

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Gloria Bromell Tinubu for Congress

ADDRESS (number and street)  
▼

PO Box 51348

Check if different  
than previously  
reported. (ACC)

Myrtle Beach

SC

29579

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00508242

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

SC

07

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

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y  
01 / 01 / 2014

through

M M / D D / Y Y Y Y  
03 / 31 / 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 Donna Collins

Signature of Treasurer

Donna Collins

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
04 / 15 / 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**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

Gloria Bromell Tinubu for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	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))....	31143.00	64396.54
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	31143.00	64396.54
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	32935.51	97983.31
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1848.80
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	32935.51	96134.51
8. Cash on Hand at Close of Reporting Period (from Line 27).....	11680.36	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	350091.66	

## 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)

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Write or Type Committee Name

Gloria Bromell Tinubu for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

**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).....

20651.00

38801.00

(ii) Unitemized.....

5492.00

15509.74

(iii) TOTAL of contributions from individuals ▶

26143.00

54310.74

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

5000.00

10000.00

**(d) The Candidate.....**

0.00

85.80

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

31143.00

64396.54

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

10000.00

40900.00

**(b) All Other Loans.....**

0.00

700.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

10000.00

41600.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

1848.80

**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)..... ▶**

41143.00

107845.34

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	32935.51	97983.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	5900.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	5900.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	32935.51	103883.31

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3472.87
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	41143.00
25. SUBTOTAL (add Line 23 and Line 24).....	44615.87
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	32935.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	11680.36

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial)

**Samuel Lee Baker**

Mailing Address 3526 Boundbrook Ln

City

Columbia

State

SC

Zip Code

29206-3402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Univ. of South Carolina

Occupation

Professor Emeritus

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2014

Transaction ID : C9963614

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

**Olutoye Bello**

Mailing Address 220 L St NE

City

Washington

State

DC

Zip Code

20002-3536

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Bello, Bello &amp; Assc

Occupation

Consultant

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : C9968132

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

**Hutchison Benjamin**

Mailing Address 1791 Francis Marion Dr

City

Georgetown

State

SC

Zip Code

29440-7588

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

System Engineer

Receipt For: 2012

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

Transaction ID : C9922268

Amount of Each Receipt this Period

100.00

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

850.00

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

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

John Bleecker

A.

Mailing Address PO Box 148

City

Charleston

State

SC

Zip Code

29402-0148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

John Bleecker Lawfirm

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2014

Transaction ID : C9961829

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

John Brewer

B.

Mailing Address PO Box 73188

City

Washington

State

DC

Zip Code

20056-3188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

USDA

Occupation

Special Assistant

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : C9968673

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Cecil Bromell

C.

Mailing Address 402 S Main St

City

Darlington

State

SC

Zip Code

29532-4822

FEC ID number of contributing  
federal political committee.

C

Name of Employer

macedonia baptist church

Occupation

pastor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : C9967393

Amount of Each Receipt this Period

100.00

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

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

850.00

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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

James Byrum

A.

Mailing Address 33 Heathwood Cir

City

Columbia

State

SC

Zip Code

29205-1946

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
teacher/ businessman

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		27		2014

Transaction ID : C9962373

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Charles Campbell

B.

Mailing Address 4079 Highway 17 Business

City

Murrells Inlet

State

SC

Zip Code

29576

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dead Dog SaloonOccupation  
Owner

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		22		2014

Transaction ID : C9928148

Amount of Each Receipt this Period

350.00

\* In-Kind: catering birthday fundraiser

Full Name (Last, First, Middle Initial)

Lori G. Church

C.

Mailing Address 3548 Alexandria Ave

City

Myrtle Beach

State

SC

Zip Code

29577-7433

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CCUOccupation  
Controller

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		18		2014

Transaction ID : C9948896

Amount of Each Receipt this Period

500.00

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)  
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Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

Traci Cooper

A.

Mailing Address 120 Stonebrook Dr

City

Blythewood

State

SC

Zip Code

29016-8719

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SC Public Schools

Occupation

Educator

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		30		2014

Transaction ID : C9966318

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Clifford Eby

B.

Mailing Address 10825 Alloway Dr

City

Potomac

State

MD

Zip Code

20854-1504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PB

Occupation

Engineer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		17		2014

Transaction ID : C9948625

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Emma Fakiya

C.

Mailing Address 7835 Somerset Ct

City

Greenbelt

State

MD

Zip Code

20770-3025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Howard University

Occupation

Nursing

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		26		2014

Transaction ID : C9960381

Amount of Each Receipt this Period

250.00

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

1000.00

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



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

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

FOR LINE NUMBER:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

Morayo Fakiya

Mailing Address 7835 Somerset Ct

City

Greenbelt

State

MD

Zip Code

20770-3025

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Howard University Hospital/Howard Univ

Occupation

Medical Doctor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : C9966644

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Candy Fletcher

Mailing Address PO Box 26713

City

Greenville

State

SC

Zip Code

29616-1713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self

Occupation

consultant

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : C9957467

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

James D. Henderson

Mailing Address PO Box 261954

City

Conway

State

SC

Zip Code

29528-6054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Coastal Carolina University

Occupation

Professor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : C9928143

Amount of Each Receipt this Period

200.00

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

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

1200.00

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

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

FOR LINE NUMBER:

PAGE 10 OF 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

Mary R Heriot

Mailing Address 115 Sandy Lane

City

Cayce

State

SC

Zip Code

29033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
Information Requested

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : C9962124

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Eunice D Holland

Mailing Address 5015 Lakeshore Dr.

City

Columbia

State

SC

Zip Code

29206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : C9963657

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Noel Khalil

Mailing Address 2375 Hyde Park Ct NW

City

Atlanta

State

GA

Zip Code

30318-2388

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbia ResidentialOccupation  
Real Estate

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		13		2014

Transaction ID : C9944675

Amount of Each Receipt this Period

1000.00

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:

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

A. Arthur Lance Jr

Mailing Address 2903 Dunbar Rd

City

Georgetown

State

SC

Zip Code

29440-2049

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Ed Consultant

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : C9957311

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

B. JACKIE Bessie MAYFIELD

Mailing Address PO Box 1548

City

Orange

State

TX

Zip Code

77631-1548

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

TAX ACCOUNTANT

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		25		2014

Transaction ID : C9959666

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

C. Cheryl Moore-Adamson

Mailing Address 7137 Browns Shortcut Road

City

Conway

State

SC

Zip Code

29527

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Palmetto Missionary Baptist Church

Occupation

Pastor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		30		2014

Transaction ID : C9966584

Amount of Each Receipt this Period

250.00

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

1300.00

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

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

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

FOR LINE NUMBER:

PAGE 12 OF 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

Joseph Moyer

Mailing Address 1556 Brookgreen Dr

City

Myrtle Beach

State

SC

Zip Code

29577-5870

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AASC

Occupation

Physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

3600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : C9967055

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

Gopinathan Nair

Mailing Address 450 Brushstroke Ct SE

City

Marietta

State

GA

Zip Code

30067-4976

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sole Practice

Occupation

Lawyer

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

501.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2014

Transaction ID : C9963612

Amount of Each Receipt this Period

501.00

Full Name (Last, First, Middle Initial)

Beverley Ojo

Mailing Address 1824 Mountain Shadow

City

Stone Mountain

State

GA

Zip Code

30087-2114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rem-Kiks Group

Occupation

CEO

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : C9967772

Amount of Each Receipt this Period

500.00

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

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

3601.00

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

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

FOR LINE NUMBER:

PAGE 13 OF 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

Jaiyeola Rufus Oladapo

A.

Mailing Address 120 Rehoboth Cir SW

City

Atlanta

State

GA

Zip Code

30331-8582

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
kemi construction co.

Occupation

civil construction

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		17		2014

Transaction ID : C9947865

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

Egbert Perry

B.

Mailing Address 541 Centennial Ln NW

City

Atlanta

State

GA

Zip Code

30313-2408

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Integral Group LLC

Occupation

Real Estate

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : C9938502

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

William Proctor

C.

Mailing Address 100 Ocean Creek Dr. Apt B8

City

Myrtle Beach

State

SC

Zip Code

29572

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
self employed

Occupation

IT/Finance Professional

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		11		2014

Transaction ID : C9940834

Amount of Each Receipt this Period

250.00

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

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

4850.00

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

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

FOR LINE NUMBER:

PAGE 14 OF 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

Susan Redge

Mailing Address 1102 Osprey Ct

City

Murrells Inlet

State

SC

Zip Code

29576-8702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jackson &amp; Coker

Occupation

physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		21		2014

Transaction ID : C9921787

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Susan Redge

Mailing Address 1102 Osprey Ct

City

Murrells Inlet

State

SC

Zip Code

29576-8702

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Jackson &amp; Coker

Occupation

physician

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : C9967884

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Michael Roberts

Mailing Address 106 Furman Cir

City

Conway

State

SC

Zip Code

29526-8881

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Coastal Carolina University

Occupation

Dean

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		17		2014

Transaction ID : C9948615

Amount of Each Receipt this Period

500.00

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

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

850.00

# **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 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

Charles F Roche III

A.

Mailing Address 238 Seville Dr

City

Murrells Inlet

State

SC

Zip Code

29576-7585

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired Military

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		22		2014

Transaction ID : C9922287

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Charles F Roche III

B.

Mailing Address 238 Seville Dr

City

Murrells Inlet

State

SC

Zip Code

29576-7585

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
retiredOccupation  
retired Military

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		27		2014

Transaction ID : C9928144

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Charles Sasser

C.

Mailing Address 1517 Forest View Rd

City

Conway

State

SC

Zip Code

29527

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Doctor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : C9969172

Amount of Each Receipt this Period

500.00

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

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

700.00

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

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

FOR LINE NUMBER:

PAGE 16 OF 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

A. Sandra Saunders

Mailing Address 702 Elm St.

City

Conway

State

SC

Zip Code

29526

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CCU

Occupation

Student Counselor

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : C9969169

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Patricia Shama

Mailing Address 1680 Essex Way

City

Myrtle Beach

State

SC

Zip Code

29577-1794

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NA

Occupation

NA

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		19		2014

Transaction ID : C9919678

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Amy R Sheheen

Mailing Address 14 Kirkwood Ln.

City

Camden

State

SC

Zip Code

29020

FEC ID number of contributing  
federal political committee.

C

Name of Employer

unemployed

Occupation

Home-maker

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		29		2014

Transaction ID : C9977583

Amount of Each Receipt this Period

250.00

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

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

600.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 17 OF 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial)

**David Taylor**

Mailing Address 5 Arden St

City

Greenville

State

SC

Zip Code

29607-1704

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Clemson University

Occupation

professor

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		09		2014

**Transaction ID : C9938401**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Samuel Tenenbaum**

Mailing Address 353 Blue Heron Ct

City

Lexington

State

SC

Zip Code

29072-9416

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Palmetto Health Foundation

Occupation

President

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

**Transaction ID : C9966428**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**Soji TINUBU**

Mailing Address 1403 7th Ave

City

Conway

State

SC

Zip Code

29526-4219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

W R &amp; J Inc.

Occupation

Engineer

Receipt For: 2014

☒ Primary    ☐ General  
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

**Transaction ID : C9966933**

Amount of Each Receipt this Period

500.00

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

1000.00

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

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

FOR LINE NUMBER:

PAGE 18 OF 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

A. Maryann B. Wright

Mailing Address 202 Harbor Dr

City

Columbia

State

SC

Zip Code

29229-7348

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Educator

Receipt For: 2014

☒ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : C9956253

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B.

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 M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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 M	/	D 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).....

250.00

20651.00

# **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 71

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

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NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial)

**PROGRESSIVE VOTERS OF AMERICA**

**A.**

Mailing Address PO BOX 852

City

BURLINGTON

State

VT

Zip Code

05402

FEC ID number of contributing  
federal political committee.

**C** C00406553

Name of Employer

Occupation

Receipt For: 2014

☐ Primary  
☐ Other (specify)

☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 09 / 2014

**Transaction ID : C9887194**

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Election Cycle-to-Date

Date of Receipt

M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

5000.00

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 20 OF 71

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

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NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial)

**Gloria Bromell Tinubu**

Mailing Address 1403 7th Ave

City

Conway

State

SC

Zip Code

29526

FEC ID number of contributing  
federal political committee.

**C** H2SC07108

Name of Employer

Coastal Carolina University

Occupation

Economist

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

40985.80

Date of Receipt

M M / D D / Y Y Y Y  
02 / 13 / 2014

Transaction ID : C9922262

Amount of Each Receipt this Period

10000.00

Full Name (Last, First, Middle Initial)

**B.**

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

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

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

Amount of Each Receipt this Period

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

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

10000.00

10000.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 71

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. Charles Campbell**

Mailing Address 4079 Highway 17 Business

City	State	Zip Code
Murrells Inlet	SC	29576

Purpose of Disbursement  
catering birthday fundraiser

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		22		2014

Amount of Each Disbursement this Period

350.00
--------

Transaction ID : D466435

\* In-Kind Received

**B. Conway National Bank**

Mailing Address PO Box 320

City	State	Zip Code
Conway	SC	29528

Purpose of Disbursement  
check printing order

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2014

Amount of Each Disbursement this Period

49.25
-------

Transaction ID : D464915

**c. Christopher Covert**

Mailing Address 831 Quail Drive

City	State	Zip Code
Charleston	SC	29412

Purpose of Disbursement  
consulting srvs- upfront campaign management fee

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

1250.00
---------

Transaction ID : D465025

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

1649.25

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 71

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. Christopher Covert**

Mailing Address 831 Quail Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

City	State	Zip Code
Charleston	SC	29412

Purpose of Disbursement  
consulting srvs- campaign management

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

2125.00
---------

Transaction ID : D466219

**B. Christopher Covert**

Mailing Address 831 Quail Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2014

City	State	Zip Code
Charleston	SC	29412

Purpose of Disbursement  
consulting services- campaign management

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

2125.00
---------

Transaction ID : D466432

**c. Christopher Covert**

Mailing Address 831 Quail Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

City	State	Zip Code
Charleston	SC	29412

Purpose of Disbursement  
consulting services-campaign management

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Amount of Each Disbursement this Period

1375.00
---------

Transaction ID : D468001

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

5625.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. Christopher Covert**

Mailing Address 831 Quail Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

City	State	Zip Code
Charleston	SC	29412

Amount of Each Disbursement this Period

1375.00
---------

Purpose of Disbursement  
consulting services- campaign managementCategory/  
Type

Transaction ID : D469210

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**B. J. Michael Daniels**

Mailing Address Post Office Box 23285

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2014

City	State	Zip Code
Columbia	SC	29224

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
refund of contribution

010

Category/  
Type

Transaction ID : D469224

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

**C. Delta Airline**

Mailing Address Post Office Box 20980 Dept 980

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		06		2014

City	State	Zip Code
Atlanta	GA	30320-2980

Amount of Each Disbursement this Period

417.00
--------

Purpose of Disbursement  
travel expense PA fundraiserCategory/  
Type

Transaction ID : D466216

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).....

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

2292.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
credit card processing fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		03		2014

Amount of Each Disbursement this Period

0.20
------

Transaction ID : D464914

**B. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
credit card processing fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		03		2014

Amount of Each Disbursement this Period

100.38
--------

Transaction ID : D465412

**c. First Data Corporation**

Mailing Address 5565 Glenridge Connector NE

City	State	Zip Code
Atlanta	GA	30342

Purpose of Disbursement  
credit card processing fees

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2014

Amount of Each Disbursement this Period

21.11
-------

Transaction ID : D467480

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

121.69



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. Furman University/ Riley Institute**

Mailing Address 3300 Poinsett Highway

City	State	Zip Code
Greenville	SC	29613

Purpose of Disbursement  
Riley Institute Leadership Training Sponsorship

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 24 / 2014

Amount of Each Disbursement this Period

490.00
--------

Transaction ID : D466434

**B. Google Apps**

Mailing Address 1600 Amphitheatre Parkway

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement  
email/advertisement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 12 / 2014

Amount of Each Disbursement this Period

34.28
-------

Transaction ID : D467837

**c. Google Apps**

Mailing Address 1600 Amphitheatre Parkway

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement  
email/advertising service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 07 / 2014

Amount of Each Disbursement this Period

30.00
-------

Transaction ID : D466228

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

554.28



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. Dwane D Heyward**

Mailing Address 92 Abraham PI

City	State	Zip Code
Georgetown	SC	29440-6341

Purpose of Disbursement  
consulting srvs- fin./office management

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

750.00
--------

Transaction ID : D466429

**B. Dwane D Heyward**

Mailing Address 92 Abraham PI

City	State	Zip Code
Georgetown	SC	29440-6341

Purpose of Disbursement  
consulting srvs- fin./office management

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2014

Amount of Each Disbursement this Period

750.00
--------

Transaction ID : D466430

**c. Dwane D Heyward**

Mailing Address 92 Abraham PI

City	State	Zip Code
Georgetown	SC	29440-6341

Purpose of Disbursement  
consulting srvs-fin./office management

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

Amount of Each Disbursement this Period

375.00
--------

Transaction ID : D468003

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

1875.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. Dwane D Heyward**

Mailing Address 92 Abraham Pl

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

City	State	Zip Code
Georgetown	SC	29440-6341

Purpose of Disbursement  
consulting srvs- fin./office management

Amount of Each Disbursement this Period

375.00
--------

Transaction ID : D469212

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Local Party Project**

Mailing Address 2304 North Spaulding Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		19		2014

City	State	Zip Code
Chicago	IL	60647

Purpose of Disbursement  
splash page development

Amount of Each Disbursement this Period

500.00
--------

Transaction ID : D467833

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2012
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**c. Mad Dog Mail Inc**

Mailing Address 5542 First Coast Highway Suite 300

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

City	State	Zip Code
Fernandina Beach	FL	32034

Purpose of Disbursement  
shipping of email overs (campaign mailers)

Amount of Each Disbursement this Period

54.20
-------

Transaction ID : D466215

Candidate Name

Category/  
Type

Office Sought:	House	Disbursement For: 2014
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: District:

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

929.20

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. NGP Van Inc**

Mailing Address 1101 15th Street NW Suite 500

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

City	State	Zip Code
Washington	DC	20005

Amount of Each Disbursement this Period

2100.00
---------

Purpose of Disbursement  
campaign tracking,disbursement,contribution systemCategory/  
Type

Transaction ID : D466227

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. Office Depot #2179**

Mailing Address 2701 Church Street Suite A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

City	State	Zip Code
Conway	SC	29526

Amount of Each Disbursement this Period

51.82
-------

Purpose of Disbursement  
office suppliesCategory/  
Type

Transaction ID : D466225

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. Office Depot #2179**

Mailing Address 2701 Church Street Suite A

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		25		2014

City	State	Zip Code
Conway	SC	29526

Amount of Each Disbursement this Period

204.10
--------

Purpose of Disbursement  
office suppliesCategory/  
Type

Transaction ID : D469254

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

2355.92

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. Sage Leadership PAC**

Mailing Address Post Office Box 2263

City	State	Zip Code
Orangeburg	SC	29116

Purpose of Disbursement  
voided lost check 1160

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
03 / 14 / 2014

Amount of Each Disbursement this Period

3480.00
---------

Transaction ID : D470351

**B. Sage Leadership PAC**

Mailing Address Post Office Box 2263

City	State	Zip Code
Orangeburg	SC	29116

Purpose of Disbursement  
refund of contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
03 / 14 / 2014

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : D469230

**C. South Carolina Democratic Party**

Mailing Address PO Box 5965

City	State	Zip Code
Columbia	SC	29250

Purpose of Disbursement  
qualifying fee for congressional race

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
03 / 25 / 2014

Amount of Each Disbursement this Period

3480.00
---------

Transaction ID : D469189

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

3480.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. Taylor Collective Solutions**

Mailing Address 1524 South IH- 35 Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

City	State	Zip Code
Austin	TX	78704

Amount of Each Disbursement this Period

1250.00
---------

Purpose of Disbursement  
consulting services- fundraisingCategory/  
Type

Transaction ID : D469203

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**B. Taylor Collective Solutions**

Mailing Address 1524 South IH- 35 Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		19		2014

City	State	Zip Code
Austin	TX	78704

Amount of Each Disbursement this Period

1250.00
---------

Purpose of Disbursement  
fundraising campaign 2014Category/  
Type

Transaction ID : D468002

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

**C. Taylor Collective Solutions**

Mailing Address 1524 South IH- 35 Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		25		2014

City	State	Zip Code
Austin	TX	78704

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
fundraising campaign 2014Category/  
Type

Transaction ID : D466428

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

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

5000.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. Taylor Collective Solutions**

Mailing Address 1524 South IH- 35 Suite 200

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		11		2014

City	State	Zip Code
Austin	TX	78704

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
fundraising campaign 2014Category/  
Type

Transaction ID : D466217

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. The Oblander Group LLC**

Mailing Address 1100 Spring St Suite 360

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2014

City	State	Zip Code
Atlanta	GA	30309

Amount of Each Disbursement this Period

600.00
--------

Purpose of Disbursement  
fundraising fee debt paymentCategory/  
Type

Transaction ID : D465147

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

**c. The Oblander Group LLC**

Mailing Address 1100 Spring St Suite 360

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2014

City	State	Zip Code
Atlanta	GA	30309

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
fundraising fee debt paymentCategory/  
Type

Transaction ID : D466433

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

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

4100.00



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. United States Postal Service**

Mailing Address Conway Main PO

City	State	Zip Code
Conway	SC	29526-9998

Purpose of Disbursement  
postage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 17 / 2014

Amount of Each Disbursement this Period

5.60
------

Transaction ID : D469253

**B. Verizon Wireless**

Mailing Address 2709 Church Street

City	State	Zip Code
Conway	SC	29526

Purpose of Disbursement  
cell phone service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 11 / 2014

Amount of Each Disbursement this Period

287.31
--------

Transaction ID : D467481

**C. Verizon Wireless**

Mailing Address 2709 Church Street

City	State	Zip Code
Conway	SC	29526

Purpose of Disbursement  
campaign cell service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 04 / 2014

Amount of Each Disbursement this Period

295.75
--------

Transaction ID : D465024

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

588.66

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address 2709 Church Street

City	State	Zip Code
Conway	SC	29526

Purpose of Disbursement  
campaign cell service

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		07		2014

Amount of Each Disbursement this Period

115.00
--------

Transaction ID : D466222

**B. Verizon Wireless**

Mailing Address 2709 Church Street

City	State	Zip Code
Conway	SC	29526

Purpose of Disbursement  
campaign cell services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		13		2014

Amount of Each Disbursement this Period

307.83
--------

Transaction ID : D466226

**C. Woodfield Group Inc.**

Mailing Address 1118 Old Breckenridge Lane

City	State	Zip Code
Montgomery	AL	36117

Purpose of Disbursement  
Consulting Services (FEC Compliance/Regulations)

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		04		2014

Amount of Each Disbursement this Period

1200.00
---------

Transaction ID : D465026

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

1622.83



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

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L776

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

5000.00

Cumulative Payment To Date

2000.00

Balance Outstanding at Close of This Period

3000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
12 30 / 2011

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3000.00

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

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

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

PAGE 37 OF 71

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L777

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
02 / 01 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

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

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

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

PAGE 38 OF 71

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L779

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
02 / 14 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L792

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

13000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

13000.00

**TERMS**

Date Incurred

M 03 / D 05 / Y 2012

Date Due

M M / D D / Y none

Interest Rate

none % (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

13000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L800

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

51000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

51000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
03 / 30 / 2012

Date Due

M M / D D / Y Y Y Y  
 / / none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

51000.00

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

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L802

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M 03 / D 14 / Y 2012

Date Due

M M / D D / Y none

Interest Rate

none % (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L803

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M 03 / D 14 / Y 2012

Date Due

M M / D D / Y non

Interest Rate

none % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L818

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
05 / 14 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

25000.00

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

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

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

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L823

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
05 / 21 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L825

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

25000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

25000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
05 / 30 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

25000.00

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

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

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

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L826

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

30000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 04 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

30000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 47 OF 71

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L828

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

30000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 07 / 2012

Date Due

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

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

30000.00

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

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

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

PAGE 48 OF 71

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L830

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

26000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

26000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 11 / 2012

Date Due

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

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

26000.00

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

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



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

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L834

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☐ General☒ Other (specify) ▼

Runoff

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

7000.00

Cumulative Payment To Date

6700.00

Balance Outstanding at Close of This Period

300.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 26 / 2012

Date Due

M M / D D / Y Y Y Y  
 / / none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

300.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L839

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☐ General☒ Other (specify) ▼

Runoff

Mailing Address  
1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

3500.00

Cumulative Payment To Date

2500.00

Balance Outstanding at Close of This Period

1000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
07 / 10 / 2012

Date Due

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

Interest Rate

none % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L840

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☐ General☒ Other (specify) ▼

Runoff

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

2500.00

Cumulative Payment To Date

2000.00

Balance Outstanding at Close of This Period

500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 30 / 2012

Date Due

M M / D D / Y Y Y Y  
 / / none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

500.00

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

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

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

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L846

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

1300.00

Balance Outstanding at Close of This Period

8700.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
08 / 06 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

8700.00

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

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

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

PAGE 53 OF 71

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L854

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
08 / 17 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

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

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

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

PAGE 54 OF 71

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L855

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
08 / 20 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 55 OF 71

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L856

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
08 / 20 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 56 OF 71

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L862

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Gloria Bromell Tinubu PERS FUNDS

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

3000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3000.00

**TERMS**

Date Incurred

M M / D D / Y Y  
09 / 19 / 2012

Date Due

M M / D D / Y Y  
no due date

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3000.00

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

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



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

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L868

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
10 / 25 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

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

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

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

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L870

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

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

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

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

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

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

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Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L872

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
11 / 13 / 2012

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

15000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 60 OF 71

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L876

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

2500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
12 / 26 / 2012

Date Due

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

Interest Rate

none % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2500.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 61 OF 71

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L877

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
12 / 26 / 2012

Date Due

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

Interest Rate

none % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

5000.00

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

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

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

PAGE 62 OF 71

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L879

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

**TERMS**

Date Incurred

M M / D D / Y Y  
12 31 / 2012

Date Due

M M / D D / Y Y  
none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 63 OF 71

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L881

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 03 / 2013

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1000.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 64 OF 71

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L884

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
06 / 28 / 2013

Date Due

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

Interest Rate

0.00

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

500.00

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

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



**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 65 OF 71

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L885

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼Mailing Address  
1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
07 / 01 / 2013

Date Due

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

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

200.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 66 OF 71

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L886

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Gloria Bromell Tinubu PERS FUNDS

Election: 2012

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

3500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

3500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
07 / 09 / 2013

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none % (apr)

Secured:

☐ Yes ☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

3500.00

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

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

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

PAGE 67 OF 71

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L903

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

1500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1500.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
09 / 30 / 2013

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

none

% (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

1500.00

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

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

**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 68 OF 71

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L915

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

700.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

700.00

**TERMS**

Date Incurred

M M / D D / Y Y Y Y  
11 / 15 / 2013

Date Due

M M / D D / Y Y Y Y  
none

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

700.00

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

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

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

PAGE 69 OF 71

Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L920

Gloria Bromell Tinubu for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

**[PERSONAL FUNDS]**

Election: 2014

Gloria Bromell Tinubu PERS FUNDS

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

**TERMS**

Date Incurred

M M / D D / Y Y  
02 / 13 / 2014

Date Due

M M / D D / Y Y  
nonr

Interest Rate

none % (apr)

Secured:

☐ Yes☒ No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

10000.00

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

337400.00

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

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 70 OF 71

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Lake Research Partners Inc**Nature of Debt (Purpose):  
polling and survey services

Mailing Address 1726 M Street NW Suite 1100

City State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

6500.00

**Transaction ID : D426709**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mad Dog Mail Inc**Nature of Debt (Purpose):  
campaign mailing/advertisement

Mailing Address 5542 First Coast Highway Suite 300

City State

Zip Code

Fernandina Beach

FL

32034

Outstanding Balance Beginning This Period

500.00

**Transaction ID : D426708**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mr Reginald Poplus**Nature of Debt (Purpose):  
Consulting Services - management

Mailing Address 2475 Enon Rd

City

State

Zip Code

Atlanta

GA

30331

Outstanding Balance Beginning This Period

4191.66

**Transaction ID : D441821**

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4191.66

1) **SUBTOTALS** This Period This Page (optional) ..... ▶

11191.66

2) **TOTALS** This Period (last page this line number only) ..... ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

0.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 71 OF 71

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Mr. James E. Smith Jr. P.A**Nature of Debt (Purpose):  
legal services

Mailing Address 1422 Laurel Street

City State

Zip Code

Columbia

SC

29201

Outstanding Balance Beginning This Period

600.00

Transaction ID : D426712

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

600.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**The Oblander Group LLC**Nature of Debt (Purpose):  
consulting services-fundraising

Mailing Address 1100 Spring St Suite 360

City State

Zip Code

Atlanta

GA

30309

Outstanding Balance Beginning This Period

2500.00

Transaction ID : D426710

Amount Incurred This Period

0.00

Payment This Period

1600.00

Outstanding Balance at Close of This Period

900.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ..... ►

1500.00

2) **TOTALS** This Period (last page this line number only) ..... ►

12691.66

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ►

337400.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

350091.66