

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
JENNY HORNE 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))....	1905.00	146778.74
(b) Total Contribution Refunds (from Line 20(d))	0.00	2000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	1905.00	144778.74
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	5101.27	142801.79
(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)).....	5101.27	142801.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....		
	1976.95	
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).....		
	19879.33	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

JENNY HORNE FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1500.00	127600.00
(ii) Unitemized.....	405.00	12678.74
(iii) TOTAL of contributions from individuals ▶	1905.00	140278.74
(b) Political Party Committees.....	0.00	5500.00
(c) Other Political Committees (such as PACs).....	0.00	1000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1905.00	146778.74
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1905.00	146778.74

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	5101.27	142801.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	2000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	2000.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	5101.27	144801.79

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5173.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1905.00
25. SUBTOTAL (add Line 23 and Line 24).....	7078.22
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5101.27
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1976.95

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

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

FOR LINE NUMBER: PAGE 5 OF 12
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 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)
JENNY HORNE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Freeman, John, P., ,
 Mailing Address 2329 Wilmot Ave.
 City Columbia State SC Zip Code 29205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: 2016
 Primary General
 Other (specify) **Other**
 Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 06 2016
Transaction ID : SA11AI.6105
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Debt Retirement

B. Full Name (Last, First, Middle Initial)
Freeman, Nancy, K., ,
 Mailing Address 2329 Wilmot Avenue
 City Columbia State SC Zip Code 29205-3164
 FEC ID number of contributing federal political committee. **C**
 Name of Employer University of SC Occupation Professor
 Receipt For: 2016
 Primary General
 Other (specify) **Other**
 Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 06 2016
Transaction ID : SA11AI.6107
 Amount of Each Receipt this Period
 500.00
 Memo Item
 Debt Retirement

C. Full Name (Last, First, Middle Initial)
Harper, Sue, E., ,
 Mailing Address 1526 Deans Lane
 City Columbia State SC Zip Code 29205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Nelson Mullins Riley & Scarborough, LL Occupation Attorney
 Receipt For: 2016
 Primary General
 Other (specify) **Other**
 Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 06 2016
Transaction ID : SA11AI.6104
 Amount of Each Receipt this Period
 100.00
 Memo Item
 Debt Retirement

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

1100.00

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

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

FOR LINE NUMBER: PAGE 6 OF 12
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
JENNY HORNE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Hodge & Langley Law Firm, P.C.

Mailing Address PO Box 2765

City: Spartanburg State: SC Zip Code: 29304

FEC ID number of contributing federal political committee: C

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) Other

Election Cycle-to-Date: 350.00

Date of Receipt: 07 / 06 / 2016

Transaction ID : SA11AI.6103

Amount of Each Receipt this Period: 100.00

Memo Item
 Debt Retirement

B. Full Name (Last, First, Middle Initial)
Larson, George, C., ,

Mailing Address 163 Londonberry Rd

City: Goose Creek State: SC Zip Code: 29445

FEC ID number of contributing federal political committee: C

Name of Employer: _____ Occupation: _____

Self Employed Writer/Editor

Receipt For: 2016
 Primary General
 Other (specify) Other

Election Cycle-to-Date: 450.00

Date of Receipt: 07 / 06 / 2016

Transaction ID : SA11AI.6103

Amount of Each Receipt this Period: 50.00

Memo Item
 Debt Retirement

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

Mailing Address PO Box 1589

City: Beaufort State: SC Zip Code: 29901

FEC ID number of contributing federal political committee: C

Name of Employer: _____ Occupation: _____

Tupper, Grimkay & Dean Attorney

Receipt For: 2016
 Primary General
 Other (specify) Other

Election Cycle-to-Date: 250.00

Date of Receipt: 08 / 01 / 2016

Transaction ID : SA11AI.6114

Amount of Each Receipt this Period: 250.00

Memo Item
 Debt Retirement

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 12	
	<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)
JENNY HORNE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Adams Outdoor Advertising			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2016	
Mailing Address 4845 O'Hear Avenue			FEC Identification Number C	
City Charleston	State SC	Zip Code 29405	Amount of Each Disbursement this Period 850.00	
Purpose of Disbursement AD		Category/ Type 004	Transaction ID : SB17.5959	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Anedote			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016	
Mailing Address 5555 Hilton Avenue Suite 106			FEC Identification Number C	
City Baton Rouge	State LA	Zip Code 70808	Amount of Each Disbursement this Period 1.27	
Purpose of Disbursement CC Merchant Fee		Category/ Type	Transaction ID : SB17.6117	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Driggers, John, R., ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2016	
Mailing Address 107 Larson Drive			FEC Identification Number C	
City Summerville	State SC	Zip Code 29485	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Signs/Labor		Category/ Type	Transaction ID : SB17.6121	
Candidate Name		<input type="checkbox"/> Memo Item		
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).....▶	1851.27
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 8 OF 12	
	<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)
JENNY HORNE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Levelwing Media, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2016
Mailing Address PO Box 2589		FEC Identification Number C
City Mt. Pleasant	State SC	Zip Code 29464
Purpose of Disbursement AD	Category/ Type 004	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
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) ▼	Transaction ID : SB17.6098
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 08 / 17 / 2016
Mailing Address 1043 Barr Road		FEC Identification Number C
City Lexington	State SC	Zip Code 29072
Purpose of Disbursement AD	Category/ Type 004	
Candidate Name	Amount of Each Disbursement this Period 1000.00	
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) ▼	Transaction ID : SB17.6099
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Sullivan, Milinda, A., ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2016
Mailing Address 310 Delafield Dr.		FEC Identification Number C
City Summerville	State SC	Zip Code 29483
Purpose of Disbursement Fundraising Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 500.00	
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) ▼	Transaction ID : SB17.6119
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2500.00
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 9 OF 12	
	<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)
JENNY HORNE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sullivan, Milinda, A., ,		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2016	
Mailing Address 310 Delafield Dr.		FEC Identification Number C	
City Summerville	State SC	Zip Code 29483	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Fundraising Consulting		Category/ Type	Transaction ID : SB17.6122
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Sullivan, Milinda, A., ,		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2016	
Mailing Address 310 Delafield Dr.		FEC Identification Number C	
City Summerville	State SC	Zip Code 29483	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement Fundraising Consulting		Category/ Type	Transaction ID : SB17.6123
Candidate Name		<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

SUBTOTAL of Disbursements This Page (optional).....▶	750.00
TOTAL This Period (last page this line number only).....▶	5101.27

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)

JENNY HORNE FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Adams Outdoor Advertising			Nature of Debt (Purpose): AD
Mailing Address 4845 O'Hear Avenue			
City Charleston	State SC	Zip Code 29405	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="850.00"/>		Transaction ID : SD10.5950	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="850.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Concentric Office, LLC			Nature of Debt (Purpose): Compliance Services
Mailing Address PO Box 2485			
City Springfield	State VA	Zip Code 22152	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="0.00"/>		Transaction ID : SD10.5960	
Amount Incurred This Period <input style="width: 100%;" type="text" value="4561.35"/>	Payment This Period <input style="width: 100%;" type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="4561.35"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Levelwing Media, LLC			Nature of Debt (Purpose): AD
Mailing Address PO Box 2589			
City Mt. Pleasant	State SC	Zip Code 29464	

Outstanding Balance Beginning This Period <input style="width: 100%;" type="text" value="7500.00"/>		Transaction ID : SD10.5953	
Amount Incurred This Period <input style="width: 100%;" type="text" value="0.00"/>	Payment This Period <input style="width: 100%;" type="text" value="1000.00"/>	Outstanding Balance at Close of This Period <input style="width: 100%;" type="text" value="6500.00"/>	

1) SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="11061.35"/>
2) TOTALS This Period (last page this line number only)	<input style="width: 100%;" type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	<input style="width: 100%;" type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input style="width: 100%;" type="text"/>

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

NAME OF COMMITTEE (In Full)

JENNY HORNE FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Levelwing Media, LLC			Nature of Debt (Purpose): AD
Mailing Address PO Box 2589			
City Mt. Pleasant	State SC	Zip Code 29464	

Outstanding Balance Beginning This Period 6300.00		Transaction ID : SD10.5952	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6300.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor On A Limb Floral Studio			Nature of Debt (Purpose): Floral
Mailing Address 651 Gahagan Road			
City Summerville	State SC	Zip Code 29485	

Outstanding Balance Beginning This Period 61.13		Transaction ID : SD10.5956	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 61.13	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Starboard Communications			Nature of Debt (Purpose): Mailer
Mailing Address 1043 Barr Road			
City Lexington	State SC	Zip Code 29072	

Outstanding Balance Beginning This Period 3277.85		Transaction ID : SD10.5958	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 2277.85	

1) SUBTOTALS This Period This Page (optional)	▶	8638.98
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)
JENNY HORNE FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Three Dog Digital			Nature of Debt (Purpose): Website Hosting
Mailing Address 7320 Broad River Road Sute K-276			
City Irmo	State SC	Zip Code 29063	

Outstanding Balance Beginning This Period 179.00		Transaction ID : SD10.5954	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 179.00	

B. 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		Outstanding Balance at Close of This Period	
Amount Incurred This Period	Payment This Period		

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

1) SUBTOTALS This Period This Page (optional)	▶	179.00
2) TOTALS This Period (last page this line number only)	▶	19879.33
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	19879.33