

# 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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y  
10 / 01 / 2017

through

M M / D D / Y Y Y Y  
12 / 31 / 2017

M M / D D / Y Y Y Y  
12 / 31 / 2017

M M / D D / Y Y Y Y  
12 / 31 / 2017

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

Lisker, Lisa, , ,

Type or Print Name of Treasurer

Lisker, Lisa, , ,

Signature of Treasurer

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
01 / 31 / 2018

M M / D D / Y Y Y Y  
01 / 31 / 2018

M M / D D / Y Y Y Y  
01 / 31 / 2018

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

FEC Form 3 (Revised 05/2016)

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
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	188600.00	993462.00
(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)).....	188600.00	987462.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	72421.76	417062.72
(b) Total Offsets to Operating Expenditures (from Line 14).....	208.00	208.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	72213.76	416854.72
8. Cash on Hand at Close of Reporting Period (from Line 27).....	966571.91	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**TOM RICE FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	84350.00	504737.00
(ii) Unitemized.....	1600.00	3625.00
(iii) TOTAL of contributions from individuals ▶	85950.00	508362.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	102650.00	485100.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	188600.00	993462.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	208.00	208.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	188808.00	993670.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 97

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	72421.76	417062.72
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	6000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	6000.00
21. OTHER DISBURSEMENTS .....	1000.00	179650.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	73421.76	602712.72

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	851185.67
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	188808.00
25. SUBTOTAL (add Line 23 and Line 24).....	1039993.67
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	73421.76
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	966571.91

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

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

FOR LINE NUMBER: PAGE 5 OF 97  
(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)  
**Bennett, Robert, , , Jr.**

Mailing Address 219 3rd St

City Cheraw State SC Zip Code 29520-2601

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

Name of Employer Bennett Motors Occupation Owner

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 / 10 / 2017

Transaction ID : **A0A3358C7ECB1445BA17**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Naso, Nicolette, , ,**

Mailing Address 600 Fairway Dr.

City Florence State SC Zip Code 29501-5510

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

Name of Employer Self Employed Occupation Cardiologist

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 / 10 / 2017

Transaction ID : **A2AAFE8D276704D90B54**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 2304 Windsor Forest Dr.

City Florence State SC Zip Code 29501-2092

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

Name of Employer Med-Enroll Occupation President

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 / 10 / 2017

Transaction ID : **AEF5E609A9CDB47909EB**

Amount of Each Receipt this Period  
2500.00

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: PAGE 6 OF 97  
(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)  
**Black, Kathleen, , ,**  
Mailing Address 6628 75th St.  
City Cabin John State MD Zip Code 20818  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Coca-Cola Occupation Director of Gov't. Affairs  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 21 / 2017  
Transaction ID : **AC661072916054DF2AE7**  
Amount of Each Receipt this Period  
500.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Martin, John, W., , III**  
Mailing Address 10 Old Ferry Cv  
City Beaufort State SC Zip Code 29907-1220  
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 ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 04 / 2017  
Transaction ID : **AFF3E9C65B0E44AF6BFF**  
Amount of Each Receipt this Period  
250.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Brown, Candace Phillips, , ,**  
Mailing Address 861 Santee Dr.  
City Florence State SC Zip Code 29501-5713  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Adp Occupation Executive  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2017  
Transaction ID : **AD814ADE150A94A568C9**  
Amount of Each Receipt this Period  
2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3450.00  
**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 7 OF 97  
(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)  
**Jones, B Webb, , Dr., Jr.**

Mailing Address 712 S Coit St.

City Florence	State SC	Zip Code 29501-5113
------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Periodonist
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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 / 10 / 2017

**Transaction ID : A8B7D7FC5E28A4B128E9**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address PO Box 160

City Aynor	State SC	Zip Code 29511-0160
---------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Builder
-----------------------------------	-----------------------

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  
12 / 08 / 2017

**Transaction ID : AF661B7D624804BE7B67**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 4012 Ethan Thomas Dr

City Clinton	State MD	Zip Code 20735-4420
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FEC ID number of contributing federal political committee. **C**

Name of Employer Capital Hill Consulting Group	Occupation Lobbyist
---	------------------------

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  
12 / 18 / 2017

**Transaction ID : A1477C4791F0841D19E0**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	3000.00
<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 97  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Blackwood, Kristine, , ,**

Mailing Address 5804 Augusta Ln.

City: Bethesda    State: MD    Zip Code: 20816-2316

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

Name of Employer: Arnold & Porter Kaye Scholer    Occupation: Attorney

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  
 12 / 09 / 2017

Transaction ID : **AA0F71E7CC3E34A71B18**

Amount of Each Receipt this Period  
 500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Rogers, Frank, B., , III**

Mailing Address 111 Colonial Dr

City: Bennettsville    State: SC    Zip Code: 29512-3450

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

Name of Employer: Southern Cotton Growers Inc.    Occupation: Chairman

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  
 12 / 18 / 2017

Transaction ID : **ADC67FACC1D9A4012BDC**

Amount of Each Receipt this Period  
 1000.00

Memo Item

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

Mailing Address 320 Flatwoods Rd.

City: Bowman    State: SC    Zip Code: 29018-8926

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

Name of Employer: Palmetto AgriBusiness Council    Occupation: CEO

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 04 / 2017

Transaction ID : **AA45C963DDB874CD29E4**

Amount of Each Receipt this Period  
 250.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 97	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input 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)  
**Forrester, Robert, , ,**

Mailing Address 143 Deerckiff Rd.

City Avon	State CT	Zip Code 06001-2852
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FEC ID number of contributing federal political committee. **C**

Name of Employer Newman's Own Foundation	Occupation President
---	-------------------------

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
12 / 06 / 2017

**Transaction ID : A17750AAF47F04D42B69**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Huggins, Jane, , ,**

Mailing Address 838 S Parker Dr

City Florence	State SC	Zip Code 29501-6056
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Property Management
-----------------------------------	-----------------------------------

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 / 10 / 2017

**Transaction ID : A660C0F189AD34808B9C**

Amount of Each Receipt this Period  
2500.00

Memo Item

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

Mailing Address 628 Camella Circle MOVED

City Florence	State SC	Zip Code 29501-5701
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FEC ID number of contributing federal political committee. **C**

Name of Employer McLeod Orthopedics	Occupation Orthopedic Surgeon
--	----------------------------------

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 / 10 / 2017

**Transaction ID : A3EB1A5B6F4B14391B21**

Amount of Each Receipt this Period  
1000.00

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: PAGE 10 OF 97  
(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)  
**Ott, Harry, , ,**

Mailing Address 141 Ott Farm Trail

City: Saint Matthews      State: SC      Zip Code: 29135-7866

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

Name of Employer: SC Farm Bureau Federation      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  
12 / 04 / 2017

**Transaction ID : A2114832B965446DEA6D**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Galloway, Janis, , ,**

Mailing Address 2045 Timmonsville Hwy

City: Darlington      State: SC      Zip Code: 29532-7511

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

Name of Employer: Caldwell Banker      Occupation: Realtor

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  
12 / 04 / 2017

**Transaction ID : AB356F22CB65A42B3A70**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 2500 Ascot Dr

City: Florence      State: SC      Zip Code: 29501-1954

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

Name of Employer: Self      Occupation: Physician

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 / 10 / 2017

**Transaction ID : A0BF0B14181D240E0896**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 97  
(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)  
Stoughton, Tom, , Dr.,  
Mailing Address 1809 Highland Ave  
City Florence State SC Zip Code 29501-5517  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Occupation Physician  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2017  
Transaction ID : A8A3F16E23A5B40AF83B  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Woodard, A.F., , ,  
Mailing Address 600 Pinedale Dr  
City Darlington State SC Zip Code 29532-6018  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Employed Occupation Farmer  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 08 / 2017  
Transaction ID : A20C0FB3FB2744DD6807  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Norwood, Timothy, F., ,  
Mailing Address 501 Camellia Cir  
City Florence State SC Zip Code 29501-5771  
FEC ID number of contributing federal political committee. C  
Name of Employer Adp Occupation Vice President of Sales  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2017  
Transaction ID : A92BF0516A2EC45D29CB  
Amount of Each Receipt this Period  
2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 4700.00  
**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 12 OF 97  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Norwood, Timothy, F., ,**

Mailing Address 501 Camellia Cir

City Florence State SC Zip Code 29501-5771

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

Name of Employer Adp Occupation Vice President of Sales

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 / 10 / 2017

Transaction ID : **A6EA0364B5D5D4ABDB5C**

Amount of Each Receipt this Period  
2300.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Flowers, Marshall, , ,**

Mailing Address 2300 N Governor Williams Hwy

City Darlington State SC Zip Code 29540-8707

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

Name of Employer Sun Construction, Inc. 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  
10 / 13 / 2017

Transaction ID : **AC4A87D446B6C458391A**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 870 Alvermar Ridge Dr.

City Mc Lean State VA Zip Code 22102-1435

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

Name of Employer Washington Council Ernst & Young Occupation Attorney

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 / 18 / 2017

Transaction ID : **A33D3CF94A88348B8A88**

Amount of Each Receipt this Period  
2500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5800.00

**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 13 OF 97  
(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)  
**Atkinson, Dupree, , ,**  
Mailing Address 1118 Willow Brook Pl

City Mullins State SC Zip Code 29574-6192

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

Name of Employer Self Occupation Farmer

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  
12 / 04 / 2017

Transaction ID : **AF2410BEE837648D0831**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Baxley, Steven, Neal, , Jr.**  
Mailing Address 206 Hanover Road

City Marion State SC Zip Code 29571

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

Name of Employer Self Employed Occupation Farmer

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  
12 / 04 / 2017

Transaction ID : **A8094A969FADC44F4B9B**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Bryant, Marsha, S, Mrs.,**  
Mailing Address 1423 Alice Dr

City Florence State SC Zip Code 29505-2660

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

Name of Employer Pee Dee Pediatric Dentistry Occupation Admin. Assistant

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  
10 / 06 / 2017

Transaction ID : **A853AE6F677EF4DC0AD6**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 14 OF 97  
(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)  
Ward, James, 'Mickey', ,  
Mailing Address 501 Welch Rd  
City Timmonsville State SC Zip Code 29161-9676  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Employed Occupation Farmer  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 04 / 2017  
Transaction ID : A23B61230B4724CA585E  
Amount of Each Receipt this Period  
1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Carter, Luther Fred, , Dr.,  
Mailing Address 4822 E Palmetto St  
City Florence State SC Zip Code 29506-4530  
FEC ID number of contributing federal political committee. C  
Name of Employer Francis Marion University Occupation President  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 13 / 2017  
Transaction ID : A27E889FD27E84F15A85  
Amount of Each Receipt this Period  
500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Davis, Paul, , Dr.,  
Mailing Address 2330 Syracuse Community Rd  
City Darlington State SC Zip Code 29532-7012  
FEC ID number of contributing federal political committee. C  
Name of Employer Self Employed Occupation Dentist  
Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2017  
Transaction ID : A1041D66BDEC748CF93F  
Amount of Each Receipt this Period  
250.00  
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 15 OF 97  
(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)  
**Brown, J, L, ,**

Mailing Address 905 S Pamplico Hwy  
PO Box 266

City Pamplico State SC Zip Code 29583-4058

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

Name of Employer Self Employed Occupation Family Dentistry

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2017

Transaction ID : **A2C6C50B07B764D7191A**

Amount of Each Receipt this Period  
250.00

Memo Item

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

Mailing Address 518 Rosewood Dr

City Florence State SC Zip Code 29501-5456

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

Name of Employer Self Occupation Physician

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 / 16 / 2017

Transaction ID : **AE9B59826D6EE41B391B**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Parker, S., Edward, Dr.,**

Mailing Address 1510 Hillside Ave

City Florence State SC Zip Code 29501-5648

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2017

Transaction ID : **A32953B0F914B45E48C7**

Amount of Each Receipt this Period  
250.00

Memo Item

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 97	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input 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)  
**Powers, William, O., Mr.,**

Mailing Address PO Box 5839

City Florence	State SC	Zip Code 29502-5839
------------------	-------------	------------------------

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

Name of Employer Powers Construction	Occupation Chairman
---	------------------------

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 / 06 / 2017

Transaction ID : **ABE9EBFDDE38445BCAD6**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Wingard, Charles, Alford, ,**

Mailing Address 261 Spool Wheel Rd

City Gilbert	State SC	Zip Code 29054-9297
-----------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Farmer
-----------------------------------	----------------------

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  
 12 / 04 / 2017

Transaction ID : **A33710C46BA95481592A**

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

Memo Item

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

Mailing Address 806 Juanita Dr.

City Florence	State SC	Zip Code 29501-5726
------------------	-------------	------------------------

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

Name of Employer Florence Darlington Technical	Occupation VP Business Development
---	---------------------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 02 / 2017

Transaction ID : **A6BA87C3CBC8C4B5DB78**

Amount of Each Receipt this Period  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ , _____ , _____ 1750.00
<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 97	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input 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)  
**Talley, Robert, , ,**

Mailing Address 304 Lloyds Ln

City Alexandria	State VA	Zip Code 22302-3709
--------------------	-------------	------------------------

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

Name of Employer Talley & Associates	Occupation Consultant
---	--------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2017

Transaction ID : **A4A729F5187E44509B2E**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Brown, Candace Phillips, , ,**

Mailing Address 861 Santee Dr.

City Florence	State SC	Zip Code 29501-5713
------------------	-------------	------------------------

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

Name of Employer Adp	Occupation Executive
-------------------------	-------------------------

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2017

Transaction ID : **A348005E3AE3747319B1**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 1131 Highway 917 E

City Latta	State SC	Zip Code 29565-4124
---------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Farmer
-----------------------------------	----------------------

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 / 10 / 2017

Transaction ID : **A3B7B4A0B38D14E20991**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	1550.00
<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

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(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)  
**Chisholm, J. Frank, , Mr., III**  
 Mailing Address 4506 Langston Rd  
 City Timmonsville State SC Zip Code 29161-8596  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SMS Company Occupation Manager  
 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 / 10 / 2017  
**Transaction ID : AF26011C228A4414B964**  
 Amount of Each Receipt this Period  
 2300.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Moore, Neal, , ,**  
 Mailing Address 530 Bill Henry Rd.  
 City Mullins State SC Zip Code 29574-6097  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Farmer  
 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  
 12 / 04 / 2017  
**Transaction ID : AFBFB062DA3764C8EA10**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Allen, Keith, , ,**  
 Mailing Address 1131 Highway 917 E  
 City Latta State SC Zip Code 29565-4124  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Farmer  
 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  
 12 / 04 / 2017  
**Transaction ID : A6BB415250F514857BE8**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3800.00  
**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 19 OF 97  
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 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)  
**McDonald, Hubbard, , Mr., Jr.**  
Mailing Address 2514 Bluff Place Ln

City Clio	State SC	Zip Code 29525-4651
--------------	-------------	------------------------

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

Name of Employer Self	Occupation Attorney
--------------------------	------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : A4D83A3AA66914FCDA2**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Brown, Ashley, , ,**  
Mailing Address 1317 Wisteria Dr.

City Florence	State SC	Zip Code 29501-5644
------------------	-------------	------------------------

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

Name of Employer Haynesworth Sinkler Boyd	Occupation Attorney
--	------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : A48DB89FE656043518F3**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Farrell, Howard, , Dr.,**  
Mailing Address 1594 Freedom Blvd.  
Ste. 206

City Florence	State SC	Zip Code 29505-6046
------------------	-------------	------------------------

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

Name of Employer Self	Occupation Physician
--------------------------	-------------------------

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		10		2017

**Transaction ID : A06E2F841F90D4268AF3**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 20 OF 97  
(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)  
**Brown, Matthew, , ,**  
 Mailing Address 6670 Highway 701 N.  
 City Conway State SC Zip Code 29526-5729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Farmer  
 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  
 12 / 04 / 2017  
**Transaction ID : A7C31320AA06D49FF9FE**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Johnson, Michael, , ,**  
 Mailing Address 5469 Dock Ridge Rd.  
 City Galivants Ferry State SC Zip Code 29544-6339  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Moore's Preserve Occupation GM  
 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  
 12 / 04 / 2017  
**Transaction ID : A1E2199F2B8FE4AB689E**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Maqsood, Farhan, , ,**  
 Mailing Address 2490 Abbey Way  
 City Florence State SC Zip Code 29501-2905  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation Physician  
 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 / 06 / 2017  
**Transaction ID : A5656C66C7C7E4403B11**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 97	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input 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)  
**Shelley, Johnny, M, ,**

Mailing Address 7150 Highway 917

City Nichols	State SC	Zip Code 29581-3411
-----------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Consultant
-----------------------------------	--------------------------

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  
 12 / 04 / 2017

**Transaction ID : A9A97683032FA4012A0F**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Chisholm, J. Frank, , Mr., III**

Mailing Address 4506 Langston Rd

City Timmons ville	State SC	Zip Code 29161-8596
-----------------------	-------------	------------------------

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

Name of Employer SMS Company	Occupation Manager
---------------------------------	-----------------------

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 / 10 / 2017

**Transaction ID : ABE7FAB7729AB4E8AB1B**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2700.00

Memo Item

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

Mailing Address 7900 Highway 917

City Nichols	State SC	Zip Code 29581-3253
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Farmer
-----------------------------------	----------------------

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  
 12 / 04 / 2017

**Transaction ID : AE362DDEF57C94EEB993**

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 4200.00
<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 22 OF 97  
(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)  
**Rogers, Gill, , ,**

Mailing Address 1901 E Carolina Ave.

City Hartsville State SC Zip Code 29550-7434

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

Name of Employer Rogers Brother Farm Occupation Farmer

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  
12 / 04 / 2017

Transaction ID : **A1FF1C9A346574A62B9E**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Willcox, Lawrence, , ,**

Mailing Address 9325 Renshaw Dr

City Bethesda State MD Zip Code 20817-2227

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

Name of Employer Capitol Tax Partners Occupation Lawyer

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  
10 / 06 / 2017

Transaction ID : **AAB74E4F4AFFB423CBE0**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 1610 W Hillside Ave.

City Florence State SC Zip Code 29501-5608

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 ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 04 / 2017

Transaction ID : **A8407011146674067AD1**

Amount of Each Receipt this Period  
500.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 23 OF 97  
(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)  
**Floyd, Richard, , ,**  
Mailing Address 4785 Good Luck Rd.

City Aynor State SC Zip Code 29511-3961

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

Name of Employer Horry County Farm Bureau Occupation Legislative Chair

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  
12 / 04 / 2017

Transaction ID : **A4974344780F64E668D9**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Maxwell, Charles, , ,**  
Mailing Address 214 Cherokee Dr.

City Georgetown State SC Zip Code 29440-5844

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

Name of Employer Self Employed Occupation Dentist

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  
10 / 06 / 2017

Transaction ID : **ABC461EC37BB64930AB8**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Johnson, Pressley, , ,**  
Mailing Address 4083 Joyner Swamp Rd.

City Galivants Ferry State SC Zip Code 29544-6205

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

Name of Employer Self Employed Occupation Farmer

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  
12 / 04 / 2017

Transaction ID : **AB962B439CD9A416EB34**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 24 OF 97  
(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)  
**Welch, Charles, , Dr.,**

Mailing Address 615 Camellia Cir

City Florence State SC Zip Code 29501-5709

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

Name of Employer Self Employed Occupation Dentist

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 / 10 / 2017

Transaction ID : **A39DD7EDE2A604C03858**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Moody, Rodney, , Mr.,**

Mailing Address 601 B Wiltshire Dr,

City Florence State SC Zip Code 29501-1943

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

Name of Employer Pee Dee Auto Sales Occupation Manager

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 / 10 / 2017

Transaction ID : **A2D3A3C36503648AA8E4**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Beckham, John, Steven, , Jr**

Mailing Address 1912 Valleywood Rd

City Mc Lean State VA Zip Code 22101-4930

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

Name of Employer Usc Occupation Fellowship Director

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  
12 / 04 / 2017

Transaction ID : **A26DD67ED8967488F9C8**

Amount of Each Receipt this Period  
500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2500.00

**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 25 OF 97  
(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)  
**Imbeau, Stephen, , Dr., MD**  
 Mailing Address 950 Park Ave  
 City Florence State SC Zip Code 29501-5734  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Allergy, Asthma, And Sinus Cen Occupation Owner/founder  
 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 / 10 / 2017  
**Transaction ID : AE404E9E3E9454315A64**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Player, Nancy, L., Mrs.,**  
 Mailing Address 420 Rosewood Dr  
 City Florence State SC Zip Code 29501-5454  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Homemaker Occupation Homemaker  
 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  
 10 / 06 / 2017  
**Transaction ID : AE21610D5E15D411EB53**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Brown, James, , ,**  
 Mailing Address 861 Santee Dr  
 City Florence State SC Zip Code 29501-5713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Adp Corporation Occupation General Manager  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 2750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : A9D8E05246FD94185B4E**  
 Amount of Each Receipt this Period  
 2700.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4200.00  
**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 26 OF 97	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input 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)  
**Poston, Jimmy, David, Mr.,**

Mailing Address 4472 Mill House Rd

City Johnsonville	State SC	Zip Code 29555-7318
----------------------	-------------	------------------------

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

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

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
12 / 04 / 2017

**Transaction ID : AFC55C1E0C1E24AC5877**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Malik, Rajesh, , ,**

Mailing Address 2535 Ascot Dr.

City Florence	State SC	Zip Code 29501-1994
------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Cardiologist
-----------------------------------	----------------------------

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 / 06 / 2017

**Transaction ID : AD951CE26E34E40B396B**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 510 Ridgewood Dr.

City Florence	State SC	Zip Code 29501-5520
------------------	-------------	------------------------

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

Name of Employer Florence Dental Implant Center	Occupation Dental
--	----------------------

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 / 10 / 2017

**Transaction ID : AE8AA616601DD4EF5B24**

Amount of Each Receipt this Period  
2500.00

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: PAGE 27 OF 97  
(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)  
**Bonds, Philip, , Dr.,**

Mailing Address 3405 Ebenezer Chase Dr

City Florence State SC Zip Code 29501-8012

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

Name of Employer Self Occupation Dentist

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  
 10 / 05 / 2017

Transaction ID : **A9FCA760FC77F4FC0B04**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Bryant, Cullen, , ,**

Mailing Address 2560 Bryant Rd

City Dillon State SC Zip Code 29536-7412

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

Name of Employer Bryant Farms Occupation Farmer

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  
 12 / 04 / 2017

Transaction ID : **A88E3A8F7FD6D422CB33**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Mailing Address 325 7th St NW

City Washington State DC Zip Code 20004-2818

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

Name of Employer Self Employed Occupation Attorney

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  
 12 / 19 / 2017

Transaction ID : **ACD4A66B17B154A689A2**

Amount of Each Receipt this Period  
1500.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 97	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input 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)  
**Squires, Stephen, , ,**

Mailing Address 6443 Old Pee Dee Rd

City Hemingway	State SC	Zip Code 29554-3502
-------------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Farmer
-----------------------------------	----------------------

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  
 12 / 04 / 2017

**Transaction ID : A7322E509EA88450B969**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Burton, Jeff, , ,**

Mailing Address 7304 Aemilian Way

City Austin	State TX	Zip Code 78730-4214
----------------	-------------	------------------------

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

Name of Employer Self Employed	Occupation Consultant
-----------------------------------	--------------------------

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  
 12 / 19 / 2017

**Transaction ID : AB09C41CD14F04AF09BE**

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

Memo Item

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

Mailing Address 218 Harmon Park Blvd

City Marion	State SC	Zip Code 29571-2401
----------------	-------------	------------------------

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

Name of Employer First Charter Company Inc	Occupation Insurance and Real Estate
---	---

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2017

**Transaction ID : AAC1BAAE85D154C4C8C8**

Amount of Each Receipt this Period  
 \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ 250.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ , _____ , _____ 1750.00
<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 29 OF 97  
(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)  
**Brown, James, , ,**

Mailing Address 861 Santee Dr

City Florence State SC Zip Code 29501-5713

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

Name of Employer Adp Corporation Occupation General Manager

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2750.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2017

Transaction ID : **A6871AD680702481B8FB**

Amount of Each Receipt this Period  
50.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Atkinson, William, , ,**

Mailing Address 1118 Willow Brook Pl.

City Mullins State SC Zip Code 29574-6192

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

Name of Employer Self Employed Occupation Farmer

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  
12 / 04 / 2017

Transaction ID : **A1E40A3D2C80F42BBB95**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 106 Club Dr

City Myrtle Beach State SC Zip Code 29572-4703

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

Name of Employer Cardiology Gastroenterology As Occupation Physician

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 / 2017

Transaction ID : **A41565E8E9B734D26A72**

Amount of Each Receipt this Period  
1000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1550.00

**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 30 OF 97  
(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)  
**Migdail, Evan, , ,**  
 Mailing Address 7219 Delfield St.  
 City Chevy Chase State MD Zip Code 20815-4045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DLA Piper Occupation Attorney  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2017  
**Transaction ID : AB601037ADF1B4DD7B32**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Jory, David, , ,**  
 Mailing Address 499 S Capitol St SW  
 City Washington State DC Zip Code 20003-4013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Capitol Hill Consulting Occupation Consultant  
 Receipt For: 2018  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 18 / 2017  
**Transaction ID : AD587B10823AD4430B1C**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Denton, Leslie, , ,**  
 Mailing Address 1418 St. James Court  
 City Florence State SC Zip Code 29501-5600  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Friends of Florence County Library 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  
 10 / 10 / 2017  
**Transaction ID : A73BE635A34D94A6B9C1**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00  
**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 31 OF 97  
(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)  
**Moss, Joseph, David, Dr.,**

Mailing Address 642 Ascot Dr

City Florence State SC Zip Code 29501-1913

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Dentist

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 02 2017

Transaction ID : A6E38343F641A4F99B5A

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Asensio, Charles, , ,**

Mailing Address 201 South Narcissus Ave.  
Uni 1504

City West Palm Beach State FL Zip Code 33401-5621

FEC ID number of contributing federal political committee. C

Name of Employer Adp Occupation VP Govt. Affairs

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 10 2017

Transaction ID : ADB270DDDF7F8A48CA8C0

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Rogers, Robert, S., , III**

Mailing Address 102 Bomar Gardens St

City Cheraw State SC Zip Code 29520-1719

FEC ID number of contributing federal political committee. C

Name of Employer Palmetto Brick Company 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  
10 06 2017

Transaction ID : A3E912415B03F423A9AB

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 32 OF 97  
(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)  
**Circle W Farms**

Mailing Address PO Box 235  
358 Dairy Ave.

City Bowman State SC Zip Code 29018-0235

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

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 04 / 2017

Transaction ID : **A86A68F1A7918452BBE6**

Amount of Each Receipt this Period  
600.00

Memo Item  
No Partners Require Itemization

**B.** Full Name (Last, First, Middle Initial)  
**Second Loop Partners LLC**

Mailing Address 530 Ridgewood Dr.

City Florence State SC Zip Code 29501-5520

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 / 10 / 2017

Transaction ID : **A07A99242BBA64ED89A6**

Amount of Each Receipt this Period  
1000.00

Memo Item  
See Partner Memos

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

Mailing Address 530 Ridgewood Dr

City Florence State SC Zip Code 29501-5520

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

Name of Employer Occupation  
Remax Real Estate Broker

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  
 10 / 10 / 2017

Transaction ID : **A76BEBF18A7304C6D87B**

Amount of Each Receipt this Period  
500.00

Memo Item  
Second Loop Partner Memo  
Partnership: Second Loop Partners LLC

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1600.00

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



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

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

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(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)  
**Ard, Ken, , ,**

Mailing Address 530 Ridgewood Dr.

City Florence State SC Zip Code 29501-5520

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

Name of Employer Second Loop Partners LLC Occupation Partner

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
10 / 10 / 2017

**Transaction ID : A4C31DF024AB64635AAF**

Amount of Each Receipt this Period  
500.00

Memo Item  
Second Loop Partner Memo  
Partnership: Second Loop Partners LLC

**B.** Full Name (Last, First, Middle Initial)  
**McDonald Oral & Maxillofacial Surgery LLC**

Mailing Address 1509 Heritage Lane

City Florence State SC Zip Code 29505-3141

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

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
10 / 10 / 2017

**Transaction ID : AF10AD89FEC9B4C999D9**

Amount of Each Receipt this Period  
250.00

Memo Item  
See Partner Memos

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

Mailing Address 1509 Heritage Ln.

City Florence State SC Zip Code 29505-3141

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

Name of Employer Occupation  
McDonald Oral & Maxillofacial Surgery Partner

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
10 / 10 / 2017

**Transaction ID : A294B0F16F0D940969E1**

Amount of Each Receipt this Period  
250.00

Memo Item  
McDonald Oral Partner Memo  
Partnership: McDonald Oral & Maxillofacial Surgery LLC

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

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

250.00

84350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 97	
	<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)  
THE COCA-COLA COMPANY NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT

Mailing Address 1 COCA-COLA PLAZA NW

City ATLANTA	State GA	Zip Code 30313
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00012468

Name of Employer	Occupation
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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  
 12 / 12 / 2017

**Transaction ID : AD8E9311D28D148A9887**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Independent Community Bankers PAC

Mailing Address 1615 L Street NW  
Suite 900

City Washington	State DC	Zip Code 20036-5623
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00032698

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

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  
 12 / 26 / 2017

**Transaction ID : A39352F0279E54B66B5D**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
National Beer Wholesalers Association PAC

Mailing Address 1101 King Street  
Suite 600

City Alexandria	State VA	Zip Code 22314-2965
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144766

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  
 12 / 12 / 2017

**Transaction ID : A02266008E6EF4670BAE**

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ , _____ , _____ 3000.00
<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 35 OF 97	
	<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)  
SOUTH CAROLINA FARM BUREAU FEDERATION POLITICAL ACTION COMMITTEE

Mailing Address 724 KNOX ABBOTT DRIVE

City CAYCE	State SC	Zip Code 29033
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FEC ID number of contributing federal political committee. **C** C00629766

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 04 / 2017

Transaction ID : AFFB4A889EE4944C8ACD

Amount of Each Receipt this Period  
2700.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
DOMINION ENERGY, INC. POLITICAL ACTION COMMITTEE - DOMINION PAC

Mailing Address ONE JAMES RIVER PLAZA, 20TH FLOOR  
P.O. BOX 26666

City RICHMOND	State VA	Zip Code 23261
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00108209

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  
12 / 22 / 2017

Transaction ID : A0D5AB74C8EEA4F838CD

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
POWERPAC OF THE EDISON ELECTRIC INSTITUTE

Mailing Address 701 PENNSYLVANIA AVENUE NW

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00095869

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

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  
12 / 22 / 2017

Transaction ID : A482D3B7A7A354DE3B6B

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6200.00
<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 36 OF 97	
	<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 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 ▼  
 \_\_\_\_\_ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2017

**Transaction ID : A3211C27348C04AC8AC4**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**150PAC.ORG**

Mailing Address PO BOX 15727

City CHEVY CHASE	State MD	Zip Code 20825
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00614552

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 / 17 / 2017

**Transaction ID : A1A0F7D27955E44BFAC1**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**THE KROGER CO. POLITICAL ACTION COMMITTEE**

Mailing Address 1014 VINE STREET

City CINCINNATI	State OH	Zip Code 45202
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00059238

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  
 12 / 08 / 2017

**Transaction ID : A234BA5AEAD674A798CA**

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 37 OF 97	
	<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)  
**SOCIETY OF INDEPENDENT GASOLINE MARKETERS OF AMERICA PAC**

Mailing Address 3930 PENDER DRIVE  
SUITE 340

City FAIRFAX	State VA	Zip Code 22030
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00120030

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

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  
12 / 29 / 2017

**Transaction ID : A716C700070B04AA4B45**

Amount of Each Receipt this Period  
750.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**SOUTHERN COMPANY EMPLOYEES PAC**

Mailing Address 241 RALPH MCGILL BLVD, NE  
BIN 10115

City Atlanta	State GA	Zip Code 30308-3374
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144774

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 / 17 / 2017

**Transaction ID : AE3B56F5938DB4F689CC**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**National Restaurant Association PAC**

Mailing Address 2055 L St NW  
Suite 700

City Washington	State DC	Zip Code 20036-4985
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00003764

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  
12 / 26 / 2017

**Transaction ID : ADF6173CD9974573A63**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8250.00
<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 38 OF 97	
	<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)  
**CONCRETE REINFORCING STEEL INSTITUTE PAC (REBAR PAC)**

Mailing Address 933 N PLUM GROVE RD

City SCHAUMBURG	State IL	Zip Code 60173
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00565614

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  
12 / 29 / 2017

**Transaction ID : A27ABF10004CE4014A06**

Amount of Each Receipt this Period  
500.00

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 ▼  
2700.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 10 / 2017

**Transaction ID : A5CC7F9760C6D42B2A07**

Amount of Each Receipt this Period  
200.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MAKING AMERICA PROSPEROUS PAC**

Mailing Address PO BOX 2485

City SPRINGFIELD	State VA	Zip Code 22152
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00445379

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  
12 / 22 / 2017

**Transaction ID : AE1C0063EB03B43C8B20**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	5700.00
<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

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(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)  
**Altria Group, Inc. PAC**

Mailing Address 101 Constitution Ave., NW  
Suite 400

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

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  
12 / 08 / 2017

**Transaction ID : A6EF9D041BCEE4AC5A2B**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**American Dental PAC**

Mailing Address 1111 14th St., NW

City Washington State DC Zip Code 20005-5603

FEC ID number of contributing federal political committee. **C** C00000729

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 / 06 / 2017

**Transaction ID : A80C6AB416223440F8B0**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Lockheed Martin Employees' Political Action Committee**

Mailing Address 2121 Crystal Drive  
Suite 100

City Arlington State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

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 / 30 / 2017

**Transaction ID : A4EC67B651A8A4AA9903**

Amount of Each Receipt this Period  
1000.00

Memo Item

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

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

7000.00

**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 40 OF 97	
	<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)  
**AMERICAS HEALTH INSURANCE PLANS PAC (AHIP PAC)**

Mailing Address 601 PENNSYLVANIA AVENUE, NW  
SOUTH BUILDING, SUITE 500

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00106740

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  
 12 / 26 / 2017

**Transaction ID : ADDF3123032344A91A7C**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
THE AMERICAN SOCIETY OF PENSION PROFESSIONALS AND ACTUARIES POLITICAL ACTION COMMITTEE (ASPPA-NAPA P)

Mailing Address 4245 N. FAIRFAX DRIVE

City ARLINGTON	State VA	Zip Code 22202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00333104

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 / 07 / 2017

**Transaction ID : A4CA99AB8A00A4BFCA59**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**National Emergency Medicine PAC**

Mailing Address PO Box 619911

City Dallas	State TX	Zip Code 75261-9911
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FEC ID number of contributing federal political committee. **C** C00140061

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

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  
 12 / 29 / 2017

**Transaction ID : A847D7E623F8245B6BAC**

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 3000.00
<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 41 OF 97	
	<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)  
**Panhandle Peanut Growers Association PAC**

Mailing Address P.O. Box 361

City Wellington	State TX	Zip Code 79095-0361
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00382507

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  
 10 / 17 / 2017

**Transaction ID : A4D377B4A19A649B7A7D**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE**

Mailing Address 4300 WILSON BLVD  
SUITE 400

City ARLINGTON	State VA	Zip Code 22203
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00113241

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 4250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 28 / 2017

**Transaction ID : A9EA751EEA9274533ADC**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1750.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**FORD MOTOR COMPANY CIVIC ACTION FUND**

Mailing Address PO BOX 75000  
MC 2250

City DETROIT	State MI	Zip Code 48275
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00046474

Name of Employer	Occupation
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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  
 12 / 26 / 2017

**Transaction ID : AF44097D704534E90BE6**

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 3250.00
<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 42 OF 97	
	<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)  
**Southeastern Lumber Manufacturers Association PAC**

Mailing Address 200 Greencastle Road

City Tyrone	State GA	Zip Code 30290-2943
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FEC ID number of contributing federal political committee. **C** C00128678

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  
 12 / 08 / 2017

**Transaction ID : A24EEF5CE118C4DD98AA**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**PURO PAC INC.**

Mailing Address PO BOX 15441

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00507053

Name of Employer	Occupation
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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  
 12 / 31 / 2017

**Transaction ID : A01D830F330D74622B41**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AIR LINE PILOTS ASSOCIATION PAC**

Mailing Address 1625 MASSACHUSETTS AVE. NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer	Occupation
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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  
 12 / 29 / 2017

**Transaction ID : A6F76B2B1D64E41ED90C**

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 43 OF 97	
	<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)  
**NUCLEAR ENERGY INSTITUTE FEDERAL POLITICAL ACTION COMMITTEE**

Mailing Address 1201 F ST NW  
SUITE 1100

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00239848

Name of Employer	Occupation
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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  
 12 / 22 / 2017

**Transaction ID : A335C90D87135476486D**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Honeywell International PAC**

Mailing Address 101 Constitution Ave., NW  
Suite 500 W.

City Washington	State DC	Zip Code 20001-2133
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FEC ID number of contributing federal political committee. **C** C00096156

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_,\_\_\_\_\_,\_\_\_\_\_ 6500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 17 / 2017

**Transaction ID : AE2DA99184B60473384A**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES APAC**

Mailing Address 1575 I STREET, NW

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

FEC ID number of contributing federal political committee. **C** C00041566

Name of Employer	Occupation
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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  
 12 / 26 / 2017

**Transaction ID : AAC13182507EF49C8B40**

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ , _____ , _____ 2500.00
<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 44 OF 97	
	<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)  
**AFLAC PAC**

Mailing Address 1932 Wynnton Rd.

City Columbus	State GA	Zip Code 31909
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00034157

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
12 / 08 / 2017

**Transaction ID : AB0E61343ED3645648CD**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**RESOLUTE FOREST PRODUCTS US INC. POLITICAL ACTION COMMITTEE**

Mailing Address 3502 REGENTS PARK COURT

City ARLINGTON	State TX	Zip Code 76017
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00350884

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

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 / 17 / 2017

**Transaction ID : A3599141D01E542FAAA1**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Asian American Hotel Owner Association PAC**

Mailing Address 228 S. Washington Street  
Suite 115

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

FEC ID number of contributing federal political committee. **C** C00336743

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
12 / 08 / 2017

**Transaction ID : A95BC00944E18452AB22**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	6000.00
<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 45 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE**

Mailing Address 801 PENNSYLVANIA AVE., NW  
SUITE 220

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00064774

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  
 11 / 27 / 2017

**Transaction ID : A1CD5FD1F61204E27BE9**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**American Council of Engineering Companies PAC**

Mailing Address 1015 15th St. NW  
8th Floor

City Washington	State DC	Zip Code 20005-2643
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00010868

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

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 / 17 / 2017

**Transaction ID : ADC0CAA2E1DCB47E4839**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**EXELON CORPORATION POLITICAL ACTION COMMITTEE (EXELON PAC)**

Mailing Address 101 CONSTITUTION AVENUE NW  
SUITE 400 EAST

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

FEC ID number of contributing federal political committee. **C** C00141218

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  
 12 / 26 / 2017

**Transaction ID : A3AA7986BD718416A886**

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 3000.00
<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 46 OF 97	
	<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)  
**Honeywell International PAC**

Mailing Address 101 Constitution Ave., NW  
Suite 500 W.

City Washington	State DC	Zip Code 20001-2133
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00096156

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 17 / 2017

**Transaction ID : A4D374E2F68874EDF862**

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Western Peanut Growers, PAC**

Mailing Address Box 252

City Seminole	State TX	Zip Code 79360-0252
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00254847

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  
10 / 17 / 2017

**Transaction ID : AF2CA61F5D29545B2865**

Amount of Each Receipt this Period  
500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Associated Builders & Contractors PAC**

Mailing Address 440 1st Street NW, Ste 2

City Washington	State DC	Zip Code 20001-2028
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C30001333

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 / 18 / 2017

**Transaction ID : AB8C0876F11EF4FA0A3D**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	4000.00
<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 47 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Horry County Farm Bureau**

Mailing Address 3878 Hwy 501 W

City Conway	State SC	Zip Code 29526-4418
----------------	-------------	------------------------

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

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  
 12 / 27 / 2017

**Transaction ID : A36372B1EDDCC438A955**

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

Memo Item  
 Non federal-From permissible funds

**B.** Full Name (Last, First, Middle Initial)  
**FRATERNITY & SORORITY POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 3435

City ALEXANDRIA	State VA	Zip Code 22302
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00410068

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 / 2017

**Transaction ID : A0C6B77CFF5F34072BEA**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Wine & Spirits Wholesalers of America PAC**

Mailing Address 805 15th St NW Ste 430  
Suite 430

City Washington	State DC	Zip Code 20005-2273
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00147173

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 / 30 / 2017

**Transaction ID : AB49BA6A424C941C0970**

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 2500.00
<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 48 OF 97	
	<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. SOUTHERN COMPANY EMPLOYEES PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 241 RALPH MCGILL BLVD, NE  
BIN 10115

City Atlanta	State GA	Zip Code 30308-3374
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00144774

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  
12 / 31 / 2017

**Transaction ID : ADCAF8EEFD7844B99995**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. Tenet Healthcare Corporation PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1445 Ross Avenue  
Suite 1400

City Dallas	State TX	Zip Code 75202-2703
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00119354

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  
10 / 30 / 2017

**Transaction ID : A2CFDD46CF2E64573892**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE**  
Full Name (Last, First, Middle Initial)  
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 ▼  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2017

**Transaction ID : A7D523D7A03164224945**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	8500.00
<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 49 OF 97	
	<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)  
**Blue Cross Blue Shield of SC PAC**

Mailing Address I-20 at Alpine Rd.

City Columbia	State SC	Zip Code 29219-0001
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00406850

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  
12 / 12 / 2017

**Transaction ID : AE73B9EF7179C41279A7**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**COLLEGE OF AMERICAN PATHOLOGISTS POLITICAL ACTION COMMITTEE**

Mailing Address 1350 I STREET, NW  
SUITE 590

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

FEC ID number of contributing federal political committee. **C** C00274944

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  
12 / 29 / 2017

**Transaction ID : AB13E2C37E0E84E8F94B**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**OCCIDENTAL PETROLEUM CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 1701 PENNSYLVANIA AVE NW  
SUITE 800

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00083857

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  
12 / 21 / 2017

**Transaction ID : A3DDE2CCDC7DD47BB9E4**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<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 50 OF 97	
	<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 ROOFING CONTRACTORS POLITICAL ACTION COMMITTEE**

Mailing Address 6250 RIVER ROAD

City ROSEMONT	State IL	Zip Code 60018
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00107029

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

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  
 12 / 22 / 2017

**Transaction ID : A54A3628610EE478EBE9**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**American Council of Engineering Companies PAC**

Mailing Address 1015 15th St. NW  
8th Floor

City Washington	State DC	Zip Code 20005-2643
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FEC ID number of contributing federal political committee. **C** C00010868

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  
 11 / 21 / 2017

**Transaction ID : A2FF55926DADD47AA99F**

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

Memo Item

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

Mailing Address P.O. Box 961039

City Fort Worth	State TX	Zip Code 76161-0039
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00235739

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  
 12 / 22 / 2017

**Transaction ID : A57AD622657CF4FDC996**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2500.00

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 51 OF 97	
	<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)  
**The Boeing Company PAC**

Mailing Address 1200 Wilson Blvd

City Arlington	State VA	Zip Code 22209-2300
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00142711

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

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 17 / 2017

**Transaction ID : AEDC112B1564C483AA74**

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 ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2017

**Transaction ID : AF20A76437EB1476BA3D**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**CSX Corporation Good Government Fund**

Mailing Address 1331 Pennsylvania Ave. NW, Ste. 56

City Washington	State DC	Zip Code 20004-1745
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00163832

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

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 / 04 / 2017

**Transaction ID : A82E95F0A2980459ABD2**

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 52 OF 97	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK POLITICAL ACTION COMMITTEE)

Mailing Address 410 SEVENTEENTH STREET  
SUITE 2200

City DENVER	State CO	Zip Code 80202
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00390583

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  
12 / 08 / 2017

Transaction ID : A26BDBE8518CC4796996

Amount of Each Receipt this Period  
1000.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
DLA PIPER LLP (US) POLITICAL ACTION COMMITTEE (DLA PIPER PAC)

Mailing Address 500 8TH STREET, NW

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00151340

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

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 / 10 / 2017

Transaction ID : ADA18272B758C4735ADE

Amount of Each Receipt this Period  
750.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN ROAD & TRANSPORTATION BUILDERS ASSOCIATION PAC

Mailing Address 1219 28TH STREET NW

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00118208

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

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  
11 / 07 / 2017

Transaction ID : A6618541B33DC4CF6B7F

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: (check only one)		PAGE 53 OF 97	
	<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)  
**ExxonMobile PAC**

Mailing Address 5959 Las Colinas Blvd

City Irving	State TX	Zip Code 75039-4202
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00121368

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  
 12 / 18 / 2017

**Transaction ID : A4589028BD3144A6199D**

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

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**TEACHERS INSURANCE ANNUITY ASSOCIATION OF AMERICA PAC (TIAA PAC)**

Mailing Address 601 THIRTEENTH STREET, NW  
SUITE 700 NORTH

City Washington	State DC	Zip Code 20005-3807
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00431361

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
 \_\_\_\_\_ 6500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 26 / 2017

**Transaction ID : A18CB445E131245C7B72**

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

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**American Council of Engineering Companies PAC**

Mailing Address 1015 15th St. NW  
8th Floor

City Washington	State DC	Zip Code 20005-2643
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FEC ID number of contributing federal political committee. **C** C00010868

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

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  
 12 / 29 / 2017

**Transaction ID : A9B71945B80B1407B9FF**

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶	_____ 3000.00
<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 54 OF 97	
	<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)  
**Honeywell International PAC**

Mailing Address 101 Constitution Ave., NW  
Suite 500 W.

City Washington	State DC	Zip Code 20001-2133
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00096156

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

Receipt For: 2018  
 Primary     General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt  

M M / D D / Y Y Y Y Y Y
11 / 17 / 2017

**Transaction ID : AE5BE4B0CA9204786B74**

Amount of Each Receipt this Period  
500.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**NSSGA ROCKPAC PAC**

Mailing Address 1605 King St

City Alexandria	State VA	Zip Code 22314-2726
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00089458

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

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
12 / 26 / 2017

**Transaction ID : A37AA908A9BE744848DF**

Amount of Each Receipt this Period  
1500.00

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Title Industry Political Action Committee**

Mailing Address 1828 L Street, NW  
Suite 705

City Washington	State DC	Zip Code 20036-5107
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00012914

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
12 / 29 / 2017

**Transaction ID : A790E136456E047E797F**

Amount of Each Receipt this Period  
2500.00

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 55 OF 97	
<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)  
**National Assoc of Home Builders PAC**

Mailing Address 1201 15th St NW

City Washington	State DC	Zip Code 20005-2842
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000901

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  
 11 / 27 / 2017

**Transaction ID : ACDEE854639A64F51AF9**

Amount of Each Receipt this Period  
 3000.00

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).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	102650.00

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

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

FOR LINE NUMBER: PAGE 56 OF 97  
(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)  
**Accident Fund**

Mailing Address PO Box 77000  
Dept 77125

City Detroit State MI Zip Code 48277-2000

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

Name of Employer Occupation

Receipt For: 2018  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
208.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 28 / 2017

Transaction ID : **AD80CFEFDDFEE466E818**

Amount of Each Receipt this Period  
 208.00

Memo Item  
Vendor Refund of Overpayment

**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).....▶	208.00
<b>TOTAL</b> This Period (last page this line number only).....▶	208.00



**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 57 OF 97	
	<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. Accident Fund</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2017
Mailing Address PO Box 77000 Dept 77125		FEC Identification Number C
City Detroit	State MI	Zip Code 48277-2000
Purpose of Disbursement Insurance		Amount of Each Disbursement this Period 613.00
Candidate Name		Transaction ID : BDBD91D233E4D4920A3A
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <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. South Carolina Outdoors</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2017
Mailing Address 4835 Willow Creek Rd.		FEC Identification Number C
City Florence	State SC	Zip Code 29505-9119
Purpose of Disbursement Advertising		Amount of Each Disbursement this Period 2880.00
Candidate Name		Transaction ID : B4E979A8587124DB4BAC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <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>C. Starboard Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2017
Mailing Address 1043 Barr Rd		FEC Identification Number C
City Lexington	State SC	Zip Code 29072-8648
Purpose of Disbursement Direct Mail Production/Printing/Postage		Amount of Each Disbursement this Period 4716.29
Candidate Name		Transaction ID : B8FF9F842A11247F9919
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	8209.29
<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 58 OF 97			
	<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. Winfrey &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2017		
Mailing Address 228 S Washington St Ste B7			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314-5408	Amount of Each Disbursement this Period 1137.45		
Purpose of Disbursement Event Catering/Site Rental/Travel/Shipping		Category/ Type	Transaction ID : BDF6B5A57D4CC468883		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Winfrey &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2017		
Mailing Address 228 S Washington St Ste B7			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314-5408	Amount of Each Disbursement this Period 12639.77		
Purpose of Disbursement Event Catering/Site Rental/Travel/Shipping		Category/ Type	Transaction ID : B52E3323243C944F6A82		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Winfrey &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2017		
Mailing Address 228 S Washington St Ste B7			FEC Identification Number C		
City Alexandria	State VA	Zip Code 22314-5408	Amount of Each Disbursement this Period 7566.70		
Purpose of Disbursement Fundraising Consulting/Travel		Category/ Type	Transaction ID : B3566C6EBD97440CDA5E		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	21343.92
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 97	
	<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 10 / 31 / 2017
Mailing Address 605 19th Ave N		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Payroll Taxes	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 164.86	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B2F63A0A0482746AB91E
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. AccuChecks</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2017
Mailing Address 605 19th Ave N		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Accounting	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 37.85	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B3013B6F45E504D6894A
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Boehm, Cassie, , ,</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2017
Mailing Address PO Box 70098		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572-0020
Purpose of Disbursement Salary	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 456.49	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BAED88DC5F9E4444791A
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	659.20
<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 97	
	<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. Davis, Terra, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2017	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 461.75	
Purpose of Disbursement Salary		Category/Type	Transaction ID : B6955A2923D644910B4D	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Huckaby Davis Lisker</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2017	
Mailing Address 228 S Washington St Ste 115			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314-5404	Amount of Each Disbursement this Period 5263.45	
Purpose of Disbursement Compliance Consulting		Category/Type	Transaction ID : B6E9CCDC1AC8440DBA03	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. The Dunes Club</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2017	
Mailing Address 9000 N Ocean Blvd			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-4424	Amount of Each Disbursement this Period 2264.39	
Purpose of Disbursement Event Catering/Site Rental		Category/Type	Transaction ID : BDC2B32E53CFF4A74B93	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7989.59
<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 97			
	<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 / 30 / 2017		
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 164.86		
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : B8CB3EBEED2A540F1AC5		
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 checked="" type="checkbox"/> Primary <input 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 / 30 / 2017		
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 37.85		
Purpose of Disbursement Accounting		Category/ Type	Transaction ID : B0B531A88D4DC43D1B6F		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Boehm, Cassie, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2017		
Mailing Address PO Box 70098			FEC Identification Number C		
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 456.49		
Purpose of Disbursement Salary		Category/ Type	Transaction ID : BBC4AF2CF009B4A6A94F		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	659.20
<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 97	
	<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. Davis, Terra, , ,</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2017	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 461.75	
Purpose of Disbursement Salary			Transaction ID : B66E2FAB3940F4D76A59	
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 checked="" type="checkbox"/> Primary <input 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 12 / 12 / 2017	
Mailing Address 1043 Barr Rd			FEC Identification Number C	
City Lexington	State SC	Zip Code 29072-8648	Amount of Each Disbursement this Period 1785.80	
Purpose of Disbursement Direct Mail Production/Printing/Postage			Transaction ID : B35B46425B38B4795BF0	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Winfrey &amp; Company</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2017	
Mailing Address 228 S Washington St Ste B7			FEC Identification Number C	
City Alexandria	State VA	Zip Code 22314-5408	Amount of Each Disbursement this Period 1459.60	
Purpose of Disbursement Event Site Rental/Shipping/Travel/Email Service			Transaction ID : B46FB9A62A0784E4596C	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3707.15
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 97			
	<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. South Carolina Outdoors</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2017		
Mailing Address 4835 Willow Creek Rd.			FEC Identification Number C		
City Florence	State SC	Zip Code 29505-9119	Amount of Each Disbursement this Period 3240.00		
Purpose of Disbursement Advertising		Category/ Type	Transaction ID : B6C07AA8E1AF5483A837		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Anedot</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2017		
Mailing Address PO Box 84314			FEC Identification Number C		
City Baton Rouge	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 393.00		
Purpose of Disbursement Online Processing		Category/ Type	Transaction ID : B438FCB4D00084CBFA73		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Square Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2017		
Mailing Address 1455 Market St Ste 600			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94103-1357	Amount of Each Disbursement this Period 52.95		
Purpose of Disbursement Online Processing		Category/ Type	Transaction ID : B67735FBCD6EE4CBF971		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3685.95
<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 97	
	<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. Aristotle</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2017
Mailing Address 205 Pennsylvania Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1164
Purpose of Disbursement Compliance Software		Amount of Each Disbursement this Period 2400.00
Candidate Name		Transaction ID : <b>BF8B0B675D39043C68DB</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <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. Winfrey &amp; Company</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2017
Mailing Address 228 S Washington St Ste B7		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-5408
Purpose of Disbursement Event Catering/Site Rental		Amount of Each Disbursement this Period 1382.54
Candidate Name		Transaction ID : <b>B8A14B83BDBAA43328A5</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <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>C. Citi Card</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
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 5285.28
Candidate Name		Transaction ID : <b>B816F90AF1C64402B8C3</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	9067.82
<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 65 OF 97	
	<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. St. Regis Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 2300 Deer Valley Dr. E			FEC Identification Number C	
City Park City	State UT	Zip Code 84060	Amount of Each Disbursement this Period 241.47	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B3294A619C031419B8F2	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. St. Regis Hotel</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 2300 Deer Valley Dr. E			FEC Identification Number C	
City Park City	State UT	Zip Code 84060	Amount of Each Disbursement this Period 463.16	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B7D7BED16E35B47E9930	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Passport Health</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 8324 E Harford Dr. Suite 103			FEC Identification Number C	
City Scottsdale	State AZ	Zip Code 85255-5466	Amount of Each Disbursement this Period 303.00	
Purpose of Disbursement Health Insurance		Category/Type	Transaction ID : B4E05E8253D2845B283B	
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 checked="" 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).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 97	
	<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. Passport Health</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
Mailing Address 8324 E Harford Dr. Suite 103		FEC Identification Number C
City Scottsdale	State AZ	Zip Code 85255-5466
Purpose of Disbursement Health Insurance		Amount of Each Disbursement this Period 303.00
Candidate Name		Transaction ID : BECBCBD9EF0214B9CA75
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Gogo air</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
Mailing Address 1250 N Arlington Heights Rd.		FEC Identification Number C
City Itasca	State IL	Zip Code 60143-1286
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 49.95
Candidate Name		Transaction ID : B7F6406645A8A44F4AC4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Bistro 217</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
Mailing Address 10707 Ocean Hwy		FEC Identification Number C
City Pawleys Island	State SC	Zip Code 29585-7875
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 57.96
Candidate Name		Transaction ID : B7BAA969A7D7B4AA384B
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

<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 67 OF 97	
	<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. Agua 301</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
Mailing Address 301 Water St. SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-3734
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 124.50
Candidate Name		Transaction ID : BDF7A47C0636546A1B0F
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
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 / 04 / 2017
Mailing Address 551 Seaboard St		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-9733
Purpose of Disbursement Cell Phone		Amount of Each Disbursement this Period 76.75
Candidate Name		Transaction ID : B03CC1E42B9644416ADF
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. National Car Rental</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
Mailing Address 6929 N Lakewood Ave Ste 100		FEC Identification Number C
City Tulsa	State OK	Zip Code 74117-1824
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 284.54
Candidate Name		Transaction ID : BF05297D2BF224C4D87E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <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).....▶	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 68 OF 97	
	<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. Vonage Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 23 Main St			FEC Identification Number C	
City Holmdel	State NJ	Zip Code 07733-2136	Amount of Each Disbursement this Period 20.75	
Purpose of Disbursement Cell Phone		Category/ Type	Transaction ID : B54018F4712C642EB943	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address PO Box 20980 Dept			FEC Identification Number C	
City Atlanta	State GA	Zip Code 30320-0980	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BB5CFF353D1F84D2EABE	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
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 / 04 / 2017	
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 315.61	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B3C0DA375030A4CFF8C3	
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 checked="" 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).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 97	
	<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. The Oak Table</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
Mailing Address 1221 Main St.		FEC Identification Number C
City Columbia	State SC	Zip Code 29201-3231
Purpose of Disbursement Event Catering	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 319.08	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B74AF88E55ED04AE1913 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Oak Table</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
Mailing Address 1221 Main St.		FEC Identification Number C
City Columbia	State SC	Zip Code 29201-3231
Purpose of Disbursement Meeting Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 35.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B86F185940D064921839 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
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 42.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B4ECD7A37B5A649D3AA0 <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 70 OF 97			
	<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. Victors Bistro &amp; Garden Room</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017		
Mailing Address 1247 S Irby St			FEC Identification Number C		
City Florence	State SC	Zip Code 29505-2754	Amount of Each Disbursement this Period 101.30		
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : BF8514F68867B4F1FAC6		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Victors Bistro &amp; Garden Room</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017		
Mailing Address 1247 S Irby St			FEC Identification Number C		
City Florence	State SC	Zip Code 29505-2754	Amount of Each Disbursement this Period 15.20		
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B4BB1464D20B34BE1B8A		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Victors Bistro &amp; Garden Room</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017		
Mailing Address 1247 S Irby St			FEC Identification Number C		
City Florence	State SC	Zip Code 29505-2754	Amount of Each Disbursement this Period 114.70		
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : BE80E3B72AB934C3FA6B		
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 checked="" 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).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 97	
	<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. Victors Bistro &amp; Garden Room</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 1247 S Irby St			FEC Identification Number C	
City Florence	State SC	Zip Code 29505-2754	Amount of Each Disbursement this Period 65.20	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B679871AD290F4DD7AAB	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Dunkin Donuts</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 2123 W Evans St.			FEC Identification Number C	
City Florence	State SC	Zip Code 29501-4007	Amount of Each Disbursement this Period 80.19	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B86DFF0A58C33429F80F	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Dunkin Donuts</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 2123 W Evans St.			FEC Identification Number C	
City Florence	State SC	Zip Code 29501-4007	Amount of Each Disbursement this Period 71.87	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : B20ACCFD778E34A7589E	
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 checked="" 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).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 97			
	<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. Dunkin Donuts</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017		
Mailing Address 2123 W Evans St.			FEC Identification Number C		
City Florence	State SC	Zip Code 29501-4007	Amount of Each Disbursement this Period 54.96		
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : B01CE9F78F4174264B7A		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Dunkin Donuts</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017		
Mailing Address 2123 W Evans St.			FEC Identification Number C		
City Florence	State SC	Zip Code 29501-4007	Amount of Each Disbursement this Period 54.96		
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B278D961C70B14B70BD7		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>C. Dunkin Donuts</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017		
Mailing Address 2123 W Evans St.			FEC Identification Number C		
City Florence	State SC	Zip Code 29501-4007	Amount of Each Disbursement this Period 82.44		
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : BBD2622C020AA406B8FB		
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 checked="" 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).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 97	
	<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. HARRIS TEETER</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address US 76 Cashua DR.			FEC Identification Number C	
City Florence	State SC	Zip Code 29501	Amount of Each Disbursement this Period 38.51	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : BA97919B0D0E74D22BA0	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Bright and Beautiful</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017	
Mailing Address 9902 N Kings Hwy Ste B			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-4049	Amount of Each Disbursement this Period 145.80	
Purpose of Disbursement Flowers		Category/ Type	Transaction ID : B451AE8AA0A094BD4816	
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 checked="" type="checkbox"/> Primary <input 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 / 04 / 2017	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 418.91	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B635DA21420B44D38B24	
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 checked="" 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).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 97			
	<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. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017		
Mailing Address 300 1st St SE			FEC Identification Number C		
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 107.07		
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B94DD300E9D57465B99B		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017		
Mailing Address 182 Howard St # 8			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 12.79		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B93EC06BFD1B04CDCAA9		
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017		
Mailing Address 182 Howard St # 8			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 9.29		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B504EF4DE25E24B30ACC		
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 checked="" 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).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 97	
	<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. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
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 14.84	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BD6F4564660C34EAE9FB
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 / 04 / 2017
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 2.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BEAAE024B0DF9404A8AC
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. New Congressional Liquor</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
Mailing Address 404 First St. NE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Event Catering	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 14.29	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B73F2B20987A147138DB
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 76 OF 97	
	<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. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
Mailing Address 2512 Virginia Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20037-9997
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 198.00
Candidate Name		Transaction ID : B586E9945E89343B18D4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Palmetto Family Council</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2017
Mailing Address 1414 Lady St.		FEC Identification Number C
City Columbia	State SC	Zip Code 29201-3304
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 500.00
Candidate Name		Transaction ID : B3FAD00CD56B44FD8B8E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input 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 12 / 05 / 2017
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 12298.03
Candidate Name		Transaction ID : B70341E736B9F4C599C8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	12298.03
<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 77 OF 97	
	<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. Exxon Mobile</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017
Mailing Address 24264 Highway 17		FEC Identification Number C
City Garden City	State SC	Zip Code 29576
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 30.01	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B39D66058044A4854A5D
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Office Depot</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017
Mailing Address 2301 N Kings Hwy		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3040
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 233.98	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B8E6E17A0F52A4BA0B9E
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Crave</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017
Mailing Address 7101 Democracy Blvd		FEC Identification Number C
City Bethesda	State MD	Zip Code 20817-1018
Purpose of Disbursement Event Catering	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 250.74	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B92BF90A7B6524761835
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 78 OF 97	
	<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. Crave</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
Mailing Address 7101 Democracy Blvd			FEC Identification Number C	
City Bethesda	State MD	Zip Code 20817-1018	Amount of Each Disbursement this Period 56.83	
Purpose of Disbursement Meeting Expense		Category/Type	Transaction ID : B3490A798831D4A5284D	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Capitol Host</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
Mailing Address Rm B-339B Rayburn House Office Bld Rm			FEC Identification Number C	
City Washington	State DC	Zip Code 20515-0001	Amount of Each Disbursement this Period 132.55	
Purpose of Disbursement Meeting Expense		Category/Type	Transaction ID : BE5D4EAE76CA342418AD	
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 checked="" type="checkbox"/> Primary <input 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 12 / 05 / 2017	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 215.00	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : B34CC2B2DBF544B2D803	
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 checked="" 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).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 97	
	<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. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017
Mailing Address 2512 Virginia Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20037-9997
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 1213.00
Candidate Name		Transaction ID : B90E426C14DBF4225A17
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" 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 12 / 05 / 2017
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 7.90
Candidate Name		Transaction ID : B9F0A1870A31A4614828
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017
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 17.37
Candidate Name		Transaction ID : B118CE39F5EB04ACEAE0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <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).....▶	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 80 OF 97	
	<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. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017
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 10.43	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B244CDFC48F0D481D80E
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 12 / 05 / 2017
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 7.90	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9DC760826C6F4BCFA01
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. BP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017
Mailing Address 823 Pennsylvania Ave. SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-2155
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 25.03	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BC5B935D365274051B74
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 81 OF 97	
	<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. HARRIS TEETER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017
Mailing Address US 76 Cashua DR.		FEC Identification Number C
City Florence	State SC	Zip Code 29501
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 72.49
Candidate Name		Transaction ID : BFACCF A0C97864F85BF D
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017
Mailing Address 300 1st St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1801
Purpose of Disbursement Event Catering		Amount of Each Disbursement this Period 284.09
Candidate Name		Transaction ID : BE4BD3FB5C7964AF4992
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. We The Pizza</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017
Mailing Address 305 Pennsylvania Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1148
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 66.60
Candidate Name		Transaction ID : B7450D26C9A9845F48F9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

<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 82 OF 97	
	<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. Victors Bistro &amp; Garden Room</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
Mailing Address 1247 S Irby St			FEC Identification Number C	
City Florence	State SC	Zip Code 29505-2754	Amount of Each Disbursement this Period 7589.44	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : BC7F73DF4741A469BA1A	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. FedEx</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
Mailing Address 258 Highway 17 N			FEC Identification Number C	
City North Myrtle Beach	State SC	Zip Code 29582-2938	Amount of Each Disbursement this Period 92.64	
Purpose of Disbursement Shipping		Category/Type	Transaction ID : B792996C9CB8D4CB594B	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
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 25.00	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B030D3DD4929A46E7B37	
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 checked="" 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).....▶	

**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 83 OF 97	
	<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 12 / 05 / 2017	
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 63.90	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BB67E240998084CA8851	
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input 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. Vonage Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
Mailing Address 23 Main St			FEC Identification Number C	
City Holmdel	State NJ	Zip Code 07733-2136	Amount of Each Disbursement this Period 20.97	
Purpose of Disbursement Cell Phone		Category/ Type	Transaction ID : B392BCDC387744D18A7C	
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input 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. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
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 299.60	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B49D918A481484BBCBB0	
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input 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 84 OF 97	
	<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. National Car Rental</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
Mailing Address 6929 N Lakewood Ave Ste 100			FEC Identification Number C	
City Tulsa	State OK	Zip Code 74117-1824	Amount of Each Disbursement this Period 410.52	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B1CEDD67AE2E8444D8B5	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. National Car Rental</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
Mailing Address 6929 N Lakewood Ave Ste 100			FEC Identification Number C	
City Tulsa	State OK	Zip Code 74117-1824	Amount of Each Disbursement this Period 428.94	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B61A585C5938E4FB284D	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
Mailing Address 551 Seaboard St			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-9733	Amount of Each Disbursement this Period 209.25	
Purpose of Disbursement Cell Phone		Category/ Type	Transaction ID : B01C31EDE80534612AFF	
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 checked="" 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).....▶	

**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 85 OF 97	
	<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. Uline</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
Mailing Address PO Box 88741			FEC Identification Number C	
City Chicago	State IL	Zip Code 60680-1741	Amount of Each Disbursement this Period 132.28	
Purpose of Disbursement Shipping		Category/ Type	Transaction ID : BC2489994D5D143ADB2	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Gogo air</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2017	
Mailing Address 1250 N Arlington Heights Rd.			FEC Identification Number C	
City Itasca	State IL	Zip Code 60143-1286	Amount of Each Disbursement this Period 49.95	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B445A4F49296147DAA81	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
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 / 06 / 2017	
Mailing Address PO Box 9001037			FEC Identification Number C	
City Louisville	State KY	Zip Code 40290-1037	Amount of Each Disbursement this Period 4681.61	
Purpose of Disbursement Credit Card Payment- See Memos		Category/ Type	Transaction ID : B0EDCA8B2754940FEBB5	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4681.61
<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 86 OF 97	
	<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. Gogo air</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B35CED08F08754CB5A69
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Paypal</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
Mailing Address 1840 Embarcadero Rd.		FEC Identification Number C
City Palo Alto	State CA	Zip Code 94303-3308
Purpose of Disbursement Online Service	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 490.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BD8F50110C811402CA50
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>c. Agua 301</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
Mailing Address 301 Water St. SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-3734
Purpose of Disbursement Meeting Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 160.30	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9896136AC5C6486993D
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 87 OF 97	
	<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. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 551 Seaboard St			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-9733	Amount of Each Disbursement this Period 98.97	
Purpose of Disbursement Cell Phone		Category/ Type	Transaction ID : B8A482E69F30843379A6	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. OSU Gift Online</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 1480 West Lane Ave.			FEC Identification Number C	
City Columbus	State OH	Zip Code 43221-3919	Amount of Each Disbursement this Period 204.00	
Purpose of Disbursement Memorabilia		Category/ Type	Transaction ID : B3E30DF72E2F54F359C5	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
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 313.50	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BF9E5C064BCDB47E28D4	
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 checked="" 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).....▶	

**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 88 OF 97	
	<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. Vonage Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
Mailing Address 23 Main St		FEC Identification Number C
City Holmdel	State NJ	Zip Code 07733-2136
Purpose of Disbursement Cell Phone		Amount of Each Disbursement this Period 20.97
Candidate Name	Category/ Type	Transaction ID : <b>BDDB47DFFD42D4E90BA3</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capital Grille</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
Mailing Address 601 Pennsylvania Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4303
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 128.90
Candidate Name	Category/ Type	Transaction ID : <b>BDEC9AD4941B54245BE9</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input 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 11 / 06 / 2017
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 280.30
Candidate Name	Category/ Type	Transaction ID : <b>B8C52F89201C74F3A8D0</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <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).....▶	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 89 OF 97	
	<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. Bullfeathers</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 410 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1819	Amount of Each Disbursement this Period 185.53	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : BC8E0697FB14C4648819	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
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 / 06 / 2017	
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 63.83	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BF5F864ADE7114FFD84A	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. FedEx</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 258 Highway 17 N			FEC Identification Number C	
City North Myrtle Beach	State SC	Zip Code 29582-2938	Amount of Each Disbursement this Period 19.17	
Purpose of Disbursement Shiping		Category/ Type	Transaction ID : BD51A750E8E364456A51	
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 checked="" 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).....▶	

**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 90 OF 97	
	<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 11 / 06 / 2017	
Mailing Address 258 Highway 17 N			FEC Identification Number C	
City North Myrtle Beach	State SC	Zip Code 29582-2938	Amount of Each Disbursement this Period 70.77	
Purpose of Disbursement Shiping		Category/ Type	Transaction ID : B43351202C8B44657AE8	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Carmine's</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 425 7th St. NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20004-2229	Amount of Each Disbursement this Period 315.93	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B1A7123230A1C4A108B2	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Lustre Cleaners</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 2030 P St. NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20036-6905	Amount of Each Disbursement this Period 300.00	
Purpose of Disbursement Cleaning Service		Category/ Type	Transaction ID : BAFF2F09ADD1D4C34822	
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 checked="" 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).....▶	

**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 91 OF 97	
	<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. Frontier Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 7001 Tower Rd.			FEC Identification Number C	
City Denver	State CO	Zip Code 80249-7312	Amount of Each Disbursement this Period 380.95	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B64EEC1A8715E44B083A	
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input 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. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 10.70	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B0F17A8A77B3244C3B85	
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input 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. Uber</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 2.28	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B7FB22082776A43C9A92	
Candidate Name		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input 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 92 OF 97	
	<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. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
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 9.73	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B024E93A0EE764F68B74 <input checked="" 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 11 / 06 / 2017
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 9.29	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B6ACAD406E3664D42A90 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Uber</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
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 16.36	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B7680B55C383C4C3C820 <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 93 OF 97	
	<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. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 254.43	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : BD3E63879AD93477E8F7	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. USPS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 2512 Virginia Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20037-9997	Amount of Each Disbursement this Period 7.80	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : B8AEC0FF7864E4EE08CF	
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 checked="" type="checkbox"/> Primary <input 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 11 / 06 / 2017	
Mailing Address 2512 Virginia Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20037-9997	Amount of Each Disbursement this Period 49.00	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : BDE9AB611E50B4F93923	
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 checked="" 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).....▶	

**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 94 OF 97	
	<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. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
Mailing Address 2512 Virginia Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20037-9997
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 24.85
Candidate Name		Transaction ID : B93693191DEAA4AF6B67
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Host</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
Mailing Address Rm B-339B Rayburn House Office Bld Rm		FEC Identification Number C
City Washington	State DC	Zip Code 20515-0001
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 20.90
Candidate Name		Transaction ID : B625ADA974780457B92E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Host</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
Mailing Address Rm B-339B Rayburn House Office Bld Rm		FEC Identification Number C
City Washington	State DC	Zip Code 20515-0001
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 69.80
Candidate Name		Transaction ID : B0551288455BD41519D5
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <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).....▶	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 95 OF 97	
	<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. Capitol Host</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017
Mailing Address Rm B-339B Rayburn House Office Bld Rm		FEC Identification Number C
City Washington	State DC	Zip Code 20515-0001
Purpose of Disbursement Meeting Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 90.75	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BDDA44249BE274B82BDF
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 11 / 06 / 2017
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 14.47	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B0ACDFBF05C3F429DBC6
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 11 / 06 / 2017
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 11.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BB98B1E2AAB6E4BF5B64
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 96 OF 97	
	<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. Office Depot</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 2301 N Kings Hwy			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-3040	Amount of Each Disbursement this Period 33.77	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : B5593331F678F44B585E	
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 checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Amazon</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2017	
Mailing Address 1516 2nd Ave N			FEC Identification Number C	
City Seattle	State WA	Zip Code 98109-3171	Amount of Each Disbursement this Period 64.92	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : B52792152A1424124993	
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 checked="" 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).....▶	72301.76



# 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)  
 17  
20a     18  
20b     19a  
20c     19b  
21

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

Full Name (Last, First, Middle Initial)  
**A. First Presbyterian Church- Mary Catherine Rawlinson Fund**

Mailing Address 700 Park Ave.

City Florence State SC Zip Code 29501-5149

Purpose of Disbursement Charitable Contribution

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 19 / 2017

FEC Identification Number  
C

Amount of Each Disbursement this Period  
1000.00

Transaction ID : B8223F31B1FB9424EB88

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y

FEC Identification Number  
C

Amount of Each Disbursement this Period

Memo Item

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