SC Zip Code 29560	Purpose of Disbursement radio advertisement	Transaction ID : D421590
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) c. Google Apps		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 135.15
City Mountain View State CA Zip Code 94043	Purpose of Disbursement marketing/advertisement/email	Transaction ID : D426009
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:		

SUBTOTAL of Disbursements This Page (optional).....	2055.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 116	
	<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) A. Grand Villas World TourBeach Vacations		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 590 River Oaks Dr.		Amount of Each Disbursement this Period 846.64 Transaction ID : D424329
City Myrtle Beach	State SC	
Zip Code 29579	Purpose of Disbursement campaign housing	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. Mr. Wayne Green		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1924 Rocking Chair Ct		Amount of Each Disbursement this Period 500.00 Transaction ID : D424332
City Dillon	State SC	
Zip Code 29536	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:	

Full Name (Last, First, Middle Initial) c. Mr. Wayne Green		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1924 Rocking Chair Ct		Amount of Each Disbursement this Period 200.00 Transaction ID : D422251
City Dillon	State SC	
Zip Code 29536	Purpose of Disbursement gotv election day expense	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:	

SUBTOTAL of Disbursements This Page (optional).....	846.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 116			
	<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) A. Dwane Heyward		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 1500.00 Transaction ID : D424341
City Georgetown	State SC	
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. HTC		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address Post Office Box 1819		Amount of Each Disbursement this Period 278.12 Transaction ID : D425959
City Conway	State SC	
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:		

Full Name (Last, First, Middle Initial) c. James Jackson		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 834 Marshall St.		Amount of Each Disbursement this Period 500.00 Transaction ID : D424347
City Darlington	State SC	
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:		

SUBTOTAL of Disbursements This Page (optional).....	2278.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 116			
	<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) A. James Jackson		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 834 Marshall St.		Amount of Each Disbursement this Period 200.00 Transaction ID : D422253
City Darlington	State SC	
Zip Code 29532	Purpose of Disbursement gotv election day expense	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. Shawn Johnson		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 101 Mims Street		Amount of Each Disbursement this Period 200.00 Transaction ID : D422248
City Chesterfield	State SC	
Zip Code 29709	Purpose of Disbursement gotv field ops-travel expense	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) c. Shawn Johnson		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 101 Mims Street		Amount of Each Disbursement this Period 250.00 Transaction ID : D422125
City Chesterfield	State SC	
Zip Code 29709	Purpose of Disbursement gotv field ops-travel expense	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)	

SUBTOTAL of Disbursements This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 116			
	<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) A. Kangaroo #3228		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 49.00 Transaction ID : D422097
City Conway	State SC Zip Code 29526	
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. Kangaroo #3228		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 43.56 Transaction ID : D422098
City Conway	State SC Zip Code 29526	
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) C. Kangaroo #3228		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 53.38 Transaction ID : D422099
City Conway	State SC Zip Code 29526	
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:		

SUBTOTAL of Disbursements This Page (optional).....	145.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 116		
	<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) A. Kangaroo #3228		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 40.00 Transaction ID : D422100
City Conway	State SC Zip Code 29526	
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. Kangaroo #3228		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 42.00 Transaction ID : D422101
City Conway	State SC Zip Code 29526	
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) C. Kangaroo #3228		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 47.50 Transaction ID : D422102
City Conway	State SC Zip Code 29526	
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:		

SUBTOTAL of Disbursements This Page (optional).....	129.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 116			
	<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) A. Kangaroo #3228		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 44.44
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense-gas	Category/Type	Transaction ID : D426014
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. Kangaroo #3228		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 34.00
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense-gas	Category/Type	Transaction ID : D426016
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) C. Kangaroo #3228		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 65.03
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense-gas	Category/Type	Transaction ID : D426018
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:		

SUBTOTAL of Disbursements This Page (optional).....	143.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 116			
	<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) A. Kangaroo Express #3064		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 3710 Hwy 501		Amount of Each Disbursement this Period 41.20 Transaction ID : D426032
City Myrtle Beach	State SC	
Zip Code 29579	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. Kangaroo Express #3064		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 3710 Hwy 501		Amount of Each Disbursement this Period 46.00 Transaction ID : D422095
City Myrtle Beach	State SC	
Zip Code 29579	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) c. Kangaroo Express #3064		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 3710 Hwy 501		Amount of Each Disbursement this Period 43.00 Transaction ID : D422096
City Myrtle Beach	State SC	
Zip Code 29579	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:	

SUBTOTAL of Disbursements This Page (optional).....	130.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 116			
	<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) A. Kingston Grill and Bar		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 2676 Church Street		Amount of Each Disbursement this Period 1150.00 Transaction ID : D425953
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement election night venue	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. Ms. Lanina Linton		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 2140 Tillers Plow Row		Amount of Each Disbursement this Period 250.00 Transaction ID : D424335
City Effingham	State SC	
Zip Code 29541	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:	

Full Name (Last, First, Middle Initial) C. Ms. Rena McLaughlin		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 603 Summer Lane		Amount of Each Disbursement this Period 600.00 Transaction ID : D422026
City Bennettsville	State SC	
Zip Code 29512	Purpose of Disbursement Govt field ops-travel expense	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:	

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 116			
	<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) A. Ms. Rena McLaughlin		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 603 Summer Lane		Amount of Each Disbursement this Period 600.00 Transaction ID : D422127
City Bennettsville	State SC	
Purpose of Disbursement gotv field op-travel expense		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. Teresa Moore		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 607 Edgar St		Amount of Each Disbursement this Period 100.00 Transaction ID : D422133
City Marion	State SC	
Purpose of Disbursement gotv field ops-travel		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) c. Teresa Moore		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 607 Edgar St		Amount of Each Disbursement this Period 100.00 Transaction ID : D422123
City Marion	State SC	
Purpose of Disbursement gotv field ops-travel		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: _____	

SUBTOTAL of Disbursements This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 116			
	<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) A. Murphy Express 8573		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 2735 Church St.		Amount of Each Disbursement this Period 65.59 Transaction ID : D425980
City Conway	State SC	
Zip Code 29526	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. Antonious Nesmith		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 1403 Centerside Dr		Amount of Each Disbursement this Period 200.00 Transaction ID : D422122
City Florence	State SC	
Zip Code 29506	Purpose of Disbursement gotv field ops-travel	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) C. Antonious Nesmith		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 1403 Centerside Dr		Amount of Each Disbursement this Period 200.00 Transaction ID : D422132
City Florence	State SC	
Zip Code 29506	Purpose of Disbursement gotv field ops-travel expense	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:	

SUBTOTAL of Disbursements This Page (optional).....	465.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 116			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) A. Lashonda Nesmith			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 420 W Cheves ST			Amount of Each Disbursement this Period 500.00
City Florence	State SC	Zip Code 29501	
Purpose of Disbursement florence office rental		Category/ Type	Transaction ID : D425116
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)		* In-Kind Received
State: _____	District: _____		

Full Name (Last, First, Middle Initial) B. NGP Van Inc			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2012
Mailing Address 1101 15th Street NW Suite 500			Amount of Each Disbursement this Period 2100.00
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement campaign tracking, disbursement, contribution system		Category/ Type	Transaction ID : D426048
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) c. NGP Van Inc			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1101 15th Street NW Suite 500			Amount of Each Disbursement this Period 90.00
City Washington	State DC	Zip Code 20005	
Purpose of Disbursement campaign tracking, disbursement, contribution system		Category/ Type	Transaction ID : D418890
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: _____		

SUBTOTAL of Disbursements This Page (optional)	2690.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 116	
	<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) A. Ms Mckean Nowlin		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 771 Murray Ave		Amount of Each Disbursement this Period 750.00 Transaction ID : D424344
City Myrtle Beach	State SC	
Purpose of Disbursement consulting services-social media/communications		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. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 161.26 Transaction ID : D426011
City Conway	State SC	
Purpose of Disbursement office supplies/postage		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) c. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 25.01 Transaction ID : D426013
City Conway	State SC	
Purpose of Disbursement office supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	936.27
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 116			
	<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) A. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 11.33 Transaction ID : D422103
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 143.83 Transaction ID : D422105
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies/postage	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) c. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 68.41 Transaction ID : D422106
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	223.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 116			
	<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) A. Pageland Progressive Journal		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address Post Office Box 218		Amount of Each Disbursement this Period 500.40 Transaction ID : D421586
City Pageland	State SC	
Zip Code 29728	Purpose of Disbursement newspaper advertisement	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. Douglas Pernell		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 300 West Calhoun St.		Amount of Each Disbursement this Period 500.00 Transaction ID : D422126
City Dillon	State SC	
Zip Code 29536	Purpose of Disbursement gotv field ops-travel	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) c. Douglas Pernell		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 300 West Calhoun St.		Amount of Each Disbursement this Period 500.00 Transaction ID : D422140
City Dillon	State SC	
Zip Code 29536	Purpose of Disbursement gotv field ops-travel	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:	

SUBTOTAL of Disbursements This Page (optional).....	1500.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 116			
	<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) A. Douglas Pernell		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 300 West Calhoun St.		Amount of Each Disbursement this Period 500.00 Transaction ID : D422247
City Dillon	State SC	
Zip Code 29536	Purpose of Disbursement gotv field ops-travel	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. Mr Reginald Poplus		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address 2475 Enon Rd		Amount of Each Disbursement this Period 1000.00 Transaction ID : D424349
City Atlanta	State GA	
Zip Code 30331	Purpose of Disbursement consulting services-campaign management	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) c. Mr. Tony Pryor		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 1519 5th Ave.		Amount of Each Disbursement this Period 250.00 Transaction ID : D425952
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement election day music	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:	

SUBTOTAL of Disbursements This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 116			
	<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) A. Sage Leadership PAC		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address Post Office Box 2263		Amount of Each Disbursement this Period 1000.00 Transaction ID : D419305
City Orangeburg	State SC	
Zip Code 29116	Purpose of Disbursement refund of campaign contribution	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. Santee Cooper Electric		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 100 Elm Street		Amount of Each Disbursement this Period 204.86 Transaction ID : D425951
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement utility 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:	

Full Name (Last, First, Middle Initial) c. William Sengstacken		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 906 Teton Ave SE		Amount of Each Disbursement this Period 875.00 Transaction ID : D424400
City Atlanta	State GA	
Zip Code 30312	Purpose of Disbursement consulting srvs-social media/pr	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:	

SUBTOTAL of Disbursements This Page (optional).....	2079.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 116			
	<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) A. Robbin Shipp		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address 154 Chester Dr.		Amount of Each Disbursement this Period 1000.00 Transaction ID : D424348
City Atlanta	State GA	
Purpose of Disbursement consulting srvs- 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. Robbin Shipp		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 154 Chester Dr.		Amount of Each Disbursement this Period 2000.00 Transaction ID : D424340
City Atlanta	State GA	
Purpose of Disbursement consulting srvs- 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) c. Sleep Inn		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 60.47 Transaction ID : D426035
City Conway	State SC	
Purpose of Disbursement election night room stay (general)		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: _____	

SUBTOTAL of Disbursements This Page (optional).....	3060.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 116			
	<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) A. Sleep Inn		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 60.47 Transaction ID : D426036
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election night room stay (general)	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. Sleep Inn		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 60.47 Transaction ID : D426037
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election night room stay (general)	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) c. Sleep Inn		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 60.47 Transaction ID : D426039
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election night room stay (general)	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:		

SUBTOTAL of Disbursements This Page (optional).....	181.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 116			
	<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) A. Sleep Inn		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 60.47
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election night room stay (general)	Category/Type	Transaction ID : D426041
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. Sleep Inn		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 60.47
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election night room stay (general)	Category/Type	Transaction ID : D426042
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) c. Sleep Inn		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 60.47
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election night room stay (general)	Category/Type	Transaction ID : D426044
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:		

SUBTOTAL of Disbursements This Page (optional).....	181.41
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 116			
	<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) A. Stages Video		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 514 29th Ave North		Amount of Each Disbursement this Period 436.00 Transaction ID : D421595
City Myrtle Beach	State SC	
Purpose of Disbursement television ad and production		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. Stages Video		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 514 29th Ave North		Amount of Each Disbursement this Period 712.50 Transaction ID : D421686
City Myrtle Beach	State SC	
Purpose of Disbursement television ad production		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) c. Stages Video		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 514 29th Ave North		Amount of Each Disbursement this Period 650.00 Transaction ID : D421606
City Myrtle Beach	State SC	
Purpose of Disbursement television ad production		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: _____	

SUBTOTAL of Disbursements This Page (optional)	1798.50
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 116			
	<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) A. T & S Properties Realty LLP			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 1401 West Bobby Gerald Parkway mailing address: Post Office Box 9			Amount of Each Disbursement this Period 800.00 Transaction ID : D422480
City Marion	State SC	Zip Code 29571	
Purpose of Disbursement office rent		Category/ Type	
Candidate Name			
Office Sought:	House Senate 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. The Oblander Group LLC			Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 1100 Spring St Suite 360			Amount of Each Disbursement this Period 1584.15 Transaction ID : D424401
City Atlanta	State GA	Zip Code 30309	
Purpose of Disbursement consulting service- fundraising		Category/ Type	
Candidate Name			
Office Sought:	House Senate 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) C. Mr. Allen Thomas			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1307 Academy Rd.			Amount of Each Disbursement this Period 500.00 Transaction ID : D424333
City Bennettsville	State SC	Zip Code 29512	
Purpose of Disbursement consulting services-field coordination		Category/ Type	
Candidate Name			
Office Sought:	House Senate President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	2884.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 116	
	<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) A. Mr. Allen Thomas		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1307 Academy Rd.		Amount of Each Disbursement this Period 100.00 Transaction ID : D422250
City Bennettsville	State SC	
Zip Code 29512	Purpose of Disbursement gotv election day expense	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. Ms. Elaine Thomas		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 1307 Academy Rd.		Amount of Each Disbursement this Period 50.00 Transaction ID : D422112
City Bennettsville	State SC	
Zip Code 29512	Purpose of Disbursement gotv field ops- travel	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) c. Time Warner Cable Media		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 2024 Corporate Centre Drive Suite		Amount of Each Disbursement this Period 3675.40 Transaction ID : D422151
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement cable tv media buy	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:	

SUBTOTAL of Disbursements This Page (optional).....	3825.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 116	
	<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) A. Time Warner Cable Media		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 2024 Corporate Centre Drive Suite		Amount of Each Disbursement this Period 5000.00
City Myrtle Beach	State SC Zip Code 29577	
Purpose of Disbursement cable tv media buy	Category/Type	Transaction ID : D421689
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. True Stories Research LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address Post Office Box 16912		Amount of Each Disbursement this Period 150.00
City Fernandina Beach	State FL Zip Code 32035	
Purpose of Disbursement campaign research/vulnerability scan	Category/Type	Transaction ID : D421968
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) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 54.62
City Conway	State SC Zip Code 29526	
Purpose of Disbursement prepaid services	Category/Type	Transaction ID : D422107
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:		

SUBTOTAL of Disbursements This Page (optional).....	5204.62
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 116			
	<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) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 648.19 Transaction ID : D422108
City Conway	State SC	
Purpose of Disbursement prepaid services	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. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 576.75 Transaction ID : D426051
City Conway	State SC	
Purpose of Disbursement telephone services- campaign cell phones	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) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 54.62 Transaction ID : D426007
City Conway	State SC	
Purpose of Disbursement prepaid cell service	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:		

SUBTOTAL of Disbursements This Page (optional).....	648.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 116			
	<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) A. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012	
Mailing Address 2709 Church Street			Amount of Each Disbursement this Period 54.62	
City Conway	State SC	Zip Code 29526	Transaction ID : D425983	
Purpose of Disbursement prepaid 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:				

Full Name (Last, First, Middle Initial) B. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012	
Mailing Address 2709 Church Street			Amount of Each Disbursement this Period 54.62	
City Conway	State SC	Zip Code 29526	Transaction ID : D425984	
Purpose of Disbursement prepaid 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:				

Full Name (Last, First, Middle Initial) c. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012	
Mailing Address 2709 Church Street			Amount of Each Disbursement this Period 22.22	
City Conway	State SC	Zip Code 29526	Transaction ID : D425985	
Purpose of Disbursement prepaid 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:				

SUBTOTAL of Disbursements This Page (optional).....	131.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 116			
	<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) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 16.82 Transaction ID : D426021
City Conway	State SC	
Purpose of Disbursement prepaid cell services	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. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 16.82 Transaction ID : D426022
City Conway	State SC	
Purpose of Disbursement prepaid cell services	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) c. Walmart #0586		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 27.95 Transaction ID : D425982
City Conway	State SC	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	61.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 116			
	<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) A. Walmart #0586		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 44.63 Transaction ID : D426034
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Walmart #0586		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 43.94 Transaction ID : D422104
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Whittemore Park Middle		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1808 Rhue Street		Amount of Each Disbursement this Period -133.00 Transaction ID : D426163
City Conway	State SC	
Zip Code 29527	Purpose of Disbursement voided check - expense never made	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:	

SUBTOTAL of Disbursements This Page (optional).....	-44.43
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 116	
	<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) A. Wilco #949		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 1365 E. Highway 501		Amount of Each Disbursement this Period 42.01
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense-gas	Transaction ID : D425993
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. Wilco #949		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 1365 E. Highway 501		Amount of Each Disbursement this Period 46.65
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense-gas	Transaction ID : D426002
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) c. Leon Wilson		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address 700 Ridge St		Amount of Each Disbursement this Period 120.00
City Conway	State SC	
Zip Code 29527	Purpose of Disbursement moving 1421 3rd ave	Transaction ID : D425956
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:		

SUBTOTAL of Disbursements This Page (optional).....	208.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 116			
	<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) A. Leon Wilson		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2012
Mailing Address 700 Ridge St		Amount of Each Disbursement this Period 150.00 Transaction ID : D425957
City Conway	State SC	
Zip Code 29527	Purpose of Disbursement moving expense-1421 3rd ave	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. Leon Wilson		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2012
Mailing Address 700 Ridge St		Amount of Each Disbursement this Period 80.00 Transaction ID : D425958
City Conway	State SC	
Zip Code 29527	Purpose of Disbursement moving expense-1421 3rd ave	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) c. Margaret Wilson		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 3611 Hwy 38 N		Amount of Each Disbursement this Period 150.00 Transaction ID : D422111
City Bennettsville	State SC	
Zip Code 29512	Purpose of Disbursement gotv field ops-travel	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:	

SUBTOTAL of Disbursements This Page (optional).....	380.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 116	
	<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) A. Woodfield Group Inc.		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 1118 Old Breckenridge Lane		Amount of Each Disbursement this Period 1200.00
City Montgomery	State AL	
Zip Code 36117	Purpose of Disbursement Consulting Services (FEC Compliance/Regulations)	Transaction ID : D421685
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. Woodfield Group Inc.		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1118 Old Breckenridge Lane		Amount of Each Disbursement this Period 1200.00
City Montgomery	State AL	
Zip Code 36117	Purpose of Disbursement Consulting Services (FEC Compliance/Regulations)	Transaction ID : D424330
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) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2400.00
TOTAL This Period (last page this line number only).....	94837.14

**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 80 OF 116	
	<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) A. Gloria Bromell Tinubu		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 2000.00 Transaction ID : D419254
City Conway State SC Zip Code 29526	Purpose of Disbursement partial repayment of loan 009 Category/Type	
Candidate Name Gloria Bromell Tinubu	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 07	
Disbursement 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		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 500.00 Transaction ID : D421911
City Conway State SC Zip Code 29526	Purpose of Disbursement partial repayment of loan 009 Category/Type	
Candidate Name Gloria Bromell Tinubu	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 07	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL 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 : L775

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

7000.00

Balance Outstanding at Close of This Period

-2000.00

TERMS

Date Incurred

M 12 / D 20 / Y 2011

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)..... ▶

-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 : 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 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 12 / D 30 / Y 2011 M M / D D / 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)..... 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 : 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

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

M 02 / D 01 / 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)..... ▶

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 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 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)..... 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

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

13000.00

0.00

13000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 03 /

D 05 /

Y 2012 Y

M /

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)..... ▶

13000.00

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 : L800

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

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 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)..... ▶

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

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)..... ▶

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) Gloria Bromell Tinubu PERS FUNDS	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City Conway	State SC	ZIP Code 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	Date Due M M / D D / Y Y Y Y non	Interest Rate none % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	--	-------------------------------	---

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

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

SUBTOTALS This Period This Page (optional).....	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 : L818

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
25000.00 0.00 25000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 14 / 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)..... ▶ 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 : 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 Y

M /

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)..... ▶

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 Y

Date Due

M / D / Y none 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)..... ▶

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) **Gloria Bromell Tinubu for Congress** Transaction ID : **L826**

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 30000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 30000.00
-------------------------------------	------------------------------------	---

TERMS
Date Incurred: M 06 / D 04 / 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)..... ▶ 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

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:

06 / 07 / 2012

no due date

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 : 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

M 06 / D 11 / Y 2012 Y Y

Date Due

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

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 Cumulative Payment To Date Balance Outstanding at Close of This Period
3500.00 0.00 3500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

07

10

2012

no due date

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)..... 3500.00

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

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

**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 : L840

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

2500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2500.00

TERMS

Date Incurred

M 06 / D 30 / 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)..... ▶

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 : L846

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

1300.00

Balance Outstanding at Close of This Period

8700.00

TERMS

Date Incurred

MM / DD / YYYY
08 / 06 / 2012

Date Due

MM / DD / YYYY
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

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L854**

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu PERS FUNDS	[PERSONAL FUNDS]	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
5000.00	0.00	5000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
08 / 17 / 2012	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: []

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 : L855

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 M / D D / Y Y Y Y
08 / 20 / 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)..... ▶

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) Gloria Bromell Tinubu PERS FUNDS	[PERSONAL FUNDS]	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
10000.00	0.00	10000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
08 / 20 / 2012	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:

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) **Gloria Bromell Tinubu for Congress** Transaction ID : **L868**

LOAN SOURCE Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu PERS FUNDS	[PERSONAL FUNDS]	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
5000.00	0.00	5000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
10 / 25 / 2012	none	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	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 : L870

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 11 / D 01 / Y 2012 Y Y

M M / D D / Y none 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)..... ▶

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 : **L872**

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 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
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)..... ▶ 15000.00

TOTALS This Period (last page in this line only)..... ▶ 317700.00

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 201 Mill St

City State Zip Code
Chesterfield SC 29709

Outstanding Balance Beginning This Period
0.00

Transaction ID : D426855

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
250.00 0.00 250.00

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
0.00

Transaction ID : D426718

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
1250.00 0.00 1250.00

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
0.00

Transaction ID : D426860

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

- 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) ▶

2329.73

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 107 OF 116
	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 Stephen Chand	Nature of Debt (Purpose): computer repair
Mailing Address 418 Battey Drive	
City State Zip Code Myrtle Beach SC 29588	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D426859	
Amount Incurred This Period 30.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 30.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Craig Conwell	Nature of Debt (Purpose): consulting services-field coordination
Mailing Address 1515 5th Ave	
City State Zip Code Conway SC 29526	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D426856	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Tyhesh Cross	Nature of Debt (Purpose): consulting services-photography/transportation
Mailing Address 45 Briarwood Pl	
City State Zip Code Sanford NC 27332-2509	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D426725	
Amount Incurred This Period 600.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 600.00

1) SUBTOTALS This Period This Page (optional)	880.00
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) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 108 OF 116
	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 Mr. Tyhesh Cross		Nature of Debt (Purpose): travel expense-mileage
Mailing Address 45 Briarwood Pl		
City Sanford	State NC Zip Code 27332-2509	

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

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

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

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

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

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1556.15"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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**
0.00

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

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**
0.00

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

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**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
250.00 0.00 250.00

1) SUBTOTALS This Period This Page (optional)	368.81
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) ▶	

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 **Transaction ID : D426852**
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
250.00 0.00 250.00

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 **Transaction ID : D426733**
0.00

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

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 **Transaction ID : D426857**
0.00

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

1) SUBTOTALS This Period This Page (optional)	1250.00
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) ▶	

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 Donald Gilliard		Nature of Debt (Purpose): travel expense- gas
Mailing Address 2229 Front St.		
City State	Zip Code	
Georgetown	SC 29440	

Outstanding Balance Beginning This Period	Transaction ID : D426864	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="120.00"/>	<input type="text" value="0.00"/>	<input type="text" value="120.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : D384287	
<input type="text" value="40.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="40.00"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gloria Bromell Tinubu		Nature of Debt (Purpose): Bennett's Calabash Seafood-dinner
Mailing Address 1403 7th Ave		
City	State Zip Code	
Conway	SC 29526	

Outstanding Balance Beginning This Period	Transaction ID : D384290	
<input type="text" value="76.87"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="76.87"/>	<input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="120.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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 Gloria Bromell Tinubu		Nature of Debt (Purpose): travel expense-gas/food
Mailing Address 1403 7th Ave		
City State	Zip Code	
Conway SC	29526	

Outstanding Balance Beginning This Period	Transaction ID : D426862	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="85.80"/>	<input type="text" value="0.00"/>	<input type="text" value="85.80"/>

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

Outstanding Balance Beginning This Period	Transaction ID : D426737	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dwane Heyward		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	Transaction ID : D426716	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1500.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="2085.80"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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)	PAGE 113 OF 116
	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 Lake Research Partners Inc	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 0.00	Transaction ID : D426709	
Amount Incurred This Period 7500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ms. Lanina Linton	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 0.00	Transaction ID : D426853	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mad Dog Mail Inc	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 0.00	Transaction ID : D426708	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) SUBTOTALS This Period This Page (optional)	9250.00
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) ▶	

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 Antonious Nesmith		Nature of Debt (Purpose): postage
Mailing Address 1403 Centerside Dr		
City State	Zip Code	
Florence	SC 29506	

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NGP Van Inc		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	Transaction ID : D426713	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="730.00"/>	<input type="text" value="0.00"/>	<input type="text" value="730.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ms Mckean Nowlin		Nature of Debt (Purpose): consulting services-social media/communications
Mailing Address 771 Murray Ave		
City State	Zip Code	
Myrtle Beach	SC 29577-1734	

Outstanding Balance Beginning This Period	Transaction ID : D426722	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="750.00"/>	<input type="text" value="0.00"/>	<input type="text" value="750.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="1550.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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)	PAGE 115 OF 116
	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 William Sengstacken		Nature of Debt (Purpose): consulting services-social/pr
Mailing Address 906 Teton Ave SE		
City State	Zip Code	
Atlanta	GA 30312	

Outstanding Balance Beginning This Period	Transaction ID : D426711	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="875.00"/>	<input type="text" value="0.00"/>	<input type="text" value="875.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Robbin Shipp		Nature of Debt (Purpose): consulting services-general counsel
Mailing Address 154 Chester Dr.		
City State	Zip Code	
Atlanta	GA 30316	

Outstanding Balance Beginning This Period	Transaction ID : D426714	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="3000.00"/>	<input type="text" value="0.00"/>	<input type="text" value="3000.00"/>

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

Outstanding Balance Beginning This Period	Transaction ID : D426712	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1200.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1200.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="5075.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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 The Oblander Group LLC	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 0.00	Transaction ID : D426710	
Amount Incurred This Period 8091.58	Payment This Period 0.00	Outstanding Balance at Close of This Period 8091.58

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr. Allen Thomas	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 0.00	Transaction ID : D426851	
Amount Incurred This Period 500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	8591.58
2) TOTALS This Period (last page this line number only)	33057.07
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	317700.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	350757.07