

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) 1107 48th Ave., N. Suite 310-A Myrtle Beach SC 29577 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00506048 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT SC

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 06 / 10 / 2014 in the State of SC (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on / / in the State of

5. Covering Period 04 / 01 / 2014 through 05 / 21 / 2014

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

Type or Print Name of Treasurer J. Wakefield

Signature of Treasurer J. Wakefield [Electronically Filed] Date 05 / 28 / 2014

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

Office Use Only grid and FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
TOM RICE FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	101125.00	722797.33
(b) Total Contribution Refunds (from Line 20(d))	5200.00	7850.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	95925.00	714947.33
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	34261.09	429611.62
(b) Total Offsets to Operating Expenditures (from Line 14).....	44.00	824.41
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	34217.09	428787.21
8. Cash on Hand at Close of Reporting Period (from Line 27).....	321823.51	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	24000.00	

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 12/2003)

Write or Type Committee Name

TOM RICE FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	66200.00	397660.05
(ii) Unitemized.....	3425.00	9348.00
(iii) TOTAL of contributions from individuals ▶	69625.00	407008.05
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	31500.00	315789.28
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	101125.00	722797.33
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	44.00	824.41
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	101169.00	723621.74

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	34261.09	429611.62
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	76000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	76000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	5200.00	5850.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	5200.00	7850.00
21. OTHER DISBURSEMENTS	36800.00	129355.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	76261.09	642816.62

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	296915.60
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	101169.00
25. SUBTOTAL (add Line 23 and Line 24).....	398084.60
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	76261.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	321823.51

**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 5 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Clay Brittain III

Mailing Address 5614 Pinckney Ave

City	State	Zip Code
Myrtle Beach	SC	29577-2226

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : AAA9E059696174505A39

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Jeffrey C Lynn

Mailing Address 528 Lakeside Ct

City	State	Zip Code
Dillon	SC	29536-1955

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

Name of Employer	Occupation
Dillon Tractor Supply	Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : A07BBCE6E18C14DB0B2C

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
David S. Pankau

Mailing Address 17 Fox Chase Rd

City	State	Zip Code
Columbia	SC	29223-3005

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

Name of Employer	Occupation
Blue Cross Blue Shield Sc	Medical

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2014

Transaction ID : A1F05D67BF7A340E182E

Amount of Each Receipt this Period

1600.00

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

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

3100.00

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

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

FOR LINE NUMBER: PAGE 6 OF 65
(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)
Darrell L. Conner

Mailing Address 3105 Wynford Drive

City State Zip Code
Fairfax VA 22031-2825

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

Name of Employer Occupation
K&L Gates Government Affairs Counselor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 02 / 2014

Transaction ID : A17EBB5E7725D4027BD8

Amount of Each Receipt this Period
 250.00

250.00

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

Mailing Address 203 Waties Dr

City State Zip Code
Murrells Inlet SC 29576-7074

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : A604BFA15981243BEB78

Amount of Each Receipt this Period
 1000.00

1000.00

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

Mailing Address 2966 Carlton Ave NE

City State Zip Code
Washington DC 20018-2616

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

Name of Employer Occupation
Cornerstone Government Affairs Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : AF5DDBA73BA314F2B8AB

Amount of Each Receipt this Period
 250.00

250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ann Lill

Mailing Address 802 Mast Ct

City Murrells Inlet State SC Zip Code 29576-8727

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1800.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : AEB3DCA3AEA2642E0966

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Rickie G. Lemay

Mailing Address 4703 N Ocean Blvd.

City Myrtle Beach State SC Zip Code 29577-2548

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

Name of Employer Self Occupation Accountant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : A2D997CF0A76B4Aafb23

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Leroy Nettles Jr.

Mailing Address 638 Camelot Rd

City Lake City State SC Zip Code 29560-4060

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

Name of Employer Pee Dee Electric Cooperative Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 09 / 2014

Transaction ID : AB58AE4B884494B19BC0

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Arthur H Lachicotte		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 1 King Arthurs Ct		Transaction ID : AFEA38F04CAC54A74AA8	
City Pawleys Island	State SC	Zip Code 29585-6116	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Lachicotte Realty	Occupation Real Estate Sales		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00		

Full Name (Last, First, Middle Initial) B. Matthew Brittain		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 5633 Woodside Ave		Transaction ID : AFF28C090C4FA4C34A3D	
City Myrtle Beach	State SC	Zip Code 29577-2245	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00	
Name of Employer M.b. National	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4500.00		

Full Name (Last, First, Middle Initial) C. Tina Yates		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 815 Saint Charles Rd		Transaction ID : A0384E63021F84B8484D	
City North Myrtle Beach	State SC	Zip Code 29582-2845	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer Hoskins Restaurant	Occupation Owner		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. Roddy Swaim

Mailing Address 460 Rum Gully Rd

City	State	Zip Code
Murrells Inlet	SC	29576-7725

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

Name of Employer	Occupation
Dunes Realty	Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		28		2014

Transaction ID : A37ED5D2A98DE43FDAB2

Amount of Each Receipt this Period

1000.00

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

Mailing Address 1570 Brookgreen Dr

City	State	Zip Code
Myrtle Beach	SC	29577-5870

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

Name of Employer	Occupation
Self Employed	Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		15		2014

Transaction ID : ABFB48177082042A0884

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Edward M. Rast Jr.

Mailing Address 8256 Old State Road

City	State	Zip Code
Cameron	SC	29030-8110

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

Name of Employer	Occupation
Self Employed	Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		14		2014

Transaction ID : AFFB8D2AB79864AE2B01

Amount of Each Receipt this Period

1000.00

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 10 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 125 Highway 501 W

City Galivants Ferry	State SC	Zip Code 29544-7601
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Devloper
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 15 / 2014

Transaction ID : A3FF731CBD7104228947

Amount of Each Receipt this Period
500.00

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

Mailing Address PO Box 1290

City Myrtle Beach	State SC	Zip Code 29578-1290
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FEC ID number of contributing federal political committee. **C**

Name of Employer Thompson & Henry, Pa	Occupation Attorney
--	------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : A575BDD766B394978B2E

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. William Gairy Nichols III

Mailing Address 128 Atlantic Ave

City Murrells Inlet	State SC	Zip Code 29576-8008
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FEC ID number of contributing federal political committee. **C**

Name of Employer Dunes Realty	Occupation Realtor
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : AFD357C7CBCD6466F9B6

Amount of Each Receipt this Period
1000.00

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: (check only one)	PAGE 11 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Wyman Wise

Mailing Address 3311 Highway 9 E

City Little River State SC Zip Code 29566-6831

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

Name of Employer State Farm Insurance Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : A5905EA602EC14372A04

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1907 Hamilton Cross Rd

City Marshville State NC Zip Code 28103-9097

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A5869E85D63364B909F5

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Frank B. Rogers 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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A58481A82A0454194AB4

Amount of Each Receipt this Period
 1000.00

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 12 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David Boyd Owens

Mailing Address 6966 Front Street

City Mullins State SC Zip Code 29574-6618

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : ADF8ED78695384770BC0

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Bobby Anderson

Mailing Address 2600 N Ocean Blvd

City Myrtle Beach State SC Zip Code 29577-3239

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

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : AC3A3656612CF4D21852

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
E J Servant III

Mailing Address 213 S Ocean Blvd

City Murrells Inlet State SC Zip Code 29576

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

Name of Employer Surfside Realty Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2014

Transaction ID : A3426B8B6812A4995AB1

Amount of Each Receipt this Period
 1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 7900 Highway 917

City Nichols	State SC	Zip Code 29581-3253
-----------------	-------------	------------------------

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : AEA6E0ADD05144F48AFE

Amount of Each Receipt this Period

1000.00

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

Mailing Address 261 Spool Wheel Road

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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A0E2F7C1197A04B6EBCB

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Hoyt C Bellamy Jr.

Mailing Address 5808 Canterbury Ln

City Myrtle Beach	State SC	Zip Code 29577-2208
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FEC ID number of contributing federal political committee. **C**

Name of Employer Accuchex	Occupation President
------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : A510634C329D240C5BD6

Amount of Each Receipt this Period

500.00

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

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

2500.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 14 OF 65

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Hoyt C Bellamy Jr.
 Mailing Address 5808 Canterbury Ln
 City State Zip Code
 Myrtle Beach SC 29577-2208
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Accuchex President
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014
Transaction ID : A386E17AE9C2E430EB77
 Amount of Each Receipt this Period
 500.00
 3100.00

B. Full Name (Last, First, Middle Initial)
Larry Paul
 Mailing Address PO Box 1037
 City State Zip Code
 Conway SC 29528-1037
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Lwp&a Investor
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 09 / 2014
Transaction ID : A25232EB021814DD28C0
 Amount of Each Receipt this Period
 2600.00
 5000.00

C. Full Name (Last, First, Middle Initial)
Joseph Landrum
 Mailing Address 320 Scotland Road
 City State Zip Code
 Lake City SC 29560-4021
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self Employed Self Employed
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014
Transaction ID : AA12FAA9909074B69889
 Amount of Each Receipt this Period
 1000.00
 1000.00

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

4100.00

**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 65
(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)
Donald Fisher

Mailing Address 4403 Fisher Road

City Mullins State SC Zip Code 29574-6717

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : AC3BECD2898B94370B98

Amount of Each Receipt this Period
 250.00

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

Mailing Address 4600 N Kings Hwy

City Myrtle Beach State SC Zip Code 29577-2769

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

Name of Employer Retired Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 02 / 2014

Transaction ID : A7FDD7A96371D459EB65

Amount of Each Receipt this Period
 500.00

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

Mailing Address 9356B Highway 17 Byp

City Murrells Inlet State SC Zip Code 29576-9328

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

Name of Employer Bec Const Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2014

Transaction ID : A8432C3B8627046FDA55

Amount of Each Receipt this Period
 250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Skeeter Nash		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 547 S Creekside Dr		Transaction ID : A01459FDBC85B4F40854	
City Murrells Inlet	State SC	Zip Code 29576-6001	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Seaside Realty	Occupation Realtor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) B. Steven Neal Baxley Jr.		Date of Receipt M M / D D / Y Y Y Y 04 / 14 / 2014	
Mailing Address 206 Hanover Road		Transaction ID : A2A80780FD18242118E3	
City Marion	State SC	Zip Code 29571	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Self Employed	Occupation Farmer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) C. Larry Paul		Date of Receipt M M / D D / Y Y Y Y 04 / 09 / 2014	
Mailing Address PO Box 1037		Transaction ID : A08B155327A074A109A3	
City Conway	State SC	Zip Code 29528-1037	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00	
Name of Employer Lwp&a	Occupation Investor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

SUBTOTAL of Receipts This Page (optional).....	3900.00
TOTAL This Period (last page this line number only).....	3900.00

**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 17 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mr. Jimmy David Poston

Mailing Address 4472 Mill House Road

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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A71C56673C8014D508B2

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Floyd Johnson Jr.

Mailing Address 1937 Highway 917 East

City Latta State SC Zip Code 29565-4101

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

Name of Employer Self Employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A7BCDB15B16C947E7B93

Amount of Each Receipt this Period
 250.00

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

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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A4C4BC39EAD5A447C9DF

Amount of Each Receipt this Period
 1000.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 18 OF 65
(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)
Michael Clayton

Mailing Address 8008 Cortona Dr

City State Zip Code
Myrtle Beach SC 29572-8002

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

Name of Employer Occupation
Morgan Lewis Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : A4A7106CE64094DF6951

Amount of Each Receipt this Period
2500.00

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

Mailing Address 5633 Woodside Ave

City State Zip Code
Myrtle Beach SC 29577-2245

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

Name of Employer Occupation
M.b. National President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : A7A863A9404F74A2F80F

Amount of Each Receipt this Period
1900.00

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

Mailing Address 1403 Highland Cir

City State Zip Code
Myrtle Beach SC 29575-5858

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

Name of Employer Occupation
The Jackson Companies President & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : A5805B6F037DD4497A4E

Amount of Each Receipt this Period
1000.00

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John Springs

Mailing Address 411 Rum Gully Rd

City Murrells Inlet State SC Zip Code 29576-7730

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

Name of Employer Ponderosa, Inc. Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : A75661A50CF2949D6A41

Amount of Each Receipt this Period
 500.00

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

Mailing Address PO Box 536

City Nichols State SC Zip Code 29581-0536

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

Name of Employer Information Requested Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A8787818537764551869

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Zeb M. Thomas Jr.

Mailing Address 404 35th Ave N

City Myrtle Beach State SC Zip Code 29577-2918

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

Name of Employer Parker Poe Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2014

Transaction ID : A583FF1778B134333911

Amount of Each Receipt this Period
 500.00

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: (check only one)	PAGE 20 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tina Yates		Date of Receipt M M / D D / Y Y Y Y 05 / 15 / 2014	
Mailing Address 815 Saint Charles Rd		Transaction ID : AA881CECCE7AE4595B24	
City North Myrtle Beach	State SC	Zip Code 29582-2845	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00	
Name of Employer Hoskins Restaurant	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) B. Charles Taylor		Date of Receipt M M / D D / Y Y Y Y 04 / 14 / 2014	
Mailing Address 2050 Summer Road		Transaction ID : AE8576C2B1DC84A0FB7C	
City Dillon	State SC	Zip Code 29536-6108	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self Employed	Occupation Self Employed		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Sharon Clayton		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2014	
Mailing Address 8008 Cortona Dr		Transaction ID : A312499180B8A46518AC	
City Myrtle Beach	State SC	Zip Code 29572-8002	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

SUBTOTAL of Receipts This Page (optional).....	3350.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 1027 Dr. Hardy Circle

City State Zip Code
Dillon SC 29536

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

Name of Employer Occupation
Dillon Tractor Supply Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : AB7ABE578D6174B46BBF

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ethel A Nobles

Mailing Address 6995 Lester Street SW

City State Zip Code
Ocean Isle Beach NC 28469-5727

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A4D01141CA220416C9B4

Amount of Each Receipt this Period
1000.00

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

Mailing Address 500 Nautilus Dr

City State Zip Code
Murrells Inlet SC 29576-7030

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : A7C2E392260194D729EE

Amount of Each Receipt this Period
2600.00

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

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

4100.00

**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 22 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Brian C Harsha

Mailing Address 6 Bryan Pl

City State Zip Code
Myrtle Beach SC 29572-4402

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

Name of Employer Occupation
Self Employed Oral Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : AA8738F2955444554B0C

Amount of Each Receipt this Period
2100.00

B. Full Name (Last, First, Middle Initial)
David S. Pankau

Mailing Address 17 Fox Chase Rd

City State Zip Code
Columbia SC 29223-3005

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

Name of Employer Occupation
Blue Cross Blue Shield Sc Medical

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : A0E473ED74A6F4E24A4B

Amount of Each Receipt this Period
900.00

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

Mailing Address 2560 Bryant Rd

City State Zip Code
Dillon SC 29536-7412

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

Name of Employer Occupation
Bryant Farms Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 09 / 2014

Transaction ID : A63FD03816BA247E99BA

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 4220 Siwel Rd

City Conway	State SC	Zip Code 29526-6418
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FEC ID number of contributing federal political committee. **C**

Name of Employer Horry County Cooperative	Occupation Executive VP
--	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 09 / 2014

Transaction ID : A18E33A0139A04637AC2

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
David S. Pankau

Mailing Address 17 Fox Chase Rd

City Columbia	State SC	Zip Code 29223-3005
------------------	-------------	------------------------

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

Name of Employer Blue Cross Blue Shield Sc	Occupation Medical
---	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : AE43DE8C47E8B4F16943

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Richard W Young

Mailing Address 1970 Arundel Rd

City Myrtle Beach	State SC	Zip Code 29577-5964
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FEC ID number of contributing federal political committee. **C**

Name of Employer Atlantic Urology	Occupation Surgeon
--------------------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : AEC3C94AF7DDF403996C

Amount of Each Receipt this Period

1000.00

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 24 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Brian C Harsha

Mailing Address 6 Bryan Pl

City Myrtle Beach State SC Zip Code 29572-4402

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

Name of Employer Self Employed Occupation Oral Surgeon

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : A02A7FD132A5341598A4

Amount of Each Receipt this Period
400.00

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

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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2014

Transaction ID : A0177799071FF4B1A833

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Fred W. Garner

Mailing Address 20592 Seahawk Landing

City Smithfield State VA Zip Code 23430-8113

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

Name of Employer Birdsong Peanuts Occupation Self Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2014

Transaction ID : A1AA848CCED7D46099E9

Amount of Each Receipt this Period
1000.00

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

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

2400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James C. Rawl

Mailing Address 747 Calks Ferry Road

City	State	Zip Code
Lexington	SC	29072-8618

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

Name of Employer	Occupation
Clayton Rawl Farms, Inc.	Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 02 / 2014

Transaction ID : AE8D85F79AE8C408DAD5

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1118 Willow Brook PI

City	State	Zip Code
Mullins	SC	29574-6192

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

Name of Employer	Occupation
Self	Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : A1054D72D5B8D4168A52

Amount of Each Receipt this Period
1000.00

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

Mailing Address 500 Nautilus Dr

City	State	Zip Code
Murrells Inlet	SC	29576-7030

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 12 / 2014

Transaction ID : A39A8EE063E684ECD9D9

Amount of Each Receipt this Period
2600.00

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

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

4600.00

**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 26 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Titan Farms

Mailing Address 5 RW Dubose & Son Rd

City State Zip Code
Ridge Springs SC 29129-0000

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : A0298A797488E4575B65

Amount of Each Receipt this Period
100.00

See Partner Memo

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

Mailing Address 5 R W Dubose Rd

City State Zip Code
Ridge Spring SC 29129-9552

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

Name of Employer Occupation
Titan Farms President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : A2A17C789B5A24A23BBE

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Partnership: Titan Farms

C. Full Name (Last, First, Middle Initial)
Mickey Ward Farms

Mailing Address 501 Welch Road

City State Zip Code
Timmons ville SC 29161-9676

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : A404613004D984686864

Amount of Each Receipt this Period
1000.00

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mickey Ward

Mailing Address 501 Welch Road

City	State	Zip Code
Timmonsville	SC	29161-9676

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

Name of Employer	Occupation
Self Employed	Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : ACFEA13E893E440D6AA9

Amount of Each Receipt this Period
 1000.00

[MEMO ITEM]
Partnership: Mickey Ward Farms

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

Mailing Address 2045 Timmonsville Highway

City	State	Zip Code
Darlington	SC	29532-7511

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

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : A8BD0189533C74B60A00

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 2045 Timmonsville Highway

City	State	Zip Code
Darlington	SC	29532-7511

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

Name of Employer	Occupation
Self Employed	Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : AC4EC4FE09E514D11948

Amount of Each Receipt this Period
 1000.00

[MEMO ITEM]
Partnership: Galloway Farms

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 65
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Titan Farms

Mailing Address 5 RW Dubose & Son Rd

City State Zip Code
Ridge Springs SC 29129-0000

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : A5C24BB1729BC4AA5A64

Amount of Each Receipt this Period
900.00

See Partner Memo

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

Mailing Address 5 R W Dubose Rd

City State Zip Code
Ridge Spring SC 29129-9552

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

Name of Employer Occupation
Titan Farms President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014

Transaction ID : AB41697A0FC06474DA27

Amount of Each Receipt this Period
900.00

[MEMO ITEM]
Partnership: Titan Farms

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

900.00

66200.00

**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 29 OF 65
	<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	

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)
American Forest & Paper Association PAC

Mailing Address 1101 K Street NW
Suite 700

City Washington State DC Zip Code 20005-4210

FEC ID number of contributing federal political committee. **C C00029348**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 12 / 2014

Transaction ID : A20CD32A65931478980F

Amount of Each Receipt this Period
2000.00

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

Mailing Address 1301 K St NW
Suite 800 West

City Washington State DC Zip Code 20005-3317

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : A88FA9996E0554C35A35

Amount of Each Receipt this Period
3500.00

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

Mailing Address 1120 Connecticut Ave NW

City Washington State DC Zip Code 20036-3905

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 15 / 2014

Transaction ID : A6D269130E2E14FF18E8

Amount of Each Receipt this Period
1500.00

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 30 OF 65
	<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	

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)
BNSF Railpac

Mailing Address P.O. Box 961039

City State Zip Code
Fort Worth TX 76161-0039

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : A47734747743D4D18BD3

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Action Committee for Rural Electrification PAC

Mailing Address 4301 Wilson Blvd.

City State Zip Code
Arlington VA 22203-1867

FEC ID number of contributing federal political committee. **C** C00002972

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : AE1F83CDA83304713968

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Koch Industries, Inc. PAC

Mailing Address 600 14th Street NW
Suite 800

City State Zip Code
Washington DC 20005-2099

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 07 / 2014

Transaction ID : A84157A1134C74A80ACD

Amount of Each Receipt this Period
1500.00

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 31 OF 65
	<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)
American Bankers Association PAC

Mailing Address 1120 Connecticut Ave NW

City Washington State DC Zip Code 20036-3905

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 08 / 2014

Transaction ID : A392815C7C20E4BAE840

Amount of Each Receipt this Period
1000.00

B. 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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : A66AF364822064201B67

Amount of Each Receipt this Period
4000.00

C. Full Name (Last, First, Middle Initial)
Farm Credit Council Political Action Committee

Mailing Address 50 F Street, NW Suite 900

City Washington State DC Zip Code 20001-1530

FEC ID number of contributing federal political committee. **C C00193631**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : A53E32728E90B4BD5BE3

Amount of Each Receipt this Period
1000.00

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

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

6000.00

**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 32 OF 65
	<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)
Committee for the Advancement of Southeast Cotton

Mailing Address 139 Prominence Court
Suite 110

City Dawsonville State GA Zip Code 30534-8940

FEC ID number of contributing federal political committee. **C** C00300426

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : AFF0A0292A2354B2199E

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Wine & Spirits Wholesalers of Amer 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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : A98D90D82E2FA4D9B801

Amount of Each Receipt this Period
1000.00

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

Mailing Address PO Box 2995

City Cordova State TN Zip Code 38088-2995

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 15 / 2014

Transaction ID : A5DF5CE9BD06744E1957

Amount of Each Receipt this Period
1000.00

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 33 OF 65
	<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)
Ernst & Young PAC

Mailing Address 1101 New Your Avenue, NW

City Washington State DC Zip Code 20005-4269

FEC ID number of contributing federal political committee. **C C00227744**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 07 / 2014

Transaction ID : A09CCD55CC9234BA0AB9

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
NC Farm Bureau PAC

Mailing Address P.O. Box 27766

City Raleigh State NC Zip Code 27611-7766

FEC ID number of contributing federal political committee. **C C00216754**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 12 / 2014

Transaction ID : AC7DAF413CDD541BD957

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Tenet Healthcare Corporation PAC

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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 16 / 2014

Transaction ID : A538B12EC92F945EDB23

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 34 OF 65

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Duke Energy Corporation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 550 S. Tryon Street
 City State Zip Code
 Charlotte NC 28202-4200
 FEC ID number of contributing federal political committee. **C C00083535**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 8000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014
Transaction ID : A50A51E91F0F24655968
 Amount of Each Receipt this Period
 2500.00

B. Commonwealth -Altadis Employee PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 5900 N Andrews Ave
 Suite 1100
 City State Zip Code
 Fort Lauderdale FL 33309-2354
 FEC ID number of contributing federal political committee. **C C00455600**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 09 / 2014
Transaction ID : AC55DEDEB13EC450E861
 Amount of Each Receipt this Period
 1500.00

C. Lockheed Martin Employees' Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address 2121 Crystal Drive
 Suite 100
 City State Zip Code
 Arlington VA 22202-3706
 FEC ID number of contributing federal political committee. **C C00303024**
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 09 / 2014
Transaction ID : A98B1DB0FD2C044C08DB
 Amount of Each Receipt this Period
 1000.00

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

5000.00

**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 35 OF 65
	<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)
American Bankers Association PAC

Mailing Address 1120 Connecticut Ave NW

City Washington State DC Zip Code 20036-3905

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 15 / 2014

Transaction ID : ACFACC976E6FD4807AE2

Amount of Each Receipt this Period
1000.00

B. 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: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y
05 / 12 / 2014

Transaction ID : A986AA6D7F89C4566B7E

Amount of Each Receipt this Period
1500.00

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

Mailing Address 1120 Connecticut Ave NW

City Washington State DC Zip Code 20036-3905

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 02 / 2014

Transaction ID : A2EE408031AAB40ACAE2

Amount of Each Receipt this Period
1000.00

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

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

3500.00

31500.00

**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 36 OF 65
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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) Usair		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 02 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Transaction ID : A918DFBD4CA034BBABE3
City Phoenix	State AZ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 44.00 Travel Refund
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 309.50	

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M M / D D / Y Y Y Y Y Y
City	State	Zip Code
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	44.00
TOTAL This Period (last page this line number only).....	44.00

**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 37 OF 65			
	<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) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2301 N Kings Hwy		Amount of Each Disbursement this Period 13.71
City Myrtle Beach	State SC	
Zip Code 29577-3040	Purpose of Disbursement Office Supplies	Transaction ID : B746B85A0DC2943909D5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Transfirst		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 12202 Airport Way Ste 100		Amount of Each Disbursement this Period 7.50
City Broomfield	State CO	
Zip Code 80021-2596	Purpose of Disbursement Merchant Fees	Transaction ID : B3650FFFAA59343AF95B
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address Mb Main PO		Amount of Each Disbursement this Period 147.00
City Myrtle Beach	State SC	
Zip Code 29577-0000	Purpose of Disbursement Postage	Transaction ID : BE9A615434018405E8E3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	168.21
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 65			
	<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) A. Mortons		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1050 Connecticut Ave., NW		Amount of Each Disbursement this Period 348.45 Transaction ID : BB4117AAAB2AF4C54846
City Washington	State DC Zip Code 20005	
Purpose of Disbursement Catering	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Dc Taxis		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 1636 Bladensburg Rd NE		Amount of Each Disbursement this Period 33.61 Transaction ID : B97C676C8DB7D43418EE
City Washington	State DC Zip Code 20002-1804	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Parkway Office Plaza, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address P.O. Box 70700		Amount of Each Disbursement this Period 250.00 Transaction ID : BFFD6A94905FD4674AB3
City Myrtle Beach	State SC Zip Code 29572-0030	
Purpose of Disbursement Rent	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	632.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 65			
	<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) A. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 1043 Barr Rd		Amount of Each Disbursement this Period 1000.00 Transaction ID : B6A463A5E6EFA48AB93F
City Lexington	State SC Zip Code 29072-8648	
Purpose of Disbursement Strategic Consulting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. BNC Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 20175 N 67th Ave		Amount of Each Disbursement this Period 520.03 Transaction ID : B4E08F6614ADA44CE89A
City Glendale	State AZ Zip Code 85308-7000	
Purpose of Disbursement Payroll Taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Accuchecks		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 28.19 Transaction ID : B7ED6007A63F34C4B8D7
City Myrtle Beach	State SC Zip Code 29577-3103	
Purpose of Disbursement Payroll Processing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1548.22
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 65			
	<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) A. Lee Ann Rice		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 3771 Rice Hope Ct		Amount of Each Disbursement this Period 1275.62 Transaction ID : B71A992E780E74D4396C
City Myrtle Beach	State SC	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 14.44 Transaction ID : B66D73BB1BB174C1EA70
City San Francisco	State CA	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 15.06 Transaction ID : B9F5B375148B94230852
City San Francisco	State CA	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	1305.12
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 65	
	<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) A. Vonage Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2014
Mailing Address 23 Main St		Amount of Each Disbursement this Period 19.94 Transaction ID : BDF A1DF62A3CF4151BD2
City Holmdel	State NJ	
Zip Code 07733-2136	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dc Taxis		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 1636 Bladensburg Rd NE		Amount of Each Disbursement this Period 34.84 Transaction ID : B69DA375FC6754F718DF
City Washington	State DC	
Zip Code 20002-1804	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 25.87 Transaction ID : BD95043EEC78C44C3A12
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	80.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 65	
	<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) A. Rayburn Cafeteria		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address Rayburn Building		Amount of Each Disbursement this Period 118.05 Transaction ID : B4FB93139C9564FB1A82
City Washington	State DC Zip Code 20515-0001	
Purpose of Disbursement Meeting Expense	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Dc Taxis		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 1636 Bladensburg Rd NE		Amount of Each Disbursement this Period 19.19 Transaction ID : B0EA1AA4695984FE9AEC
City Washington	State DC Zip Code 20002-1804	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Uline		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address PO Box 88741		Amount of Each Disbursement this Period 239.11 Transaction ID : B957024172F3640F0883
City Chicago	State IL Zip Code 60680-1741	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	376.35
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 65	
	<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) A. Bullfeathers		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 410 First St., SE		Amount of Each Disbursement this Period 31.29 Transaction ID : B11B7BDEA206A412E94B
City Washington	State DC Zip Code 20003-1819	
Purpose of Disbursement Meeting-Meals	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hertz		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address Reagan National Airport		Amount of Each Disbursement this Period 337.07 Transaction ID : BEEA7C269B1934547B5A
City Washington	State DC Zip Code 20001	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Michaels		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 502 Seaboard St		Amount of Each Disbursement this Period 51.18 Transaction ID : B77CE660F444E428481D
City Myrtle Beach	State SC Zip Code 29577-9732	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	419.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 65	
	<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) A. Fed Ex		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 1170 Seaboard St		Amount of Each Disbursement this Period 43.59 Transaction ID : B59E783DDE8DF47209C9
City Myrtle Beach	State SC Zip Code 29577-6517	
Purpose of Disbursement Shipping	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 100.55 Transaction ID : BFEA2BA5F2F074065925
City Myrtle Beach	State SC Zip Code 29577-5705	
Purpose of Disbursement Travel	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Jimmy B		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 1963 Hwy 76 East		Amount of Each Disbursement this Period 4033.50 Transaction ID : B593840C3BAF34819A10
City Marion	State SC Zip Code 29571-6359	
Purpose of Disbursement Event Catering/Site Rental	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4177.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 65	
	<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) A. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2014
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 57.13 Transaction ID : BD34888C833B34B29B4A
City Myrtle Beach	State SC	
Zip Code 29577-5705	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bullfeathers		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2014
Mailing Address 410 First St., SE		Amount of Each Disbursement this Period 52.38 Transaction ID : BD7C1BA906A4D486093E
City Washington	State DC	
Zip Code 20003-1819	Purpose of Disbursement Meeting-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2014
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 42.83 Transaction ID : B3C9FFE8266A94D2ABC1
City Myrtle Beach	State SC	
Zip Code 29577-5705	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	152.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 65	
	<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) A. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 24264 Highway 17		Amount of Each Disbursement this Period 915.83 Transaction ID : BE01AA1081EDF4572B83
City Garden City State SC Zip Code 29576	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Congressional Institute		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 401 Wythe St # 103		Amount of Each Disbursement this Period 560.00 Transaction ID : B7F2BE5DCA18345C7885
City Alexandria State VA Zip Code 22314-1915	Purpose of Disbursement Meeting-Seminar	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Croissants		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 3751 Robert M Grissom Pkwy		Amount of Each Disbursement this Period 282.59 Transaction ID : B7BF66BF89A2C43899E7
City Myrtle Beach State SC Zip Code 29577-6412	Purpose of Disbursement Advertising Supplies	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	915.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 65	
	<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) A. Sea Captains House		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 3000 N Ocean Blvd		Amount of Each Disbursement this Period 117.79 Transaction ID : B204C6170957C439080E
City Myrtle Beach	State SC Zip Code 29577-3046	
Purpose of Disbursement Event Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 161.17 Transaction ID : B60D8710AD1E843A3A7D
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement Meeting-Meals		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Vertical Response		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 50 Beale St., 10th Floor		Amount of Each Disbursement this Period 150.00 Transaction ID : B103DE815AB6949F2997
City San Francisco	State CA Zip Code 94105-1813	
Purpose of Disbursement Web Services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	428.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 65	
	<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) A. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2014
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 58.88 Transaction ID : B4BCD1E2DC64E4A81834
City Myrtle Beach	State SC	
Zip Code 29577-5705	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 32.11 Transaction ID : B8AC25C45CF1B4C2EAB3
City Myrtle Beach	State SC	
Zip Code 29577-5705	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Hotel Florence		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 126 West Evans St.		Amount of Each Disbursement this Period 22.60 Transaction ID : B2E71F87F30304E5BAF1
City Florence	State SC	
Zip Code 29501-3426	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	113.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 65			
	<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) A. Usair		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 660.50 Transaction ID : B42AB6AC5099A46E39B4
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 24264 Highway 17		Amount of Each Disbursement this Period 61.48 Transaction ID : BD94E83CA0BB543D9BB9
City Garden City	State SC Zip Code 29576	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Harris Teeter		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address US 76 Cashua DR.		Amount of Each Disbursement this Period 32.12 Transaction ID : BE6F1D15D48544985978
City Florence	State SC Zip Code 29501-0000	
Purpose of Disbursement Food/Beverage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	754.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 65			
	<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) A. Usair		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 552.00 Transaction ID : BB465F28C651F4C20BBA
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Usair		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 833.50 Transaction ID : B89B6D79EAA8D47F7A44
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Harris Teeter		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address US 76 Cashua DR.		Amount of Each Disbursement this Period 39.98 Transaction ID : B46136138FEF64F9C9B9
City Florence	State SC	
Zip Code 29501-0000	Purpose of Disbursement Food/Beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1425.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 65	
	<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) A. Rayburn Cafeteria		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address Rayburn Building		Amount of Each Disbursement this Period 30.00 Transaction ID : B630CA516DEAF45ED872
City Washington State DC Zip Code 20515-0001	Purpose of Disbursement Food/Beverage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Charlie Palmers		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 101 Constitution Ave., NW		Amount of Each Disbursement this Period 357.00 Transaction ID : B629DD6CEF96D4830B5E
City Washington State DC Zip Code 20001-2133	Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Bullfeathers		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 410 First St., SE		Amount of Each Disbursement this Period 181.02 Transaction ID : B2838152F600247C7A7F
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Meeting-Meals Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	568.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 65	
	<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) A. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 28.21 Transaction ID : BB77ADF42FF944EA2823
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Dc Taxis		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 1636 Bladensburg Rd NE		Amount of Each Disbursement this Period 9.78 Transaction ID : BA1865998089F4C6AA69
City Washington State DC Zip Code 20002-1804	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 8.66 Transaction ID : B1E6DD6D42B3A4522938
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	46.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 65	
	<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) A. Edible Arrangements		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 7827 N Kings Hwy		Amount of Each Disbursement this Period 56.37 Transaction ID : BEED235D2E1A64B3E883
City Myrtle Beach	State SC Zip Code 29572-3054	
Purpose of Disbursement Food/Beverage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Vonage Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 23 Main St		Amount of Each Disbursement this Period 19.94 Transaction ID : BE55483FCB3BC430A839
City Holmdel	State NJ Zip Code 07733-2136	
Purpose of Disbursement Telephone	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Sonoma		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 233 Pennsylvania Ave SE		Amount of Each Disbursement this Period 111.75 Transaction ID : B5ACA6A3804BE43928D3
City Washington	State DC Zip Code 20003-1121	
Purpose of Disbursement Meeting-Meals	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	188.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 65	
	<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) A. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1043 Barr Rd		Amount of Each Disbursement this Period 1000.00 Transaction ID : BEED620BECE76445D8A6
City Lexington	State SC Zip Code 29072-8648	
Purpose of Disbursement Strategic Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address Mb Main PO		Amount of Each Disbursement this Period 18.00 Transaction ID : B4DA612097F50400FAB7
City Myrtle Beach	State SC Zip Code 29577-0000	
Purpose of Disbursement Postage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Winfrey & Company		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 228 S Washington St Ste B7		Amount of Each Disbursement this Period 2929.38 Transaction ID : BD1A4DC45186D4AB698A
City Alexandria	State VA Zip Code 22314-5408	
Purpose of Disbursement Fundraising Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3947.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 65	
	<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) A. Extra Space Storage		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 338 Jesse St.		Amount of Each Disbursement this Period 2316.00 Transaction ID : B51BAF3C0F648411D9E3
City Myrtle Beach	State SC Zip Code 29579-7423	
Purpose of Disbursement Advertising-Signage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. House Members Dining Room		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address Capitol 117		Amount of Each Disbursement this Period 70.80 Transaction ID : B8A778F7E872244839B3
City Washington	State DC Zip Code 20001	
Purpose of Disbursement Food/Beverage	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Starboard Communications		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1043 Barr Rd		Amount of Each Disbursement this Period 2274.88 Transaction ID : B9E2480C5ECF34624939
City Lexington	State SC Zip Code 29072-8648	
Purpose of Disbursement Bumper Stickers/Printing	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4661.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 65
	<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) A. Huckaby Davis Lisker		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 228 S Washington St Ste 115		Amount of Each Disbursement this Period 8021.15 Transaction ID : BADF91BD9D6444792AF9
City Alexandria	State VA Zip Code 22314-5404	
Purpose of Disbursement Compliance Consulting	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Gordon Birsch		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014
Mailing Address Market Commons		Amount of Each Disbursement this Period 61.54 Transaction ID : B54467EE6DD06438C86E
City Myrtle Beach	State SC Zip Code 29577	
Purpose of Disbursement Meeting-Meals	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Transfirst		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 12202 Airport Way Ste 100		Amount of Each Disbursement this Period 66.30 Transaction ID : B29C5106EB62741B99D7
City Broomfield	State CO Zip Code 80021-2596	
Purpose of Disbursement Merchant fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8148.99
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 65	
	<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) A. Parkway Office Plaza, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address P.O. Box 70700		Amount of Each Disbursement this Period 250.00 Transaction ID : B05FA87E4172A4308AB0
City Myrtle Beach	State SC	
Zip Code 29572-0030	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dc Taxis		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 1636 Bladensburg Rd NE		Amount of Each Disbursement this Period 16.07 Transaction ID : BDA6AEB5D2A1540B4871
City Washington	State DC	
Zip Code 20002-1804	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Croissants		Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014
Mailing Address 3751 Robert M Grissom Pkwy		Amount of Each Disbursement this Period 34.75 Transaction ID : BDCD27769EF554E48930
City Myrtle Beach	State SC	
Zip Code 29577-6412	Purpose of Disbursement Food/Beverage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	300.82
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 65			
	<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) A. Uline		Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2014
Mailing Address PO Box 88741		Amount of Each Disbursement this Period 535.78 Transaction ID : B0720B5EA63A4473791B
City Chicago	State IL Zip Code 60680-1741	
Purpose of Disbursement Office Supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 381.89 Transaction ID : BC9DB06A4B203408294D
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement Catering	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Vertical Response		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 50 Beale St., 10th Floor		Amount of Each Disbursement this Period 150.00 Transaction ID : B0B7A175AE2CE4C3492B
City San Francisco	State CA Zip Code 94105-1813	
Purpose of Disbursement Web Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1067.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 65			
	<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) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 144 2nd St FI 1		Amount of Each Disbursement this Period 956.63 Transaction ID : B0894D06CB3A341C9911
City San Francisco	State CA Zip Code 94105-3718	
Purpose of Disbursement Online Processing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Discount Mugs		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 12610 NW 115th Ave.		Amount of Each Disbursement this Period 856.21 Transaction ID : B472F2277E3554A3D947
City Medley	State FL Zip Code 33178-3178	
Purpose of Disbursement Advertising	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Tom Rice		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 5100 N Ocean Blvd		Amount of Each Disbursement this Period 1312.04 Transaction ID : B1606BCFB558D49AE84C
City Myrtle Beach	State SC Zip Code 29577-2541	
Purpose of Disbursement See Memos	Candidate Name Tom Rice	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2227.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 65	
	<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) A. House Members Dining Room		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address Capitol 117		Amount of Each Disbursement this Period 316.95
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Meeting-Meals	Transaction ID : B978FFB6948ED4429B92
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. The Chesapeake House		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 9918 Hwy 17 North		Amount of Each Disbursement this Period 776.86
City Myrtle Beach	State SC	
Zip Code 29572	Purpose of Disbursement Catering	Transaction ID : B896041BC88014090914
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Dc Taxis		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 1636 Bladensburg Rd NE		Amount of Each Disbursement this Period 45.00
City Washington	State DC	
Zip Code 20002-1804	Purpose of Disbursement Travel	Transaction ID : B7CBE9821676A4F1B88E
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 65			
	<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) A. The Dunes Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 9000 N Ocean Blvd		Amount of Each Disbursement this Period 173.23
City Myrtle Beach	State SC	
Zip Code 29572-4424	Purpose of Disbursement Meeting-Meals	Transaction ID : BA1E7C2BC6CD94CE9BE6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Tom Rice		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address 5100 N Ocean Blvd		Amount of Each Disbursement this Period 163.32
City Myrtle Beach	State SC	
Zip Code 29577-2541	Purpose of Disbursement See Memos	Transaction ID : B7B56A7EF23A5482AB67
Candidate Name Tom Rice	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. House Members Dining Room		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address Capitol 117		Amount of Each Disbursement this Period 163.32
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Meeting-Meals	Transaction ID : B2D502E4FDB6547849F5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	163.32
TOTAL This Period (last page this line number only).....	33818.56

**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 65	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mary Emily J Vallarino		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 320 Azalea Drive		Amount of Each Disbursement this Period 2600.00 Transaction ID : BBFFCDE6C36ED410B988
City Surfside Beach	State SC	
Zip Code 29575-5024	Purpose of Disbursement Refund: Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Runoff2014		

Full Name (Last, First, Middle Initial) B. Manuel R Vallarino		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 126 Wofford Rd		Amount of Each Disbursement this Period 2600.00 Transaction ID : B5F6B8F284BC14DC8A1B
City Conway	State SC	
Zip Code 29526-8815	Purpose of Disbursement Refund: Refund	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input type="checkbox"/> General	State: District:
<input checked="" type="checkbox"/> Other (specify) Runoff2014		

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

SUBTOTAL of Disbursements This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	5200.00

**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 63 OF 65
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. National Republican Congressional Cmte.		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address 320 First St., SE		Amount of Each Disbursement this Period 27300.00 Transaction ID : BF6D8331EDEAA40D9BF1
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement Transfer	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SOUTH CAROLINA REPUBLICAN PARTY FEDERAL		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address P.O. BOX 12373		Amount of Each Disbursement this Period 3500.00 Transaction ID : BE4C937B65D4A4BA3B63
City Columbia State SC Zip Code 29211-2373	Purpose of Disbursement Transfer	
Candidate Name SOUTH CAROLINA REPUBLICAN PARTY FEDERAL	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Conservative Opportunities for a New America PAC-CONAPAC		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address 110 W. Louisiana Ave., Ste. 312		Amount of Each Disbursement this Period 4000.00 Transaction ID : B43A07A8B5EA4406B8D2
City Midland State TX Zip Code 79701-3414	Purpose of Disbursement Contribution	
Candidate Name Conservative Opportunities for a New America PAC-CONAPAC	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	34800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 65	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Conaway for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address P.O. Box 51272		Amount of Each Disbursement this Period 2000.00 Transaction ID : BDFC05399247E400AA3F
City Midland	State TX	
Zip Code 79710-1272	Purpose of Disbursement Contribution	Category/ Type
Candidate Name Rep. Mike Conaway	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: TX District: 11	

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

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

SUBTOTAL of Disbursements This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	36800.00

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

NAME OF COMMITTEE (In Full) **TOM RICE FOR CONGRESS** Transaction ID : **C1955110F2BCF4ACF973**

LOAN SOURCE Full Name (Last, First, Middle Initial) Tom Rice	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff2012
Mailing Address 5100 N Ocean Blvd		

City	State	ZIP Code
Myrtle Beach	SC	29577-2541

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	26000.00	24000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 19 / Y 2012	M / D / Y None	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	24000.00
TOTALS This Period (last page in this line only).....	24000.00

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