

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Example: If typing, type over the lines.

12FE4M5

TOM RICE FOR CONGRESS

ADDRESS (number and street)

PO Box 70098

Check if different than previously reported. (ACC)

Myrtle Beach

SC

29572-0020

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00506048

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

SC

07

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

(a) Quarterly Reports:

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

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

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

Election on  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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

Type or Print Name of Treasurer

Lisker, Lisa, , ,

Signature of Treasurer

Lisker, Lisa, , ,

[Electronically Filed]

Date

/  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**TOM RICE FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	58950.00	1569587.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	6000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	58950.00	1563587.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	166984.33	848572.91
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	378.41
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	166984.33	848194.50
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	965766.58	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**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

FEC Form 3 (Revised 07/05)

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- 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

TOM RICE FOR CONGRESS

Report Covering the Period: From: 10 / 18 / 2018 To: 11 / 26 / 2018

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 06 / 2018 (date of general election)	COLUMN C Total for 11 / 07 / 2018 (date after general election)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
<b>(a) Individuals/Persons Other than Political Committees</b>		
<b>(i) Itemized (use Schedule A)</b>		
24500.00	645162.00	3000.00
<b>(ii) Unitemized</b>		
450.00	7625.00	0.00
<b>(iii) Total of contributions from individuals</b>		
24950.00	652787.00	3000.00
<b>(b) Political Party Committees</b>		
0.00	0.00	0.00
<b>(c) Other Political Committees</b>		
34000.00	916800.00	0.00

# POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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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	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
58950.00	1569587.00	3000.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	378.41	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	2000.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
58950.00	1571965.41	3000.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 64

Write or Type Committee Name

**TOM RICE FOR CONGRESS**Report Covering the Period: From:   /   /   To:   /   /  **II. DISBURSEMENTS**

	<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="166984.33"/>	<input type="text" value="848572.91"/>	<input type="text" value="49215.55"/>
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="0.00"/>	<input type="text" value="0.00"/>	<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="0.00"/>	<input type="text" value="0.00"/>	<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="0.00"/>	<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 / 64

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	6000.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	6000.00	0.00
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**21. OTHER DISBURSEMENTS**

46435.00	270090.00	10935.00
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**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

213419.33	1124662.91	60150.55
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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))

58950.00	1563587.00	3000.00
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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)

166984.33	848194.50	49215.55
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1120235.91
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	58950.00
25. SUBTOTAL (add Line 23 and Line 24).....	1179185.91
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	213419.33
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	965766.58

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

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

FOR LINE NUMBER: PAGE 7 OF 64  
(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)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Thompson, Ellen, , Mrs.,**  
Mailing Address 416 37th Ave N

City Myrtle Beach	State SC	Zip Code 29577-2922
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2018

**Transaction ID : A473B127EF0B84AE0870**

Amount of Each Receipt this Period  
250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Sparks, Rick, , Mr.,**  
Mailing Address 1570 Brookgreen Dr

City Myrtle Beach	State SC	Zip Code 29577-5870
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FEC ID number of contributing federal political committee. **C**

Name of Employer Sparks Toyota	Occupation Auto Dealership Owner
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Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 09 / 2018

**Transaction ID : AC899FAD910494912A4F**

Amount of Each Receipt this Period  
2700.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Leavitt, Robert, , , Jr.**  
Mailing Address 4705 North Ocean Blvd

City Myrtle Beach	State SC	Zip Code 29577-2548
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FEC ID number of contributing federal political committee. **C**

Name of Employer Brunswick Electric	Occupation General Manager
--	-------------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2018

**Transaction ID : A78EEE42DB0494B2A87F**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3450.00
<b>TOTAL</b> 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: PAGE 8 OF 64  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Vereen, Patricia, , ,**  
Mailing Address 203 Waties Dr  
City Murrells Inlet State SC Zip Code 29576-7074  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2018  
Transaction ID : **A5831E457FCD7480DA58**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Coppedge, Lloyd, W., ,**  
Mailing Address 315 Ocean View Dr  
City Myrtle Beach State SC Zip Code 29572-5648  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Wolverine Brass Occupation CEO  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2018  
Transaction ID : **A56D24EE7AEAE4A4997A**  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Lemay, Rickie, G., Mr.,**  
Mailing Address 4703 N Ocean Blvd  
City Myrtle Beach State SC Zip Code 29577-2548  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Accountant  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2018  
Transaction ID : **A8D0A1E2551C94172B5D**  
Amount of Each Receipt this Period  
1500.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3500.00  
**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: PAGE 9 OF 64  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Connolly, Carol, , ,**

Mailing Address 317 Doral Dr

City Pawleys Island State SC Zip Code 29585-6786

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

Name of Employer None Occupation Homemaker

Receipt For: 2018  
 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 / 2018

Transaction ID : **AA91A5D24DA5D4902B32**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Sparks, Rick, , Mr.,**

Mailing Address 1570 Brookgreen Dr

City Myrtle Beach State SC Zip Code 29577-5870

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

Name of Employer Sparks Toyota Occupation Auto Dealership Owner

Receipt For: 2020  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 09 / 2018

Transaction ID : **AED949E54A1624B389DB**

Amount of Each Receipt this Period  
300.00

Memo Item

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

Mailing Address 1776 K St. NW

City Washington State DC Zip Code 20006-2304

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

Name of Employer Occupation

Receipt For: 2018  
 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 / 2018

Transaction ID : **A13025554E4E24C2BB29**

Amount of Each Receipt this Period  
1000.00

Memo Item  
No Partners Req. Item.

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

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

3800.00

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

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

FOR LINE NUMBER: PAGE 10 OF 64  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Carr, Chalmers, , ,**

Mailing Address 722 Old Plank Rd.

City Ridge Spring	State SC	Zip Code 29129-9550
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FEC ID number of contributing federal political committee. **C**

Name of Employer Titan Farms	Occupation President
---------------------------------	-------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2018

Transaction ID : **A0ED5D29B2C714BD19C9**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Thompson, Ellen, , Mrs.,**

Mailing Address 416 37th Ave N

City Myrtle Beach	State SC	Zip Code 29577-2922
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
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Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

Transaction ID : **ACA2A7F4EE12648D59C1**

Amount of Each Receipt this Period  
750.00

Memo Item

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

Mailing Address 1204 Third Ave.

City Conway	State SC	Zip Code 29526-5106
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Attorney
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Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

Transaction ID : **A9EF2BE00B97046E08E5**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2750.00
<b>TOTAL</b> 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: PAGE 11 OF 64  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Brittain, Marie-Claire, , ,**

Mailing Address 3802 N Ocean Blvd

City Myrtle Beach State SC Zip Code 29577-2760

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

Name of Employer Brittain Resorts Occupation Property Manager

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2018

Transaction ID : **A0D15C7C9544E408A951**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Brittain, Emma Ruth, , ,**

Mailing Address 5614 Pinckney Ave

City Myrtle Beach State SC Zip Code 29577-2226

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

Name of Employer Thompson, Henry, And Gwinn Law Occupation Attorney

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1820.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2018

Transaction ID : **AF58825D1B1904D64A77**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Lemay, Ann, Brittain, Mrs.,**

Mailing Address 4703 N Ocean Blvd

City Myrtle Beach State SC Zip Code 29577-2548

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

Name of Employer Self Employed Occupation Hotel Operator

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2018

Transaction ID : **A7B429DD46FB44331A68**

Amount of Each Receipt this Period  
1500.00

Memo Item

**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 12 OF 64	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Brittain, Matthew, , Mr.,**

Mailing Address 3802 N Ocean Blvd

City Myrtle Beach	State SC	Zip Code 29577-2760
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FEC ID number of contributing federal political committee. **C**

Name of Employer Brittain Resorts	Occupation President
--------------------------------------	-------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
4833.34

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2018

**Transaction ID : AB8C98CC5C58F4CF9978**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Forrest, James, M, ,**

Mailing Address 222 Peach Tree St.

City Ward	State SC	Zip Code 29166-9461
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FEC ID number of contributing federal political committee. **C**

Name of Employer Peachtree Properties, LLC	Occupation Agent
---	---------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2018

**Transaction ID : A2F0899C1E88C44BD9E3**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Brittain, Clay, , Mr., III**

Mailing Address 5614 Pinckney Ave

City Myrtle Beach	State SC	Zip Code 29577-2226
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FEC ID number of contributing federal political committee. **C**

Name of Employer Thompson, Henry, And Gwinn Law	Occupation Attorney
--	------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3166.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2018

**Transaction ID : AA42976649F2C4320A8F**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 13 OF 64  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Connolly, Timothy, J., ,**

Mailing Address 317 Doral Dr

City Pawleys Island State SC Zip Code 29585-6786

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

Name of Employer Connolly Coastal Capital Occupation Investor

Receipt For: 2018  
 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 2018

Transaction ID : **A23885284E094203B7F**

Amount of Each Receipt this Period  
2500.00

Memo Item

**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

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶	24500.00

**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 64	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB (VERIZON PAC)**

Mailing Address 1300 I ST NW, STE 400 WEST  
ATTN: TAYLOR CRAIG

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00186288

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

**Transaction ID : A4BDE60C94DC04631981**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 1500 Industrial Rd.

City Greenville	State TN	Zip Code 37745-3541
--------------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : A82A45EC0AD33409AABE**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Mailing Address PO Box 2995

City Cordova	State TN	Zip Code 38088-2995
-----------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2018

**Transaction ID : A4FDA2DD064B64965A2C**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> 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 15 OF 64	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE**

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS	State TN	Zip Code 38120
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00068692

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2018

**Transaction ID : A6F5F08C516EA4C9E9A8**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AMGEN INC. POLITICAL ACTION COMMITTEE**

Mailing Address 601 13TH STREET, NW  
12TH FLOOR

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00251876

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2018

**Transaction ID : A09C85E52EF4D410F9D7**

Amount of Each Receipt this Period  
1500.00

Memo Item

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

Mailing Address 1120 Connecticut Ave NW

City Washington	State DC	Zip Code 20036-3902
--------------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 22 / 2018

**Transaction ID : A20CD35B955B3461D91B**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5000.00
<b>TOTAL</b> 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 64	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

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

Mailing Address 325 7th St. NW  
Suite 700

City Washington State DC Zip Code 20004-2801

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2018

Transaction ID : **A9CCCF09188A8488AA0E**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 1101 Pennsylvania Ave NW Fl 10  
10th Floor

City Washington State DC Zip Code 20004-2566

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

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2018

Transaction ID : **AA14960EDC4F44119AD6**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Political Action Committee of the AAOS**

Mailing Address 317 Massachusetts Ave NE

City Washington State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2018

Transaction ID : **AA71FA68738CF48E1BFF**

Amount of Each Receipt this Period  
1500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3500.00
<b>TOTAL</b> 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 17 OF 64
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Mailing Address 7525 RED RIVER ROAD

City WAHPETON	State ND	Zip Code 58075
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00164939

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2018

Transaction ID : **AD62E24867EA14ACB9A9**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**AETNA INC. POLITICAL ACTION COMMITTEE**

Mailing Address 20 F STREET, N.W.  
SUITE 350

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00181826

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2018

Transaction ID : **A28DF6D2A86964204A77**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TE CONNECTIVITY, INC. POLITICAL ACTION COMMITTEE TELPAC**

Mailing Address 607 14TH STREET NW  
STE. 250

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00433482

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2018

Transaction ID : **A9CDB8E6757AD436FAFB**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4500.00
<b>TOTAL</b> 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 18 OF 64	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL AUTOMOTIVE DEALERS ASSOCIATION PAC**

Mailing Address 8400 Westpark Dr.

City Mc Lean	State VA	Zip Code 22102-5116
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00040998

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 31 / 2018

**Transaction ID : AFDCC991A683D4F37876**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC**

Mailing Address 228 S Washington St.  
Ste. 115

City Alexandria	State VA	Zip Code 22314-5404
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00503680

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 31 / 2018

**Transaction ID : AF798E6BAABA541F682B**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EXPRESS SCRIPTS INC. POLITICAL FUND (A/K/A EXPRESS SCRIPTS PAC)**

Mailing Address 300 NEW JERSEY AVENUE NW  
SUITE 600

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00365072

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 29 / 2018

**Transaction ID : A61BC1F8884E94D378B0**

Amount of Each Receipt this Period  
3000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	9000.00
<b>TOTAL</b> 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 19 OF 64	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF NURSE PRACTITIONERS POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 12846

City AUSTIN	State TX	Zip Code 78711
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00358903

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

Receipt For: 2018  
 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 / 2018

Transaction ID : AE877B8A3D0D14E59835

Amount of Each Receipt this Period  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 1000.00

Memo Item

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

Mailing Address 430 N Michigan Ave # 60611

City Chicago	State IL	Zip Code 60611-4011
-----------------	-------------	------------------------

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

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 8000.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
10 / 29 / 2018

Transaction ID : A434E004C37FF4B34AF8

Amount of Each Receipt this Period  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
SNAKE RIVER SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1951 SOUTH SATURN WAY  
SUITE 100

City BOISE	State ID	Zip Code 83709
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00326389

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
11 / 06 / 2018

Transaction ID : ADE5FFF59B9084970963

Amount of Each Receipt this Period  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	_____,_____,_____ 6500.00
<b>TOTAL</b> 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: PAGE 20 OF 64  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICAL ACTION COMMITTEE

Mailing Address P O BOX 500

City RENVILLE State MN Zip Code 56284

FEC ID number of contributing federal political committee. **C** C00166348

Name of Employer Occupation

Receipt For: 2018  
 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 / 2018

Transaction ID : A821E0DB248EC43199DD

Amount of Each Receipt this Period  
 1000.00

Memo Item

**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

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	34000.00

**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 21 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kockmaruk, Steve, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2018	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 262.46	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : BD7C0B048776B4FF5864	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Starboard Communications</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 1043 Barr Rd			FEC Identification Number C	
City Lexington	State SC	Zip Code 29072-8648	Amount of Each Disbursement this Period 74950.00	
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : BB88FB6DE996A4C4C9CD	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018	
Mailing Address PO Box 84314			FEC Identification Number C	
City Baton Rouge	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 8.10	
Purpose of Disbursement Online Processing		Category/ Type	Transaction ID : BF161207EC13248B7963	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	75220.56
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 64			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2018
Mailing Address PO Box 84314		FEC Identification Number C
City Baton Rouge	State LA	Zip Code 70884-4314
Purpose of Disbursement Online Processing		Amount of Each Disbursement this Period 39.30
Candidate Name		Transaction ID : BA757BBAFDB3A41A9AFE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AccuChecks</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2018
Mailing Address 605 19th Ave N		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Payroll Taxes		Amount of Each Disbursement this Period 315.09
Candidate Name		Transaction ID : BBD34B26E203242B599B
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. AccuChecks</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2018
Mailing Address 605 19th Ave N		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Accounting Service		Amount of Each Disbursement this Period 44.50
Candidate Name		Transaction ID : B44220EA9D27B45B2803
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	398.89
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. LongBeards</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2018
Mailing Address 5040 Carolina Forest Blvd		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29579-3579
Purpose of Disbursement Event Catering	Category/ Type	
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: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B78BCAEDA20504C598B0
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Bogart Associates Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2018
Mailing Address 1200 Trinity Dr.		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-4724
Purpose of Disbursement Fundraising Consulting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 4000.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BAB38703756D64244B98
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Dunn, McKayla, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2018
Mailing Address PO Box 77098		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572
Purpose of Disbursement Salary	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 429.45	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B02F618DD54304965952
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	5429.45
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Rawlinson, Stephanie, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2018	
Mailing Address 1825 Brigadoone Ln			FEC Identification Number C	
City Florence	State SC	Zip Code 29505-3236	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Signage		Category/ Type	Transaction ID : B0AB8BE30057A4431AF4	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Kockmaruk, Steve, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2018	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 475.33	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B11947E8479FD4297AC6	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Seid, Sophica, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2018	
Mailing Address PO Box 77098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572	Amount of Each Disbursement this Period 382.40	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B098EB1FA81EE4FB2942	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1857.73
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 64			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2018		
Mailing Address PO Box 84314			FEC Identification Number C		
City Baton Rouge	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 4.20		
Purpose of Disbursement Online Processing		Category/ Type	Transaction ID : BDA84431091E544C3A5E		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. AccuChecks</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018		
Mailing Address 605 19th Ave N			FEC Identification Number C		
City Myrtle Beach	State SC	Zip Code 29577-3103	Amount of Each Disbursement this Period 1505.39		
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : BBFBCEE682A1441D4942		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Seid, Sophica, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018		
Mailing Address PO Box 77098			FEC Identification Number C		
City Myrtle Beach	State SC	Zip Code 29572	Amount of Each Disbursement this Period 1773.65		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : BD8170AAA22BD4A29801		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3283.24
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Kockmaruk, Steve, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 439.47	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B08396F21203D46C1990	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Kockmaruk, Steve, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 547.05	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B31C317D41B684FB48B2	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Dunn, McKayla, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address PO Box 77098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572	Amount of Each Disbursement this Period 1733.01	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B7D2A3E3D654143A7ABE	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2719.53
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AccuChecks</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018
Mailing Address 605 19th Ave N		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Accounting Service		Amount of Each Disbursement this Period 44.50
Candidate Name		Transaction ID : BDAFB4E6022ED4CDDDB15
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Needham, Chris, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2018
Mailing Address 5508 Whistling Duck Dr		FEC Identification Number C
City North Myrtle Beach	State SC	Zip Code 29582-9340
Purpose of Disbursement Web Consulting		Amount of Each Disbursement this Period 750.00
Candidate Name		Transaction ID : BC11538C0955A4D59A99
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Carolina Video Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2018
Mailing Address 115 South Highland Way		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572-3368
Purpose of Disbursement Media Production		Amount of Each Disbursement this Period 16394.00
Candidate Name		Transaction ID : B4577198567544496B26
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	17188.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 64			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Bogart Associates Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2018
Mailing Address 1200 Trinity Dr.		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-4724
Purpose of Disbursement Fundraising Consulting/Postage/Travel		Amount of Each Disbursement this Period 4428.57
Candidate Name		Transaction ID : BC575287D04C24E2A829
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lucky Dog Television Productions</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2018
Mailing Address 927 4th Ave. 2nd Floor		FEC Identification Number C
City Conway	State SC	Zip Code 29526-5146
Purpose of Disbursement Strategic Consulting		Amount of Each Disbursement this Period 2500.00
Candidate Name		Transaction ID : B58EE052FBF754E14BBD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Rice, Tom, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address PO Box 70700		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572-0030
Purpose of Disbursement Expense Reimbursement- See Memos		Amount of Each Disbursement this Period 3235.70
Candidate Name		Transaction ID : BA15BD2DA0A764C46838
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10164.27
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Atlantic Plumbing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address 1347 Enterprise Ave.		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-6545
Purpose of Disbursement Office Plumbing	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 785.35	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BE082C22EED06468AB9C <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BK Parker Farms</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address 7639 Highway 90		FEC Identification Number C
City Longs	State SC	Zip Code 29568-6267
Purpose of Disbursement Office Landscaping	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: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B82E6BF11D5AD45C4813 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Circle K</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address 6441 Coventry Way		FEC Identification Number C
City Clinton	State MD	Zip Code 20735-2251
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 34.21	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B5D710E8E1777471D90D <input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Knight, Nathaniel, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 531.25	
Purpose of Disbursement Office Cleaning		Category/ Type	Transaction ID : B10D8C870836E4DD9B45	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Kockmaruk, Steve, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 425.00	
Purpose of Disbursement Office Cleaning		Category/ Type	Transaction ID : B66B9001E723E424587C	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Cantee, Marie, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 706.25	
Purpose of Disbursement Office Cleaning		Category/ Type	Transaction ID : B497426AFE9D435B898	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 64			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Citi Card</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address PO Box 9001037		FEC Identification Number C
City Louisville	State KY	Zip Code 40290-1037
Purpose of Disbursement Credit Card Payment- See Memos		Amount of Each Disbursement this Period 22338.50
Candidate Name		Transaction ID : B05488BA1A8EA4742AEC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 7.98
Candidate Name		Transaction ID : B29813D8045714EF9847
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Community Broadcasters LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 199 Wealtha Ave.		FEC Identification Number C
City Watertown	State NY	Zip Code 13601-1837
Purpose of Disbursement Media Buy		Amount of Each Disbursement this Period 1916.00
Candidate Name		Transaction ID : BFA6D487F7AB148659FD
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	22338.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 541 Seaboard St.		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-9733
Purpose of Disbursement Office Supplies	Category/Type	
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: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B46825079654D46BB8D7
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Circle K</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 6441 Coventry Way		FEC Identification Number C
City Clinton	State MD	Zip Code 20735-2251
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 37.24	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BB053009DE0E74A7BBCB
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 541 Seaboard St.		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-9733
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 71.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B67A53DC6A4544E0F843
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Office Max</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 1105 Seaboard St			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-6527	Amount of Each Disbursement this Period 359.69	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : B9B195120D2C94C68843	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Roger's BBQ</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 2004 2nd Loop Rd.			FEC Identification Number C	
City Florence	State SC	Zip Code 29501-6125	Amount of Each Disbursement this Period 375.00	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B7DE7075593144817944	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 1061.16	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B77DB2ACB9DD54578A9B	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Exxon Mobile</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 24264 Highway 17			FEC Identification Number C	
City Garden City	State SC	Zip Code 29576	Amount of Each Disbursement this Period 36.27	
Purpose of Disbursement Travel		Category/Type	Transaction ID : BF90C16955DF44920B8D	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BP</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 823 Pennsylvania Ave. SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-2155	Amount of Each Disbursement this Period 60.65	
Purpose of Disbursement Travel		Category/Type	Transaction ID : BEBBE48F44EE142A8985	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Vonage Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 23 Main St			FEC Identification Number C	
City Holmdel	State NJ	Zip Code 07733-2136	Amount of Each Disbursement this Period 21.06	
Purpose of Disbursement Cell Phone		Category/Type	Transaction ID : BB33ED0D17F2B4C678F6	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Raceway Grill</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 1207 Harry Blvd Hwy.			FEC Identification Number C	
City Darlington	State SC	Zip Code 29532	Amount of Each Disbursement this Period 522.50	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : B5B11DA5B9F164440AC8	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Hog Heaven</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 7147 Ocean Hwy			FEC Identification Number C	
City Pawleys Island	State SC	Zip Code 29585-6586	Amount of Each Disbursement this Period 1492.31	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : B11BAC7D4AB984D65AE9	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Coastal Outdoor Advertising</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 2024 Corporate Center Dr.			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-7410	Amount of Each Disbursement this Period 3708.00	
Purpose of Disbursement Digital Billboard		Category/Type	Transaction ID : B9CB618B9D6E44870A94	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 541 Seaboard St.			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-9733	Amount of Each Disbursement this Period 999.50	
Purpose of Disbursement Office Supplies		Category/Type	Transaction ID : B5819BA2AF27B4AEAB45	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 73.16	
Purpose of Disbursement Meeting Expense		Category/Type	Transaction ID : B65E15C2E7FAC4BADAF7	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 2512 Virginia Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20037-9997	Amount of Each Disbursement this Period 35.55	
Purpose of Disbursement Postage		Category/Type	Transaction ID : BB63338B3DF814DB6BB6	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Conway Rental Center</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 1313 4th Ave			FEC Identification Number C	
City Conway	State SC	Zip Code 29526-5017	Amount of Each Disbursement this Period 316.44	
Purpose of Disbursement Event Equipment Rental		Category/ Type	Transaction ID : B7328CF66FD2C446B94B	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Roger's BBQ</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 2004 2nd Loop Rd.			FEC Identification Number C	
City Florence	State SC	Zip Code 29501-6125	Amount of Each Disbursement this Period 1125.00	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B04E98C4D97D34156BE3	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. BP</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 823 Pennsylvania Ave. SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-2155	Amount of Each Disbursement this Period 80.03	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BB323CAEDB8EB4C8FAD2	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 64			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Iheart Media</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018		
Mailing Address 200 E Basse Rd			FEC Identification Number C		
City San Antonio	State TX	Zip Code 78209-4489	Amount of Each Disbursement this Period 4819.50		
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : BF81CF7334E804742BA6		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Dick Broadcasting</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018		
Mailing Address 192 East Lewis			FEC Identification Number C		
City Greensboro	State NC	Zip Code 27406-1459	Amount of Each Disbursement this Period 3780.00		
Purpose of Disbursement Media Buy		Category/ Type	Transaction ID : B7F69CE4A30754F9796F		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Sonoma</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018		
Mailing Address 233 Pennsylvania Ave SE			FEC Identification Number C		
City Washington	State DC	Zip Code 20003-1121	Amount of Each Disbursement this Period 98.50		
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : B894D4B5C1AEE48B6822		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Citi Card</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address PO Box 9001037		FEC Identification Number C
City Louisville	State KY	Zip Code 40290-1037
Purpose of Disbursement Credit Card Payment- See Memos		Amount of Each Disbursement this Period 9283.75
Candidate Name		Transaction ID : B01D801AB5D394A42ABA
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 9.32
Candidate Name		Transaction ID : BB10A6CA878E742FEA71
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 4333 Amon Carter Blvd		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155-2605
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 43.58
Candidate Name		Transaction ID : B00862DC5D57445D7997
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9283.75
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 442.39	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B11A1EE3318E04C89951	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 131.80	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : B9574FEA363C849F1B14	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 1601 Willow Rd			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025-1452	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement Online Ads		Category/ Type	Transaction ID : B782CFFD7AD6F4744B28	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 541 Seaboard St.		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-9733
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 89.17	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B3B59CE73DF4C48618D1
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 32.04	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BC2A8220CFEB848B09FB
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Gogo air</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 1250 N Arlington Heights Rd.		FEC Identification Number C
City Itasca	State IL	Zip Code 60143-1286
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 49.95	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B2D37D53306744F10996
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 13.01	
Purpose of Disbursement Travel		Category/Type	Transaction ID : BBB2254C5D97447C18F9	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 551 Seaboard St			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-9733	Amount of Each Disbursement this Period 86.10	
Purpose of Disbursement Cell Phone		Category/Type	Transaction ID : B92823F7BF1EF4C35889	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>C. Walmart</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 541 Seaboard St.			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-9733	Amount of Each Disbursement this Period 932.94	
Purpose of Disbursement Office Supplies		Category/Type	Transaction ID : BB29A70A25F8D4E3BBB2	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 392.40	
Purpose of Disbursement Travel		Category/Type	Transaction ID : BAE59D3943C96400A9D9	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 65.00	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B85CE65D8A5C2486BAE2	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>c. Declaration</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 1237 First St. SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-3501	Amount of Each Disbursement this Period 274.80	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : BEBDCEE4017884C53B1B	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 541 Seaboard St.		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-9733
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 750.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BE021AC36A5804B53ACD
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. CVS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 1303 38th Ave N		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-1315
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 23.88	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B483D0140C236453B8F3
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 8.92	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B0AF515958FA64F8D87A
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Vacation MB LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 4612 Oleander Dr.			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-5711	Amount of Each Disbursement this Period 1968.30	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B2CC472AA677047EDAE5	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>B. Spilled Milk</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 18911 Premiere Ct.			FEC Identification Number C	
City Gaithersburg	State MD	Zip Code 20879-1575	Amount of Each Disbursement this Period 1891.00	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : BA9AB0309506445CA875	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>c. Starboard Communications</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018	
Mailing Address 1043 Barr Rd			FEC Identification Number C	
City Lexington	State SC	Zip Code 29072-8648	Amount of Each Disbursement this Period 764.21	
Purpose of Disbursement Direct Mail		Category/Type	Transaction ID : B72A0E78123344E42B52	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 258 Highway 17 N		FEC Identification Number C
City North Myrtle Beach	State SC	Zip Code 29582-2938
Purpose of Disbursement Shipping	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 47.21	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B1687F262E489498083D
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Nobu DC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 2525 M St. NW		FEC Identification Number C
City Washington	State DC	Zip Code 20037-1305
Purpose of Disbursement Event Catering	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 420.55	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B8A1F6F45C1264E62A4D
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Circle K</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 6441 Coventry Way		FEC Identification Number C
City Clinton	State MD	Zip Code 20735-2251
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 42.86	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B759F0E40536245EAA01
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SUBWAY</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 1945 Mr Joe White Ave		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-5625
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 212.96
Candidate Name		Transaction ID : B248F6D6C18614657BA8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Edible Arrangements</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2018
Mailing Address 7827 N Kings Hwy		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572-3054
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 88.07
Candidate Name		Transaction ID : BBD5E429E807D4DBFA93
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Citi Card</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018
Mailing Address PO Box 9001037		FEC Identification Number C
City Louisville	State KY	Zip Code 40290-1037
Purpose of Disbursement Credit Card Payment- See Memos		Amount of Each Disbursement this Period 19099.91
Candidate Name		Transaction ID : B94FF45C38ED4400E8F2
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	19099.91
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018
Mailing Address 1601 Willow Rd		FEC Identification Number C
City Menlo Park	State CA	Zip Code 94025-1452
Purpose of Disbursement Online Ads	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 75.88	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BE96DF58ECB5B4141806
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Dunes Village Resort</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018
Mailing Address 5200 Ocean Blvd.		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-2539
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 134.31	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B515EBEB7815B4AC4A57
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Walmart</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018
Mailing Address 541 Seaboard St.		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-9733
Purpose of Disbursement Office Supplies	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 20.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BAE7CE97350F14562960
State: District:	<input checked="" type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 283.40	
Purpose of Disbursement Travel		Category/Type	Transaction ID : BA49D8C0C31FC44E09AA	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 541 Seaboard St.			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-9733	Amount of Each Disbursement this Period 101.95	
Purpose of Disbursement Office Supplies		Category/Type	Transaction ID : B14DC8787B2624CEA8B6	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>c. The Sun News</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address PO Box 406			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29578-0406	Amount of Each Disbursement this Period 2925.00	
Purpose of Disbursement Print Ad		Category/Type	Transaction ID : BC992A88E7BB24B4D8C2	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 283.40	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B115C08807C064FF7BA7	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. LongBeards</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 5040 Carolina Forest Blvd			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29579-3579	Amount of Each Disbursement this Period 368.45	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : BCA8FE38341F44DF69CF	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Dunes Village Resort</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 5200 Ocean Blvd.			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-2539	Amount of Each Disbursement this Period 134.31	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B0AA84A00CB1942AD870	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Little Pigs BBQ</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 6102 Frontage Rd.			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-2083	Amount of Each Disbursement this Period 1365.00	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : B94F62D70EB104334805	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>B. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 582.39	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B606E4E416B75438BAE2	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) <b>C. Walmart</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 541 Seaboard St.			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-9733	Amount of Each Disbursement this Period 36.96	
Purpose of Disbursement Office Supplies		Category/Type	Transaction ID : B2A1470524EEC4DD9BB6	
Candidate Name		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Lowe's</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 1160 Seaboard St			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-6517	Amount of Each Disbursement this Period 44.22	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : B76FFAA3B56B84FBDA8	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Walmart</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 541 Seaboard St			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-9733	Amount of Each Disbursement this Period 60.34	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : BEC0B4BD848E14AE5AFA	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Lowe's</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 1160 Seaboard St			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-6517	Amount of Each Disbursement this Period 37.52	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : BA1CD072743A84C7DA5B	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Facebook</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 1601 Willow Rd			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025-1452	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement Online Ads		Category/ Type	Transaction ID : B3866CA0B7911438380B	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Georgetown Times</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 615 Front St			FEC Identification Number C	
City Georgetown	State SC	Zip Code 29440-3623	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Print Ad		Category/ Type	Transaction ID : B8079E263B8A74F5383D	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Facebook</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 1601 Willow Rd			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025-1452	Amount of Each Disbursement this Period 600.00	
Purpose of Disbursement Online Ads		Category/ Type	Transaction ID : BC886F1E4B5EF449DA3E	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CK Supply</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018
Mailing Address 3014 Drywall Dr.		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-6341
Purpose of Disbursement Office Building Supplies		Amount of Each Disbursement this Period 3079.81
Candidate Name		Transaction ID : B7CC0853E1CF0471CA9C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. 39 Rue de Jean</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018
Mailing Address 39 John St.		FEC Identification Number C
City Charleston	State SC	Zip Code 29403-6432
Purpose of Disbursement Event Catering		Amount of Each Disbursement this Period 1111.86
Candidate Name		Transaction ID : B313C90BAF89E486C828
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Lowe's</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018
Mailing Address 1160 Seaboard St		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-6517
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period 191.10
Candidate Name		Transaction ID : B11528FD96FE648309C0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 64			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Charleston Place Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018		
Mailing Address 205 Meeting St.			FEC Identification Number C		
City Charleston	State SC	Zip Code 29401-3110	Amount of Each Disbursement this Period 438.13		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BD8E1CDA90C564D37A04		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Lowe's</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018		
Mailing Address 1160 Seaboard St			FEC Identification Number C		
City Myrtle Beach	State SC	Zip Code 29577-6517	Amount of Each Disbursement this Period 303.21		
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : BE6E3655DD3114D25BDC		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Charleston Place Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018		
Mailing Address 205 Meeting St.			FEC Identification Number C		
City Charleston	State SC	Zip Code 29401-3110	Amount of Each Disbursement this Period 442.66		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BFD81DBEE3F304E9EAB3		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 64	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Brady's Restaurant</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 80 Powe St.			FEC Identification Number C	
City Cheraw	State SC	Zip Code 29520-1921	Amount of Each Disbursement this Period 650.00	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : BF891BBB7580843FAB6A	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Lowe's</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 1160 Seaboard St			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-6517	Amount of Each Disbursement this Period 52.17	
Purpose of Disbursement Office Supplies		Category/Type	Transaction ID : BBA37EA3E224F43A3AA2	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. National Pen Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018	
Mailing Address 342 Shlebyville Mills Rd.			FEC Identification Number C	
City Shelbyville	State TN	Zip Code 37160-3833	Amount of Each Disbursement this Period 455.90	
Purpose of Disbursement Pens		Category/Type	Transaction ID : B1E43D4F599894A278E8	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 64			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. Shulers Barbecue</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2018		
Mailing Address 419 Highway 38 W			FEC Identification Number C		
City Sellers	State SC	Zip Code 29592-8028	Amount of Each Disbursement this Period 1481.75		
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : BAB02E1FABD2348A090C		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B.</b>			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	Memo Item <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C.</b>			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	Memo Item <input type="checkbox"/>		
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	166984.33

**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 64	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TARKANIAN FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018	
Mailing Address 3008 CAMPBELL CIRCLE			FEC Identification Number C 000654095	
City LAS VEGAS	State NV	Zip Code 89107	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Political Contribution		Category/ Type	Transaction ID : B2290F82A5B8F4AED9BA	
Candidate Name Tarkanian, Danny, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NV District: 03				

Full Name (Last, First, Middle Initial) <b>B. STEVE CHABOT FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2018	
Mailing Address 3030 HARRISON AVE.			FEC Identification Number C 000301838	
City CINCINNATI	State OH	Zip Code 45211	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Political Contribution		Category/ Type	Transaction ID : BF4EADD019B2B4BFE815	
Candidate Name Chabot, Steve, J., Rep.,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: OH District: 01				

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF HAGEDORN</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018	
Mailing Address 11 CIVIC CENTER PLZ STE 007			FEC Identification Number C 000550707	
City MANKATO	State MN	Zip Code 56001	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement Political Contribution		Category/ Type	Transaction ID : BE9B98F94467740229A8	
Candidate Name Hagedorn, James, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MN District: 01				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 64	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. WALTERS FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address 9070 IRVINE CENTER DRIVE, #150		FEC Identification Number C C00546853
City IRVINE	State CA	Zip Code 92618
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>Walters, Mimi, , Rep.,</b>		Transaction ID : BF06D288481A74A28869
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	<input type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: CA District: 45		

Full Name (Last, First, Middle Initial) <b>B. MIKE BOST FOR CONGRESS COMMITTEE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address PO BOX 1212		FEC Identification Number C C00546499
City MURPHYSBORO	State IL	Zip Code 62966
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>Bost, Michael, , Rep.,</b>		Transaction ID : BEFE74CA34B2C4AFCAAD
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	<input type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: IL District: 12		

Full Name (Last, First, Middle Initial) <b>C. ROSS SPANO FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address 10101 BLOOMINGDALE AVENUE SUITE 201		FEC Identification Number C C00676668
City RIVERVIEW	State FL	Zip Code 33578
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>Spano, Vincent, Ross, ,</b>		Transaction ID : BF39EBDB6B4EA44E7B1D
Office Sought: <input checked="" type="checkbox"/> House	Disbursement For: 2018	<input type="checkbox"/> Memo Item
<input type="checkbox"/> Senate	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
<input type="checkbox"/> President	<input type="checkbox"/> Other (specify) ▼	
State: FL District: 15		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 64	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF DENVER RIGGLEMAN, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address P.O. BOX 798		FEC Identification Number C 00680488
City NELLYSFORD	State VA	Zip Code 22958
Purpose of Disbursement Political Contribution	Category/ Type	Amount of Each Disbursement this Period 2000.00
Candidate Name <b>Riggleman, Denver, Lee, , III</b>	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B71B234797A0B4B4D9BC
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 05	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. MIKE BISHOP FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address PO BOX 1148		FEC Identification Number C 00561001
City BRIGHTON	State MI	Zip Code 48116
Purpose of Disbursement Political Contribution	Category/ Type	Amount of Each Disbursement this Period 2000.00
Candidate Name <b>Bishop, Mike, , Rep.,</b>	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B97A7795643DB439ABDE
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MI District: 08	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. BALDERSON FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address 4679 WINTERSET DR		FEC Identification Number C 00662650
City COLUMBUS	State OH	Zip Code 43220
Purpose of Disbursement Political Contribution	Category/ Type	Amount of Each Disbursement this Period 2000.00
Candidate Name <b>Balderson, Troy, , ,</b>	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B0ED3A394A5344E60B54
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OH District: 12	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 64	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STEVE KNIGHT FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address PO BOX 730			FEC Identification Number C 00554014
City HILMAR	State CA	Zip Code 95324	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement Political Contribution		Category/ Type	Transaction ID : B1FEDAAF83C574819998
Candidate Name <b>Knight, Steve, , Rep.,</b>			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 25			

Full Name (Last, First, Middle Initial) <b>B. DINO FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address 1420 NW GILMAN BLVD. PMB 2661			FEC Identification Number C 00656371
City ISSAQUAH	State WA	Zip Code 98027	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement Political Contribution		Category/ Type	Transaction ID : BC9EF65FF733646C3996
Candidate Name <b>Rossi, Dino, , ,</b>			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WA District: 08			

Full Name (Last, First, Middle Initial) <b>C. COMMITTEE TO ELECT STEVE WATKINS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address 6021 SW 29TH STREET SUITE A, BOX 150			FEC Identification Number C 00660050
City TOPEKA	State KS	Zip Code 66614	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement Political Contribution		Category/ Type	Transaction ID : BD933CEA8CDFB4E36A0F
Candidate Name <b>Watkins, Steve, , ,</b>			<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: KS District: 02			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 64	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MARK HARRIS FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address PO BOX 77451		FEC Identification Number C C00649236
City CHARLOTTE	State NC	Zip Code 28271
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>Harris, Mark, , ,</b>	Category/ Type	Transaction ID : BAC8EB359455F44068FB
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NC District: 09		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF ERIK PAULSEN</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address P.O. BOX 44369 250 PRAIRIE CENTER DRIVE		FEC Identification Number C C00439661
City EDEN PRAIRIE	State MN	Zip Code 55344
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>Paulsen, Erik, , Rep.,</b>	Category/ Type	Transaction ID : B621CD9AF82494348820
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MN District: 03		

Full Name (Last, First, Middle Initial) <b>C. YOUNG KIM FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address PO BOX 2186		FEC Identification Number C C00665638
City FULLERTON	State CA	Zip Code 92837
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 2000.00
Candidate Name <b>Kim, Young, , ,</b>	Category/ Type	Transaction ID : B9038D39A6D61483EB45
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 39		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 64	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. RANDY HULTGREN FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address PO BOX 717			FEC Identification Number <b>C</b> C00467522
City ST CHARLES	State IL	Zip Code 60174-0717	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement Political Contribution		Category/ Type	Transaction ID : BAA2195857CD84818890
Candidate Name <b>Hultgren, Randy, M., Rep.,</b>		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 14		

Full Name (Last, First, Middle Initial) <b>B. CULBERSON FOR CONGRESS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2018
Mailing Address P.O. BOX 41964			FEC Identification Number <b>C</b> C00343236
City HOUSTON	State TX	Zip Code 77241	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement Political Contribution		Category/ Type	Transaction ID : B251F666FED8846679DA
Candidate Name <b>Culberson, John, A., Rep.,</b>		Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 07		

Full Name (Last, First, Middle Initial) <b>c. Flood Recovery Mondays</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2018
Mailing Address PO Box 1001			FEC Identification Number <b>C</b>
City Conway	State SC	Zip Code 29528-1001	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Charitable Contribution		Category/ Type	Transaction ID : B27073199E09B4B6B8F7
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 64	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**TOM RICE FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ROTHFUS FOR CONGRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2018
Mailing Address PO BOX 435		FEC Identification Number C C00497115
City SEWICKLEY	State PA	Zip Code 15143
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name <b>Rothfus, Keith, , Rep.,</b>		Transaction ID : B2BAF210ECE8F4A4C8B3
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA District: 12		

Full Name (Last, First, Middle Initial) <b>B. Herald Office Supply</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2018
Mailing Address PO Box 1288		FEC Identification Number C
City Dillon	State SC	Zip Code 29536-1288
Purpose of Disbursement Charitable Contribution: School Supplies- See Memo		Amount of Each Disbursement this Period 10935.00
Candidate Name		Transaction ID : B2919A35F2A104E3090A
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) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Marion, Marlboro &amp; Dillon Public Schools</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2018
Mailing Address 1429 Senate St.		FEC Identification Number C
City Columbia	State SC	Zip Code 29201-3730
Purpose of Disbursement Charitable Contribution: School Supplies		Amount of Each Disbursement this Period 10935.00
Candidate Name		Transaction ID : B40A7F6D435F94421B0F
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	11935.00
<b>TOTAL</b> This Period (last page this line number only).....▶	46435.00