

# 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 REPORT  NEW (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  /  /  in the State of

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

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

Election on  /  /  in the State of

5. Covering Period

/  /

through

/  /

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

Type or Print Name of Treasurer Mr Joseph Emerson Washington

Signature of Treasurer Mr Joseph Emerson Washington

**[Electronically Filed]**

Date

/  /

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								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Gloria Bromell Tinubu for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	61094.83	291631.45
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	61094.83	290381.45
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	95623.34	589672.43
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	95623.34	589672.43
8. Cash on Hand at Close of Reporting Period (from Line 27).....	359.68	
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).....	347207.07	

**For further information contact:**

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

The debts to vendors previously reported were overstated due to an inaccurate estimate. The debt was reduced by \$2,550. The vendors and amount of the reduction are listed below and on Sch D. David Brown-\$625 Tyhesh Cross-\$300 Tyra Ford-\$250 Wayne Green-\$250 Allen Thomas-\$250 Asa Fludd-\$125 LaNina Linton-\$125 Jacqueline Ellerbe-Shannon-\$125 Amy Brown-\$125 Craig Conwell-\$125 Donald Gilliard-\$250

Form/Schedule:  
Transaction ID:

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

**Gloria Bromell Tinubu for Congress**

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

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="MM 11"/> / <input type="text" value="DD 06"/> / <input type="text" value="YYYY 2012"/> (date of general election)	COLUMN C Total for <input type="text" value="MM 11"/> / <input type="text" value="DD 07"/> / <input type="text" value="YYYY 2012"/> (date after general election)  through <input type="text" value="MM 11"/> / <input type="text" value="DD 26"/> / <input type="text" value="YYYY 2012"/> (last day of reporting period)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="25075.00"/>	<input type="text" value="134488.01"/>	<input type="text" value="250.00"/>
(ii) Unitemized		
<input type="text" value="12519.83"/>	<input type="text" value="63113.44"/>	<input type="text" value="832.83"/>
(iii) Total of contributions from individuals		
<input type="text" value="37594.83"/>	<input type="text" value="197601.45"/>	<input type="text" value="1082.83"/>
(b) Political Party Committees		
<input type="text" value="4000.00"/>	<input type="text" value="4000.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="19500.00"/>	<input type="text" value="82500.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 117

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	7530.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
61094.83	291631.45	1082.83
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
30000.00	317000.00	15000.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
30000.00	317000.00	15000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	359.31	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
91094.83	608990.76	16082.83

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 117

Write or Type Committee Name

Gloria Bromell Tinubu for Congress

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

**II. DISBURSEMENTS**

	<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="95623.34"/>	<input type="text" value="589672.43"/>	<input type="text" value="23441.48"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="3000.00"/>	<input type="text" value="9300.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="3000.00"/>	<input type="text" value="9300.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="0.00"/>	<input type="text" value="1250.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 7 / 117

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

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

0.00	1250.00	0.00
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**21. OTHER DISBURSEMENTS**

0.00	1050.00	0.00
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**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

98623.34	601272.43	23441.48
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

61094.83	290381.45	1082.83
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

95623.34	589672.43	23441.48
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	7888.19
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	91094.83
25. SUBTOTAL (add Line 23 and Line 24).....	98983.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	98623.34
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	359.68

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 117	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James A Battle Jr.**

Mailing Address Post Office Box 536

City State Zip Code  
Nichols SC 29581

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

Name of Employer Occupation  
South Carolina Government Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 22 / 2012

**Transaction ID : C8941911**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 100 Island View Cir

City State Zip Code  
Elgin SC 29045-9180

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

Name of Employer Occupation  
Parker Poe Adams & Bernstein Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2012

**Transaction ID : C8936491**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address Post Office Box 186

City State Zip Code  
Timmonsville SC 29161-1205

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

Name of Employer Occupation  
Foe Toe Mprints Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2012

**Transaction ID : C8938459**

Amount of Each Receipt this Period  
100.00

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

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

1400.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steele Bremner**

Mailing Address 204 Emerson Loop

City State Zip Code  
Pawleys Island SC 29585

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

Name of Employer Occupation Information Requested  
Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 18 / 2012

**Transaction ID : C8920935**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 1941 Highway 177

City State Zip Code  
Wallace SC 29596-5313

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

Name of Employer Occupation Information Requested  
N/A N/A

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
391.36

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2012

**Transaction ID : C9108192**

Amount of Each Receipt this Period  
155.00

\* In-Kind: election day expenses

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

Mailing Address 109 Penal St

City State Zip Code  
Darlington SC 29532

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

Name of Employer Occupation  
self employed cosmotolgist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : C8933877**

Amount of Each Receipt this Period  
1500.00

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

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

1855.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy Cave**

Mailing Address 106 Jutland Ln

City State Zip Code  
Georgetown SC 29440

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

Name of Employer Occupation  
SC COASTAL CONSERVATION LEAGUES Office Director

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

**Transaction ID : C8944772**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**Cesar for our Atlanta**

Mailing Address 676 Queen St SW

City State Zip Code  
Atlanta GA 30310-2612

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2012

**Transaction ID : C8953068**

Amount of Each Receipt this Period  
650.00

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

Mailing Address 522 Wisteria Dr

City State Zip Code  
Florence SC 29501-5756

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

Name of Employer Occupation  
Florence School District One teacher

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

**Transaction ID : C8943722**

Amount of Each Receipt this Period  
250.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**R F Davis**

Mailing Address 2315 Bluff Rd

City Marion State SC Zip Code 29571

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

Name of Employer Self Employed Occupation Pastor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : C8918270**

Amount of Each Receipt this Period  
1200.00

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

Mailing Address Post Office Box 23285

City Columbia State SC Zip Code 29224

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : C9108238**

Amount of Each Receipt this Period  
500.00

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

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : C8940592**

Amount of Each Receipt this Period  
250.00

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

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

1950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Florence County Democratic Party**

Mailing Address P.O. Box 13063

City Florence	State SC	Zip Code 29504
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 260.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : C8944819**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 260.00

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

Mailing Address 701 Smith St.

City Marion	State SC	Zip Code 29571
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FEC ID number of contributing federal political committee. **C**

Name of Employer People Alliance for Change	Occupation employee
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

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

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : C8940604**

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

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

Mailing Address 527 Mockingbird Ave

City Myrtle Beach	State SC	Zip Code 29577-5028
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FEC ID number of contributing federal political committee. **C**

Name of Employer retired	Occupation retired
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Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 675.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 28 / 2012

**Transaction ID : C8931627**

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

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

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

\_\_\_\_\_ 760.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sheila C Gallagher</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2012	
Mailing Address 1717 Raven Drive		<b>Transaction ID : C8944770</b>	
City Florence	State SC	Zip Code 29505	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 200.00	
Name of Employer South Carolina Democratic Party	Occupation Florence County Democratic Chair		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) <b>B. Norman Gamble</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2012	
Mailing Address 653 Council Rd.		<b>Transaction ID : C8938561</b>	
City Salters	State SC	Zip Code 29590	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 300.00	
Name of Employer Pee Dee Baptist Association	Occupation Executive Board Member		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Belton Grooms</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2012	
Mailing Address 1071 Highway 1 S		<b>Transaction ID : C8956237</b>	
City Cheraw	State SC	Zip Code 29520	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer Grooms Funeral Home and Memorial Chape	Occupation Owner		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Charles Hall**

Mailing Address 2107 E Lake Rd NE

City Atlanta State GA Zip Code 30307-1835

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

Name of Employer Retired Occupation landscape architect

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : C8936964**

Amount of Each Receipt this Period  
**25.00**

**B.** Full Name (Last, First, Middle Initial)  
**Committee To Elect Hank Johnson**

Mailing Address 4262 Clausell Ct

City Decatur State GA Zip Code 30035-1914

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

Name of Employer U. S. House of Representatives Occupation U. S. Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : C8936756**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address PO Box 1090

City Columbia State SC Zip Code 29202-1090

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date **4500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : C8903058**

Amount of Each Receipt this Period  
**2000.00**

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

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

**3025.00**

**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 15 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jaime Harrison**

Mailing Address 11 Arsenal Hill Ct

City Columbia State SC Zip Code 29201-2766

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

Name of Employer Podesta Group Occupation Principal

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1050.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : C8922046**

Amount of Each Receipt this Period  
300.00

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

Mailing Address Post Office Box 544

City Marion State SC Zip Code 29701

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

Name of Employer American Waste Systems Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : C8941879**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 410 Wood Street

City Georgetown State SC Zip Code 29440

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
365.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : C8931590**

Amount of Each Receipt this Period  
65.00

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

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

615.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. George Jebaily</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 19 / 2012
Mailing Address Post Office Box 1871		<b>Transaction ID : C8906389</b>
City Florence	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Jebaily Law Firm	Occupation Attorney	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Mary Jeffcoat</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 24 / 2012
Mailing Address PO Box 3678		<b>Transaction ID : C8920255</b>
City Myrtle Beach	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Long Bay Professional Services	Occupation Consultant	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>C. Joan D Johnakin</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2012
Mailing Address P.O. Box 1201		<b>Transaction ID : C8941972</b>
City Bennettsville	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Marlboro County Child Protective Servi	Occupation Director	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jonas Kennedy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2012	
Mailing Address 1043 Kennedy Rd		<b>Transaction ID : C8942000</b>	
City Bennettsville	State SC	Zip Code 29512	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Self-Employed	Occupation Owner/Farmer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) <b>B. Jonas Kennedy</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 31 / 2012	
Mailing Address 1043 Kennedy Rd		<b>Transaction ID : C8942001</b>	
City Bennettsville	State SC	Zip Code 29512	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Self-Employed	Occupation Owner/Farmer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) <b>C. Noel Khalil</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2012	
Mailing Address 1718 Peachtree St NW Ste 684		<b>Transaction ID : C8926276</b>	
City Atlanta	State GA	Zip Code 30309-2496	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Columbia Residential	Occupation Real Estate		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

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

Mailing Address 85 Olde Springs Rd

City Columbia State SC Zip Code 29223

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

Name of Employer: Enviro-Ag Services Occupation: Horticulturist/Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1750.00

Date of Receipt: 10 / 22 / 2012

**Transaction ID : C8910469**

Amount of Each Receipt this Period: 500.00

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

Mailing Address 616 8th Ave S

City Surfside Beach State SC Zip Code 29575-3324

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

Name of Employer: Self Occupation: Writer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 10 / 18 / 2012

**Transaction ID : C8899050**

Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Preston McKeever-Floyd**

Mailing Address PO Box 391

City Conway State SC Zip Code 29528-0391

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

Name of Employer: Coastal Carolina University Occupation: Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 11 / 05 / 2012

**Transaction ID : C8952455**

Amount of Each Receipt this Period: 100.00

**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: (check only one)	PAGE 19 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joan Meacham**

Mailing Address 496 Golf Dr

City State Zip Code  
Georgetown SC 29440-8448

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

Name of Employer Occupation  
prudential myrtle beach real estate realtor/retired state employee

Receipt For: 2012  
 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  
10 23 2012

**Transaction ID : C8918324**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**John Wesley Miller Jr.**

Mailing Address 1501 N Carnaby Cir

City State Zip Code  
Florence SC 29506-6800

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

Name of Employer Occupation  
Retired Grants Administrator

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 23 2012

**Transaction ID : C8918510**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2218 Wellwood Rd

City State Zip Code  
Marion SC 29571

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

Name of Employer Occupation  
HealthSouth of Florence Hospital System Registered Nurse

Receipt For: 2012  
 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  
10 23 2012

**Transaction ID : C8942766**

Amount of Each Receipt this Period  
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Moyer**

Mailing Address 1556 Brookgreen Dr

City State Zip Code  
Myrtle Beach SC 29577-5870

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

Name of Employer Occupation  
Allergy, Asthma & Sinus Center Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

**Transaction ID : C8941192**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address Post Office Box 5

City State Zip Code  
Hopkins SC 29061

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

Name of Employer Occupation  
South Carolina State Legislature Representative

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 22 / 2012

**Transaction ID : C8917065**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 420 W Cheves ST

City State Zip Code  
Florence SC 29501

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

Name of Employer Occupation  
Nesmith Insurance Agency, LLC Agent

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 05 / 2012

**Transaction ID : C9101069**

Amount of Each Receipt this Period  
500.00

\* In-Kind: florence office rental

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Harry Ott**

Mailing Address 461 Bull Swamp Rd

City	State	Zip Code
Saint Matthews	SC	29135

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

Name of Employer	Occupation
SC State Legislature	Minority Leader

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : C8928022**

Amount of Each Receipt this Period

1000.00

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

Mailing Address 873 Long Point Rd

City	State	Zip Code
Mount Pleasant	SC	29464-8203

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

Name of Employer	Occupation
Retired	Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : C8941191**

Amount of Each Receipt this Period

200.00

**C.** Full Name (Last, First, Middle Initial)  
**Aprile Pittman M.D.**

Mailing Address 805 Forest Overlook Dr SW

City	State	Zip Code
Atlanta	GA	30331-7389

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

Name of Employer	Occupation
Concentra Medical Centers	Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : C8946682**

Amount of Each Receipt this Period

1500.00

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Susan Redge</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 20 / 2012
Mailing Address 1102 Osprey Ct		<b>Transaction ID : C8905430</b>
City Murrells Inlet	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SCDMH	Occupation physician	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. Michael Roberts</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 18 / 2012
Mailing Address 106 Furman Cir		<b>Transaction ID : C8903529</b>
City Conway	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Coastal Carolina University	Occupation Dean	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1050.00	

Full Name (Last, First, Middle Initial) <b>C. Charles F Roche III</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2012
Mailing Address 238 Seville Dr		<b>Transaction ID : C8917864</b>
City Murrells Inlet	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer retired	Occupation retired Military	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

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

Mailing Address **PO Box 777**

City **Georgetown** State **SC** Zip Code **29442-0777**

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

Name of Employer **ArcelorMittal Steel** Occupation **Union President**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 31 / 2012**

**Transaction ID : C8940506**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **1675 Southwood Dr**

City **Surfside Beach** State **SC** Zip Code **29575-5329**

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

Name of Employer **N/A** Occupation **Retired**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2012**

**Transaction ID : C8947520**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address **6514 Bryant St. Apt 1**

City **Myrtle Beach** State **SC** Zip Code **29572**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 22 / 2012**

**Transaction ID : C8910466**

Amount of Each Receipt this Period  
**300.00**

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

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

**1000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Eldridge Suggs**

Mailing Address 3500 Lenox Rd NE  
Ste 1500

City Atlanta State GA Zip Code 30326-4231

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

Name of Employer me Occupation Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 27 / 2012

**Transaction ID : C8929802**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address PO Box 15117

City Florence State SC Zip Code 29506-0117

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

Name of Employer Francis Marion University Occupation College Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : C8926803**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address PO Box 15117

City Florence State SC Zip Code 29506-0117

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

Name of Employer Francis Marion University Occupation College Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : C8936953**

Amount of Each Receipt this Period  
 100.00

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

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

1100.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>Milton W. Troy</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address PO Box 412		<b>Transaction ID : C8920225</b>
City Mullins	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer n/a	Occupation Retired Military	Election Cycle-to-Date 420.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Milton W. Troy</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address PO Box 412		<b>Transaction ID : C8947883</b>
City Mullins	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer n/a	Occupation Retired Military	Election Cycle-to-Date 420.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Jacquelyn Troy-Johnson</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 5014 Milton Troy Ave.		<b>Transaction ID : C8940608</b>
City Mullins	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Troy Johnson Intergenerational	Occupation Owner	Election Cycle-to-Date 300.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	420.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 117
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Washington**

Mailing Address 4610 Moonbeam Ct

City Myrtle Beach State SC Zip Code 29579

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

Name of Employer retired Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : C8920219**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Women's Campaign Forum PAC**

Mailing Address 1900 L Street NW Suite 500

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012

**Transaction ID : C8931589**

Amount of Each Receipt this Period  
**250.00**

**C.** 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 Allergy, Asthma & Sinus Center Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : C8947251**

Amount of Each Receipt this Period  
**-500.00**

**[MEMO ITEM]**  
\*

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

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

**500.00**

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 117  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** 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 Allergy, Asthma & Sinus Center Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify) Runoff

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 01 / 2012

**Transaction ID : C8947250**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**  
\*

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

0.00

25075.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 117	
	<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**

**A.** Full Name (Last, First, Middle Initial)  
**South Carolina Democratic Party**

Mailing Address **PO Box 5965**

City **Columbia** State **SC** Zip Code **29250**

FEC ID number of contributing federal political committee. **C C00007658**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2012  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_ 4000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : C8928310**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 4000.00

**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  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  
 \_\_\_\_\_

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

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date  
 \_\_\_\_\_

Date of Receipt  
 M M 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).....

\_\_\_\_\_ 4000.00

\_\_\_\_\_ 4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 117
	<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) <b>COMMUNICATION WORKERS OF AMERICA</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 501 THIRD STREET NW		<b>Transaction ID : C8910228</b>
City	State Zip Code WASHINGTON DC 20001	
FEC ID number of contributing federal political committee.	C C70000211	Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 26 / 2012
Mailing Address 7234 PARKWAY DRIVE		<b>Transaction ID : C8929237</b>
City	State Zip Code HANOVER MD 21076	
FEC ID number of contributing federal political committee.	C C00000885	Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) MACHINISTS NON PARTISAN POLITICAL LEAGUE OF THE INTERNATIONAL ASSOCIATION OF MACHINISTS &		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 9000 MACHINISTS PLACE		<b>Transaction ID : C8908905</b>
City	State Zip Code UPPER MARLBORO MD 20772	
FEC ID number of contributing federal political committee.	C C00002469	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 117
	<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) <b>OPEIU</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>11 / 01 / 2012</b>
Mailing Address <b>80 EIGHTH AVENUE SUITE 610</b>		<b>Transaction ID : C8941931</b>
City <b>NEW YORK</b>	State <b>NY</b>	
Zip Code <b>10011</b>		Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C C70004650</b>	Name of Employer	Occupation
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POLITICAL ACTION LEAGUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>11 / 01 / 2012</b>
Mailing Address <b>1750 NEW YORK AVENUE, NW</b>		<b>Transaction ID : C8941928</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20006</b>		Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C C00007542</b>	Name of Employer	Occupation
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>11 / 06 / 2012</b>
Mailing Address <b>THREE PARK PLACE</b>		<b>Transaction ID : C9097493</b>
City <b>ANNAPOLIS</b>	State <b>MD</b>	
Zip Code <b>21401</b>		Amount of Each Receipt this Period <b>2500.00</b>
FEC ID number of contributing federal political committee. <b>C C00012476</b>	Name of Employer	Occupation
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2500.00</b>	

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

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

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

FOR LINE NUMBER: PAGE 31 OF 117  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**UNITED TRANSPORTATION UNION POLITICAL ACTION COMMITTEE (UTU PAC)**

Mailing Address **24950 COUNTRY CLUB BLVD, STE 340**

City **NORTH OLMSTED** State **OH** Zip Code **44070**

FEC ID number of contributing federal political committee. **C C00001636**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 / 29 / 2012**

**Transaction ID : C8933499**

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  General  
 Other (specify)

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  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).....

**5000.00**

**19500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 117
	<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) <b>A. Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 25 / 2012	
Mailing Address 1403 7th Ave		<b>Transaction ID : C8925918</b>	
City Conway    State SC    Zip Code 29526	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C H2SC07108	Name of Employer Coastal Carolina University    Occupation Economist		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 324530.00		

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2012	
Mailing Address 1403 7th Ave		<b>Transaction ID : C8943258</b>	
City Conway    State SC    Zip Code 29526	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C H2SC07108	Name of Employer Coastal Carolina University    Occupation Economist		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 324530.00		

Full Name (Last, First, Middle Initial) <b>C. Gloria Bromell Tinubu</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 13 / 2012	
Mailing Address 1403 7th Ave		<b>Transaction ID : C9097494</b>	
City Conway    State SC    Zip Code 29526	Amount of Each Receipt this Period 15000.00		
FEC ID number of contributing federal political committee. C H2SC07108	Name of Employer Coastal Carolina University    Occupation Economist		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 15000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	30000.00
<b>TOTAL</b> This Period (last page this line number only).....	30000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

**A. A-1 Signs & Graphics**

Full Name (Last, First, Middle Initial)  
Mailing Address 1610 4th ave

City Conway State SC Zip Code 29526

Purpose of Disbursement campaign signs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 06 / 2012

Amount of Each Disbursement this Period: 37.50

Transaction ID : D426023

**B. Abar Hutton Media**

Full Name (Last, First, Middle Initial)  
Mailing Address 6190 Grovdale Ct Suite 200

City Alexandria State VA Zip Code 22310

Purpose of Disbursement media buy- television promo

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 24 / 2012

Amount of Each Disbursement this Period: 4520.00

Transaction ID : D421599

**c. Abar Hutton Media**

Full Name (Last, First, Middle Initial)  
Mailing Address 6190 Grovdale Ct Suite 200

City Alexandria State VA Zip Code 22310

Purpose of Disbursement media buy- television promo

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 23 / 2012

Amount of Each Disbursement this Period: 7020.00

Transaction ID : D421600

**SUBTOTAL** of Disbursements This Page (optional) ..... 11577.50

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Abar Hutton Media</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 6190 Grovdale Ct Suite 200		Amount of Each Disbursement this Period 5520.00 <b>Transaction ID : D421601</b>
City Alexandria State VA Zip Code 22310	Purpose of Disbursement media buy- television promo	
Candidate Name	Category/ Type	
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) <b>B. Abar Hutton Media</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 6190 Grovdale Ct Suite 200		Amount of Each Disbursement this Period 5020.00 <b>Transaction ID : D421751</b>
City Alexandria State VA Zip Code 22310	Purpose of Disbursement media buy- television promo	
Candidate Name	Category/ Type	
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) <b>C. Abar Hutton Media</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 6190 Grovdale Ct Suite 200		Amount of Each Disbursement this Period 10520.00 <b>Transaction ID : D422148</b>
City Alexandria State VA Zip Code 22310	Purpose of Disbursement media buy- television promo	
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	21060.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ellen Baldwin</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 903 Georgetown St			Amount of Each Disbursement this Period 100.00 <b>Transaction ID : D422135</b>
City Marion	State SC	Zip Code 29571	
Purpose of Disbursement gotv field ops-travel		Category/ Type	
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) <b>B. Ellen Baldwin</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 903 Georgetown St			Amount of Each Disbursement this Period 100.00 <b>Transaction ID : D422124</b>
City Marion	State SC	Zip Code 29571	
Purpose of Disbursement gotv field ops-travel		Category/ Type	
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) <b>c. Linda Becote</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 222 Cameron Lance			Amount of Each Disbursement this Period 450.00 <b>Transaction ID : D422118</b>
City Florence	State SC	Zip Code 29501	
Purpose of Disbursement gotv field ops-travel		Category/ Type	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Linda Becote</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012		
Mailing Address 222 Cameron Lance			Amount of Each Disbursement this Period 450.00		
City Florence	State SC	Zip Code 29501	Transaction ID : D422131		
Purpose of Disbursement gotv field ops-travel expense		Category/ Type			
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) <b>B. Amy Brown</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012		
Mailing Address 101 Mill St			Amount of Each Disbursement this Period 250.00		
City Chesterfield	State SC	Zip Code 29709	Transaction ID : D424337		
Purpose of Disbursement consulting services-field coordination		Category/ Type			
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) <b>c. Mr. David Brown</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012		
Mailing Address 1941 Highway 177			Amount of Each Disbursement this Period 1250.00		
City Wallace	State SC	Zip Code 29596-5313	Transaction ID : D424342		
Purpose of Disbursement consulting srvs- field direction		Category/ Type			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1950.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 117			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. David Brown</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 1941 Highway 177		Amount of Each Disbursement this Period 155.00
City Wallace	State SC	Zip Code 29596-5313
Purpose of Disbursement election day expenses	Category/Type	
Candidate Name	Transaction ID : D426717	
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)	* In-Kind Received
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City of Conway</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address Post Office 1507		Amount of Each Disbursement this Period 42.06
City Conway	State SC	Zip Code 29528-1075
Purpose of Disbursement water/sewage/trash collection services	Category/Type	
Candidate Name	Transaction ID : D425964	
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) <b>c. Conway National Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address PO Box 320		Amount of Each Disbursement this Period 30.00
City Conway	State SC	Zip Code 29528
Purpose of Disbursement stop payment fee	Category/Type	
Candidate Name	Transaction ID : D426045	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	227.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Conway National Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address PO Box 320		Amount of Each Disbursement this Period 500.00 Transaction ID : D422149
City Conway	State SC	
Zip Code 29528	Purpose of Disbursement check printing	Category/ Type
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) <b>B. Mr. Craig Conwell</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1515 5th Ave		Amount of Each Disbursement this Period 100.00 Transaction ID : D422256
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement govt election day expense	Category/ Type
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) <b>c. Mr. Craig Conwell</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1515 5th Ave		Amount of Each Disbursement this Period 250.00 Transaction ID : D424338
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement consulting services-field coordination	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	505.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cornerstone 501 Plaza Escrow Act</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1780 Highway 501		Amount of Each Disbursement this Period 1904.41 <b>Transaction ID : D424331</b>
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement office rent	Category/ Type
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) <b>B. Mr. Tyhesh Cross</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 45 Briarwood Pl		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : D424345</b>
City Sanford	State NC	
Zip Code 27332-2509	Purpose of Disbursement consulting services-photography/transportation	Category/ Type
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) <b>c. Cumulus Broadcast System</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 11640 Hwy 17 Bypass		Amount of Each Disbursement this Period 2093.00 <b>Transaction ID : D421928</b>
City Murrells Inlet	State SC	
Zip Code 29576	Purpose of Disbursement radio advertisement	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4597.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 117	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cumulus Broadcast System</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2012</b>
Mailing Address 11640 Hwy 17 Bypass		Amount of Each Disbursement this Period <b>2657.00</b>
City Murrells Inlet	State SC	Zip Code 29576
Purpose of Disbursement radio advertisement	Category/Type	
Candidate Name	Transaction ID : <b>D421670</b>	
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) <b>B. Cumulus Broadcast System</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 25 / 2012</b>
Mailing Address 11640 Hwy 17 Bypass		Amount of Each Disbursement this Period <b>2657.00</b>
City Murrells Inlet	State SC	Zip Code 29576
Purpose of Disbursement radio advertisement	Category/Type	
Candidate Name	Transaction ID : <b>D421671</b>	
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) <b>C. Ms. Eartha Davis</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 02 / 2012</b>
Mailing Address 121 Marshall St.		Amount of Each Disbursement this Period <b>150.00</b>
City Mullins	State SC	Zip Code 29574
Purpose of Disbursement gotv field op-travel	Category/Type	
Candidate Name	Transaction ID : <b>D422137</b>	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5464.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dollar General #8531</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012		
Mailing Address 1500 4th Ave			Amount of Each Disbursement this Period 33.02		
City Conway	State SC	Zip Code 29526	Transaction ID : <b>D425987</b>		
Purpose of Disbursement purchase of prepaid cell		Category/ Type			
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) <b>B. Dollar General #8531</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012		
Mailing Address 1500 4th Ave			Amount of Each Disbursement this Period 33.02		
City Conway	State SC	Zip Code 29526	Transaction ID : <b>D425989</b>		
Purpose of Disbursement purchase of prepaid cell		Category/ Type			
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) <b>c. Dollar General #8531</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012		
Mailing Address 1500 4th Ave			Amount of Each Disbursement this Period 33.02		
City Conway	State SC	Zip Code 29526	Transaction ID : <b>D425990</b>		
Purpose of Disbursement purchase of prepaid cell		Category/ Type			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	99.06
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 117	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Dollar General #8531</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period <b>33.02</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement purchase prepaid cell	Category/Type	<b>Transaction ID : D425991</b>
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) <b>B. Dollar General #8531</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 06 / 2012</b>
Mailing Address 1500 4th Ave		Amount of Each Disbursement this Period <b>13.77</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement office supplies	Category/Type	<b>Transaction ID : D426019</b>
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) <b>c. Mrs. Regina Dyer</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 14 / 2012</b>
Mailing Address P.O. Box 438 Hwy 41A South		Amount of Each Disbursement this Period <b>875.00</b>
City Centenary	State SC Zip Code 29519	
Purpose of Disbursement consulting services-field coordination	Category/Type	<b>Transaction ID : D424343</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>921.79</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Regina Dyer</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address P.O. Box 438 Hwy 41A South		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D422255</b>
City Centenary	State SC Zip Code 29519	
Purpose of Disbursement gotv election day expense	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jacqueline Ellerbe-Shannon</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 106 Agerton St		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D424336</b>
City Cheraw	State SC Zip Code 29520-3308	
Purpose of Disbursement consulting services-field coordination	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jacqueline Ellerbe-Shannon</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 106 Agerton St		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : D422249</b>
City Cheraw	State SC Zip Code 29520-3308	
Purpose of Disbursement gotv election day expense	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Barbara Faison</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 2229 Front St			Amount of Each Disbursement this Period 350.00 <b>Transaction ID : D422128</b>
City Georgetown	State SC	Zip Code 29440	
Purpose of Disbursement gotv field ops-travel expense		Category/ Type	
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) <b>B. Barbara Faison</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 2229 Front St			Amount of Each Disbursement this Period 350.00 <b>Transaction ID : D422115</b>
City Georgetown	State SC	Zip Code 29440	
Purpose of Disbursement gotv field ops- travel		Category/ Type	
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) <b>c. Helen Felder</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1500 6th Ave			Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D422258</b>
City Conway	State SC	Zip Code 29526	
Purpose of Disbursement cleaning services		Category/ Type	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	775.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Helen Felder</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D425967</b>
City Conway	State SC	
Purpose of Disbursement cleaning services	Candidate Name	Category/ Type
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) <b>B. Helen Felder</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D425968</b>
City Conway	State SC	
Purpose of Disbursement cleaning services	Candidate Name	Category/ Type
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) <b>C. Helen Felder</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2012
Mailing Address 1500 6th Ave		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : D426394</b>
City Conway	State SC	
Purpose of Disbursement cleaning services	Candidate Name	Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	225.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Fidelity Broadcasting</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address Post Office Box 2830		Amount of Each Disbursement this Period 1146.00
City Myrtle Beach	State SC	
Zip Code 29578	Purpose of Disbursement radio promo/advertisement	Transaction ID : D419277
Candidate Name	Category/Type	
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) <b>B. Fidelity Broadcasting</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address Post Office Box 2830		Amount of Each Disbursement this Period 1477.00
City Myrtle Beach	State SC	
Zip Code 29578	Purpose of Disbursement radio promo/advertisement	Transaction ID : D421591
Candidate Name	Category/Type	
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) <b>c. First Data Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 680.33
City Atlanta	State GA	
Zip Code 30342	Purpose of Disbursement credit card processing fee	Transaction ID : D422893
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3303.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Asa Fludd</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1302 Valparairo Dr. Apt L2		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D424334</b>
City Florence	State SC	
Zip Code 29501	Purpose of Disbursement consulting services-field coordination	Category/ Type
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) <b>B. Asa Fludd</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1302 Valparairo Dr. Apt L2		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D422254</b>
City Florence	State SC	
Zip Code 29501	Purpose of Disbursement gotv election day expense	Category/ Type
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) <b>c. Ms Tyra Ford</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 5020 Exodus Drive		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D422257</b>
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement gotv election day expense	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms Tyra Ford</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 5020 Exodus Drive		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D424346</b>
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement consulting services-field coordination	Category/ Type
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) <b>B. Phillis Gibson</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 418 Palm St		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : D422116</b>
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement gotv field ops-travel	Category/ Type
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) <b>C. Phillis Gibson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 418 Palm St		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : D422129</b>
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement gotv field ops-travel expense	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Pat Gibson-Hyde Moore</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 1007 Kershaw St		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D422130</b>
City Florence	State SC	
Zip Code 29506	Purpose of Disbursement gotv field ops-travel expense	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: District:	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	
<input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Pat Gibson-Hyde Moore</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 1007 Kershaw St		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D422117</b>
City Florence	State SC	
Zip Code 29506	Purpose of Disbursement gotv field ops-travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: District:	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	
<input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>c. Donald Gilliard</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 2229 Front St.		Amount of Each Disbursement this Period 335.00 <b>Transaction ID : D421597</b>
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement travel expense-gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	State: District:	
<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General	
<input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	735.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 117			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Donald Gilliard</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 2229 Front St.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D424339</b>
City Georgetown	State SC	
Zip Code 29440	Purpose of Disbursement consulting services-field organization	Category/ Type
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	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 40.00 <b>Transaction ID : D427030</b> <b>[MEMO ITEM]</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	Category/ Type
Candidate Name <b>Gloria Bromell Tinubu</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: SC District: 07	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 76.87 <b>Transaction ID : D427031</b> <b>[MEMO ITEM]</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement forgiveness of debt	Category/ Type
Candidate Name <b>Gloria Bromell Tinubu</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
State: SC District: 07	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial)  
**A. Glory Communications (WPDT Gospel 105.1)**

Mailing Address PO Box 1057

City Lake City State SC Zip Code 29560

Purpose of Disbursement radio advertisement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 26 / 2012

Amount of Each Disbursement this Period: 1420.00

Transaction ID : D421590

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

Mailing Address 1600 Amphitheatre Parkway

City Mountain View State CA Zip Code 94043

Purpose of Disbursement marketing/advertisement/email

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 02 / 2012

Amount of Each Disbursement this Period: 135.15

Transaction ID : D426009

Full Name (Last, First, Middle Initial)  
**C. Grand Villas World TourBeach Vacations**

Mailing Address 590 River Oaks Dr.

City Myrtle Beach State SC Zip Code 29579

Purpose of Disbursement campaign housing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 07 / 2012

Amount of Each Disbursement this Period: 146.64

Transaction ID : D424329

**SUBTOTAL** of Disbursements This Page (optional) ..... 1701.79

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr. Wayne Green</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1924 Rocking Chair Ct		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D424332</b>
City Dillon	State SC	
Purpose of Disbursement consulting services-field coordination		Category/ Type
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) <b>B. Mr. Wayne Green</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1924 Rocking Chair Ct		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D422251</b>
City Dillon	State SC	
Purpose of Disbursement govt election day expense		Category/ Type
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) <b>c. Dwane Heyward</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : D424341</b>
City Georgetown	State SC	
Purpose of Disbursement consulting srvs- financial srvs		Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2200.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 117			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. HTC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address Post Office Box 1819		Amount of Each Disbursement this Period 278.12
City Conway	State SC	
Zip Code 29528-1819	Purpose of Disbursement telephone services	Transaction ID : D425959
Candidate Name	Category/Type	
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) <b>B. James Jackson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 834 Marshall St.		Amount of Each Disbursement this Period 500.00
City Darlington	State SC	
Zip Code 29532	Purpose of Disbursement consulting services-field coordination	Transaction ID : D424347
Candidate Name	Category/Type	
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) <b>c. James Jackson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 834 Marshall St.		Amount of Each Disbursement this Period 200.00
City Darlington	State SC	
Zip Code 29532	Purpose of Disbursement gotv election day expense	Transaction ID : D422253
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	978.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Shawn Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 101 Mims Street		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D422248</b>
City Chesterfield	State SC	
Zip Code 29709	Purpose of Disbursement gotv field ops-travel expense	Category/ Type
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	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Shawn Johnson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 101 Mims Street		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D422125</b>
City Chesterfield	State SC	
Zip Code 29709	Purpose of Disbursement gotv field ops-travel expense	Category/ Type
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	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 49.00 <b>Transaction ID : D422097</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense-gas	Category/ Type
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	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	499.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kangaroo #3228</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 1600 Church Street			Amount of Each Disbursement this Period 43.56 <b>Transaction ID : D422098</b>
City Conway	State SC	Zip Code 29526	
Purpose of Disbursement travel expense-gas		Category/ Type	
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) <b>B. Kangaroo #3228</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1600 Church Street			Amount of Each Disbursement this Period 53.38 <b>Transaction ID : D422099</b>
City Conway	State SC	Zip Code 29526	
Purpose of Disbursement travel expense-gas		Category/ Type	
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) <b>C. Kangaroo #3228</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 1600 Church Street			Amount of Each Disbursement this Period 40.00 <b>Transaction ID : D422100</b>
City Conway	State SC	Zip Code 29526	
Purpose of Disbursement travel expense-gas		Category/ Type	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	136.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 117	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2012</b>
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period <b>42.00</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense-gas	Category/Type	<b>Transaction ID : D422101</b>
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) <b>B. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period <b>47.50</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense-gas	Category/Type	<b>Transaction ID : D422102</b>
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) <b>C. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 04 / 2012</b>
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period <b>44.44</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense-gas	Category/Type	<b>Transaction ID : D426014</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>133.94</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 34.00
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense-gas	Candidate Name	Transaction ID : D426016
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Kangaroo #3228</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1600 Church Street		Amount of Each Disbursement this Period 65.03
City Conway	State SC Zip Code 29526	
Purpose of Disbursement travel expense-gas	Candidate Name	Transaction ID : D426018
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Kangaroo Express #3064</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 3710 Hwy 501		Amount of Each Disbursement this Period 41.20
City Myrtle Beach	State SC Zip Code 29579	
Purpose of Disbursement travel expense-gas	Candidate Name	Transaction ID : D426032
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	140.23
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kangaroo Express #3064</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>
Mailing Address 3710 Hwy 501			Amount of Each Disbursement this Period <b>46.00</b> Transaction ID : D422095
City Myrtle Beach	State SC	Zip Code 29579	
Purpose of Disbursement travel expense-gas		Category/ Type	
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) <b>B. Kangaroo Express #3064</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2012</b>
Mailing Address 3710 Hwy 501			Amount of Each Disbursement this Period <b>43.00</b> Transaction ID : D422096
City Myrtle Beach	State SC	Zip Code 29579	
Purpose of Disbursement travel expense-gas		Category/ Type	
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) <b>c. Kingston Grill and Bar</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 06 / 2012</b>
Mailing Address 2676 Church Street			Amount of Each Disbursement this Period <b>1150.00</b> Transaction ID : D425953
City Conway	State SC	Zip Code 29526	
Purpose of Disbursement election night venue		Category/ Type	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1239.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. LaNina Linton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 2140 Tillers Plow Row		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : D424335</b>
City Effingham State SC Zip Code 29541	Purpose of Disbursement consulting services-field coordination	
Candidate Name	Category/Type	
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) <b>B. Ms. Rena McLaughlin</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 603 Summer Lane		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : D422026</b>
City Bennettsville State SC Zip Code 29512	Purpose of Disbursement Govt field ops-travel expense	
Candidate Name	Category/Type	
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) <b>C. Ms. Rena McLaughlin</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 603 Summer Lane		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : D422127</b>
City Bennettsville State SC Zip Code 29512	Purpose of Disbursement gotv field op-travel expense	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1450.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 117	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Teresa Moore</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 23 / 2012</b>
Mailing Address <b>607 Edgar St</b>		Amount of Each Disbursement this Period <b>100.00</b> <b>Transaction ID : D422123</b>
City <b>Marion</b> State <b>SC</b> Zip Code <b>29571</b>	Purpose of Disbursement <b>gotv field ops-travel</b>	
Candidate Name	Category/Type	
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) <b>B. Teresa Moore</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 02 / 2012</b>
Mailing Address <b>607 Edgar St</b>		Amount of Each Disbursement this Period <b>100.00</b> <b>Transaction ID : D422133</b>
City <b>Marion</b> State <b>SC</b> Zip Code <b>29571</b>	Purpose of Disbursement <b>gotv field ops-travel</b>	
Candidate Name	Category/Type	
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) <b>c. Murphy Express 8573</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address <b>2735 Church St.</b>		Amount of Each Disbursement this Period <b>65.59</b> <b>Transaction ID : D425980</b>
City <b>Conway</b> State <b>SC</b> Zip Code <b>29526</b>	Purpose of Disbursement <b>travel expense-gas</b>	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>265.59</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Antonious Nesmith</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 1403 Centerside Dr		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D422132</b>
City Florence	State SC	
Zip Code 29506	Purpose of Disbursement gotv field ops-travel expense	Category/ Type
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	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Antonious Nesmith</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 1403 Centerside Dr		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : D422122</b>
City Florence	State SC	
Zip Code 29506	Purpose of Disbursement gotv field ops-travel	Category/ Type
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	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Lashonda Nesmith</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 420 W Cheves ST		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D425116</b>
City Florence	State SC	
Zip Code 29501	Purpose of Disbursement florence office rental	Category/ Type
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	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. NGP Van Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2012
Mailing Address 1101 15th Street NW Suite 500		Amount of Each Disbursement this Period 2100.00
City Washington State DC Zip Code 20005	Purpose of Disbursement campaign tracking, disbursement, contribution system	
Candidate Name	Category/Type	<b>Transaction ID : D426048</b>
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) <b>B. NGP Van Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1101 15th Street NW Suite 500		Amount of Each Disbursement this Period 90.00
City Washington State DC Zip Code 20005	Purpose of Disbursement campaign tracking, disbursement, contribution system	
Candidate Name	Category/Type	<b>Transaction ID : D418890</b>
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) <b>C. Ms Mckean Nowlin</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 771 Murray Ave		Amount of Each Disbursement this Period 750.00
City Myrtle Beach State SC Zip Code 29577-1734	Purpose of Disbursement consulting services-social media/communications	
Candidate Name	Category/Type	<b>Transaction ID : D424344</b>
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2940.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot #2179</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>	
Mailing Address 2701 Church Street Suite A			Amount of Each Disbursement this Period <b>161.26</b>	
City Conway	State SC	Zip Code 29526	Transaction ID : <b>D426011</b>	
Purpose of Disbursement office supplies/postage		Category/ Type		
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) <b>B. Office Depot #2179</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 03 / 2012</b>	
Mailing Address 2701 Church Street Suite A			Amount of Each Disbursement this Period <b>25.01</b>	
City Conway	State SC	Zip Code 29526	Transaction ID : <b>D426013</b>	
Purpose of Disbursement office supplies		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Office Depot #2179</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>	
Mailing Address 2701 Church Street Suite A			Amount of Each Disbursement this Period <b>11.33</b>	
City Conway	State SC	Zip Code 29526	Transaction ID : <b>D422103</b>	
Purpose of Disbursement office supplies		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>197.60</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 143.83 <b>Transaction ID : D422105</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies/postage	Category/ Type
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) <b>B. Office Depot #2179</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 68.41 <b>Transaction ID : D422106</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Pageland Progressive Journal</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address Post Office Box 218		Amount of Each Disbursement this Period 500.40 <b>Transaction ID : D421586</b>
City Pageland	State SC	
Zip Code 29728	Purpose of Disbursement newspaper advertisement	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	712.64
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Douglas Pernell</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 300 West Calhoun St.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D422126</b>
City Dillon	State SC	
Zip Code 29536	Purpose of Disbursement gotv field ops-travel	Category/ Type
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) <b>B. Douglas Pernell</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 300 West Calhoun St.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D422140</b>
City Dillon	State SC	
Zip Code 29536	Purpose of Disbursement gotv field ops-travel	Category/ Type
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) <b>c. Douglas Pernell</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 300 West Calhoun St.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D422247</b>
City Dillon	State SC	
Zip Code 29536	Purpose of Disbursement gotv field ops-travel	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 117	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mr Reginald Poplus</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 15 / 2012</b>
Mailing Address 2475 Enon Rd		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : D424349</b>
City Atlanta	State GA Zip Code 30331	
Purpose of Disbursement consulting services-campaign management		Category/ Type
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) <b>B. Mr. Tony Pryor</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 06 / 2012</b>
Mailing Address 1519 5th Ave.		Amount of Each Disbursement this Period <b>250.00</b> <b>Transaction ID : D425952</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election day music		Category/ Type
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) <b>c. Sage Leadership PAC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2012</b>
Mailing Address Post Office Box 2263		Amount of Each Disbursement this Period <b>1000.00</b> <b>Transaction ID : D419305</b>
City Orangeburg	State SC Zip Code 29116	
Purpose of Disbursement refund of campaign contribution		Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Santee Cooper Electric</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 100 Elm Street		Amount of Each Disbursement this Period 204.86
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement utility services	Transaction ID : D425951
Candidate Name	Category/ Type	
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) <b>B. William Sengstacken</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 906 Teton Ave SE		Amount of Each Disbursement this Period 875.00
City Atlanta	State GA	
Zip Code 30312	Purpose of Disbursement consulting srvs-social media/pr	Transaction ID : D424400
Candidate Name	Category/ Type	
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) <b>c. Robbin Shipp</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address 154 Chester Dr.		Amount of Each Disbursement this Period 1000.00
City Atlanta	State GA	
Zip Code 30316	Purpose of Disbursement consulting srvs- counsel	Transaction ID : D424348
Candidate Name	Category/ Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2079.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Robbin Shipp</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 14 / 2012</b>
Mailing Address 154 Chester Dr.		Amount of Each Disbursement this Period <b>2000.00</b> <b>Transaction ID : D424340</b>
City Atlanta	State GA Zip Code 30316	
Purpose of Disbursement consulting srvs- counsel		Category/ Type
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) <b>B. Sleep Inn</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 07 / 2012</b>
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period <b>60.47</b> <b>Transaction ID : D426035</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election night room stay (general)		Category/ Type
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) <b>c. Sleep Inn</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 07 / 2012</b>
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period <b>60.47</b> <b>Transaction ID : D426036</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election night room stay (general)		Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2120.94</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sleep Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 60.47 <b>Transaction ID : D426037</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election night room stay (general)		Category/ Type
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) <b>B. Sleep Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 60.47 <b>Transaction ID : D426039</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election night room stay (general)		Category/ Type
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) <b>c. Sleep Inn</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 3345 Church Street Hwy 501		Amount of Each Disbursement this Period 60.47 <b>Transaction ID : D426041</b>
City Conway	State SC Zip Code 29526	
Purpose of Disbursement election night room stay (general)		Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	181.41
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 117			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sleep Inn</b>		Date of Disbursement
Mailing Address 3345 Church Street Hwy 501		M M / D D / Y Y Y Y 11 / 07 / 2012
City Conway	State SC	Zip Code 29526
Purpose of Disbursement election night room stay (general)	Amount of Each Disbursement this Period 60.47	
Candidate Name	Transaction ID : D426042	
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Sleep Inn</b>		Date of Disbursement
Mailing Address 3345 Church Street Hwy 501		M M / D D / Y Y Y Y 11 / 07 / 2012
City Conway	State SC	Zip Code 29526
Purpose of Disbursement election night room stay (general)	Amount of Each Disbursement this Period 60.47	
Candidate Name	Transaction ID : D426044	
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. Stages Video</b>		Date of Disbursement
Mailing Address 514 29th Ave North		M M / D D / Y Y Y Y 10 / 23 / 2012
City Myrtle Beach	State SC	Zip Code 29577
Purpose of Disbursement television ad and production	Amount of Each Disbursement this Period 436.00	
Candidate Name	Transaction ID : D421595	
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	556.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Stages Video</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 514 29th Ave North		Amount of Each Disbursement this Period 712.50
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement television ad production	<b>Transaction ID : D421686</b>
Candidate Name	Category/Type	
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) <b>B. Stages Video</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 514 29th Ave North		Amount of Each Disbursement this Period 650.00
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement television ad production	<b>Transaction ID : D421606</b>
Candidate Name	Category/Type	
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) <b>c. T &amp; S Properties Realty LLP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 1401 West Bobby Gerald Parkway mailing address: Post Office Box 9		Amount of Each Disbursement this Period 800.00
City Marion	State SC	
Zip Code 29571	Purpose of Disbursement office rent	<b>Transaction ID : D422480</b>
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2162.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 117	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Oblander Group LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 1100 Spring St Suite 360		Amount of Each Disbursement this Period 1584.15 <b>Transaction ID : D424401</b>
City Atlanta	State GA Zip Code 30309	
Purpose of Disbursement consulting service- fundraising		Category/ Type
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) <b>B. Mr. Allen Thomas</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012
Mailing Address 1307 Academy Rd.		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : D424333</b>
City Bennettsville	State SC Zip Code 29512	
Purpose of Disbursement consulting services-field coordination		Category/ Type
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) <b>C. Mr. Allen Thomas</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 1307 Academy Rd.		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : D422250</b>
City Bennettsville	State SC Zip Code 29512	
Purpose of Disbursement gotv election day expense		Category/ Type
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2184.15
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 117	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ms. Elaine Thomas</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 1307 Academy Rd.		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : D422112</b>
City Bennettsville	State SC	
Zip Code 29512	Purpose of Disbursement gotv field ops- travel	Category/ Type
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) <b>B. Time Warner Cable Media</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 2024 Corporate Centre Drive Suite		Amount of Each Disbursement this Period 3675.40 <b>Transaction ID : D422151</b>
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement cable tv media buy	Category/ Type
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) <b>c. Time Warner Cable Media</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 2024 Corporate Centre Drive Suite		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : D421689</b>
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement cable tv media buy	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8725.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 117			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. True Stories Research LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012		
Mailing Address Post Office Box 16912			Amount of Each Disbursement this Period 150.00		
City Fernandina Beach	State FL	Zip Code 32035	Transaction ID : D421968		
Purpose of Disbursement campaign research/vulnerability scan		Category/ Type			
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) <b>B. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012		
Mailing Address 2709 Church Street			Amount of Each Disbursement this Period 54.62		
City Conway	State SC	Zip Code 29526	Transaction ID : D422107		
Purpose of Disbursement prepaid services		Category/ Type			
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) <b>C. Verizon Wireless</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012		
Mailing Address 2709 Church Street			Amount of Each Disbursement this Period 16.82		
City Conway	State SC	Zip Code 29526	Transaction ID : D422108		
Purpose of Disbursement prepaid services		Category/ Type			
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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	221.44
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 117		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 576.75 <b>Transaction ID : D426051</b>
City Conway	State SC	
Purpose of Disbursement telephone services- campaign cell phones		Category/ Type
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) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 54.62 <b>Transaction ID : D425983</b>
City Conway	State SC	
Purpose of Disbursement prepaid services		Category/ Type
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) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 54.62 <b>Transaction ID : D425984</b>
City Conway	State SC	
Purpose of Disbursement prepaid services		Category/ Type
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: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	685.99
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 22.22
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement prepaid services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 54.62
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement prepaid cell service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 16.82
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement prepaid cell services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	93.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 117	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 16.82 <b>Transaction ID : D426022</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement prepaid cell services	Category/ Type
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) <b>B. Walmart #0586</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 44.63 <b>Transaction ID : D426034</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Walmart #0586</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 27.95 <b>Transaction ID : D425982</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	89.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Walmart #0586</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 2709 Church Street Ste A		Amount of Each Disbursement this Period 43.94
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Whittemore Park Middle</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1808 Rhue Street		Amount of Each Disbursement this Period -133.00
City Conway	State SC	
Zip Code 29527	Purpose of Disbursement voided check - expense never made	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Wilco #949</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 1365 E. Highway 501		Amount of Each Disbursement this Period 42.01
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense-gas	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	-47.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 117	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Wilco #949</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 1365 E. Highway 501		Amount of Each Disbursement this Period 46.65 <b>Transaction ID : D426002</b>
City Conway	State SC	
Zip Code 29526	Purpose of Disbursement travel expense-gas	Category/ Type
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) <b>B. Leon Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2012
Mailing Address 700 Ridge St		Amount of Each Disbursement this Period 120.00 <b>Transaction ID : D425956</b>
City Conway	State SC	
Zip Code 29527	Purpose of Disbursement moving 1421 3rd ave	Category/ Type
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) <b>C. Leon Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2012
Mailing Address 700 Ridge St		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : D425957</b>
City Conway	State SC	
Zip Code 29527	Purpose of Disbursement moving expense-1421 3rd ave	Category/ Type
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	316.65
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 117		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Leon Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2012
Mailing Address 700 Ridge St		Amount of Each Disbursement this Period 80.00
City Conway	State SC	
Zip Code 29527	Purpose of Disbursement moving expense-1421 3rd ave	<b>Transaction ID : D425958</b>
Candidate Name	Category/Type	
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) <b>B. Margaret Wilson</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 3611 Hwy 38 N		Amount of Each Disbursement this Period 150.00
City Bennettsville	State SC	
Zip Code 29512	Purpose of Disbursement gotv field ops-travel	<b>Transaction ID : D422111</b>
Candidate Name	Category/Type	
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) <b>c. Woodfield Group Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 1118 Old Breckenridge Lane		Amount of Each Disbursement this Period 1200.00
City Montgomery	State AL	
Zip Code 36117	Purpose of Disbursement Consulting Services (FEC Compliance/Regulations)	<b>Transaction ID : D421685</b>
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1430.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 117			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Woodfield Group Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 14 / 2012</b>
Mailing Address 1118 Old Breckenridge Lane		Amount of Each Disbursement this Period <b>1200.00</b>
City <b>Montgomery</b>	State <b>AL</b>	
Purpose of Disbursement Consulting Services (FEC Compliance/Regulations)	Zip Code <b>36117</b>	<b>Transaction ID : D424330</b>
Candidate Name	Category/ Type	
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) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>94337.14</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 117	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Gloria Bromell Tinubu for Congress**

Full Name (Last, First, Middle Initial) <b>A. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2012</b>
Mailing Address <b>1403 7th Ave</b>		Amount of Each Disbursement this Period <b>2000.00</b>
City <b>Conway</b> State <b>SC</b> Zip Code <b>29526</b>	Purpose of Disbursement partial repayment of loan	<b>Transaction ID : D419254</b>
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/ Type <b>009</b>	
Office Sought: <input checked="" 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: <b>SC</b> District: <b>07</b>		

Full Name (Last, First, Middle Initial) <b>B. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 01 / 2012</b>
Mailing Address <b>1403 7th Ave</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>Conway</b> State <b>SC</b> Zip Code <b>29526</b>	Purpose of Disbursement partial repayment of loan	<b>Transaction ID : D421911</b>
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Runoff</b>	
State: <b>SC</b> District: <b>07</b>		

Full Name (Last, First, Middle Initial) <b>c. Gloria Bromell Tinubu</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 22 / 2012</b>
Mailing Address <b>1403 7th Ave</b>		Amount of Each Disbursement this Period <b>500.00</b>
City <b>Conway</b> State <b>SC</b> Zip Code <b>29526</b>	Purpose of Disbursement partial repayment of loan	<b>Transaction ID : D422110</b>
Candidate Name <b>Gloria Bromell Tinubu</b>	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>Runoff</b>	
State: <b>SC</b> District: <b>07</b>		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>3000.00</b>

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

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

FOR 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 Cumulative Payment To Date Balance Outstanding at Close of This Period  
5000.00 2000.00 3000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M 12 / D 30 / Y 2011 M M / D D / Y none % (apr)  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**

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

FOR 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 Cumulative Payment To Date Balance Outstanding at Close of This Period  
10000.00 0.00 10000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (apr)  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

FOR 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 02 / D 14 / Y 2012 Y

Date Due

M / D / Y none Y Y

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**

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L792

**LOAN SOURCE** Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2012  
**Gloria Bromell Tinubu PERS FUNDS**  Primary  
 Mailing Address 1403 7th Ave  General  
 Other (specify) ▼

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 Date Due Interest Rate Secured:  
 M 03 / D 05 / Y 2012 M M / D D / Y none % (apr)  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

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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
51000.00	0.00	51000.00

**TERMS**

Date Incurred: M 03 / D 30 / Y 2012  
Date Due: M / 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)..... ▶ 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

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

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

03

14

2012

none

none

% (apr)

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**

NAME OF COMMITTEE (In Full) Transaction ID : L803  
**Gloria Bromell Tinubu for Congress**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 14 / Y 2012	M M / D D / Y Y Y Y non	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	10000.00
<b>TOTALS</b> 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

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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
25000.00	0.00	25000.00

**TERMS**

Date Incurred: M 05 / D 14 / Y 2012  
 Date Due: M / 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: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	25000.00
<b>TOTALS</b> 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

FOR 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

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000.00

0.00

5000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

M 05 /

D 21 /

Y 2012 Y

M /

D /

Y none Y

none % (apr)

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

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 05 / D 30 / Y 2012 Y Y

Date Due

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

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**

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

FOR 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

Cumulative Payment To Date

Balance Outstanding at Close of This Period

30000.00

0.00

30000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

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

M M / D D / Y Y Y Y  
none

none

% (apr)

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

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 Cumulative Payment To Date Balance Outstanding at Close of This Period  
30000.00 0.00 30000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
06 / 07 / 2012 no due date none % (apr)  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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L830**

**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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
26000.00	0.00	26000.00

**TERMS**  
Date Incurred: M 06 / D 11 / Y 2012  
Date Due: M / D / 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**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L834**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff _____
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7000.00	5000.00	2000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 26 / Y 2012	M / D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	2000.00
<b>TOTALS</b> 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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Transaction ID : L839**  
Gloria Bromell Tinubu for Congress

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Gloria Bromell Tinubu PERS FUNDS	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Runoff
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3500.00	0.00	3500.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 07 / D 10 / Y 2012 Y Y	M M / D D / Y no due date Y Y Y Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	3500.00
<b>TOTALS</b> 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

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

1000.00

Balance Outstanding at Close of This Period

1500.00

**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)..... ▶

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

FOR 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 Cumulative Payment To Date Balance Outstanding at Close of This Period  
10000.00 1300.00 8700.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

08 / 06 / 2012

none

none % (apr)

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**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L854

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
08 / 17 / 2012	none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	5000.00
<b>TOTALS</b> This Period (last page in this line only).....	
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

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

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

FOR 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

08

20

2012

Date Due

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

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

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

08

20

2012

none

none

% (apr)

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

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]

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

Cumulative Payment To Date

Balance Outstanding at Close of This Period

3000.00

0.00

3000.00

**TERMS**

Date Incurred

Date Due

Interest Rate

Secured:

09

19

2012

no due date

0.00

% (apr)

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**

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

FOR 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**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L870**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 11 / D 01 / Y 2012 Y Y	M M / D D / Y none Y Y Y	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
<b>TOTALS</b> 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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L872**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Gloria Bromell Tinubu PERS FUNDS</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1403 7th Ave		

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
15000.00	0.00	15000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 11 / D 13 / Y 2012	M M / D D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	15000.00
<b>TOTALS</b> This Period (last page in this line only).....	316700.00

**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)

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  
**Amy Brown**

Nature of Debt (Purpose):  
consulting services-field coordination

Mailing Address 101 Mill St

City State Zip Code  
Chesterfield SC 29709

Outstanding Balance Beginning This Period  
0.00

Transaction ID : D426855

Amount Incurred This Period  
125.00

Payment This Period  
0.00

Outstanding Balance at Close of This Period  
125.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mr. David Brown**

Nature of Debt (Purpose):  
consulting services- field direction

Mailing Address 1941 Highway 177

City State Zip Code  
Wallace SC 29596-5313

Outstanding Balance Beginning This Period  
0.00

Transaction ID : D426718

Amount Incurred This Period  
625.00

Payment This Period  
0.00

Outstanding Balance at Close of This Period  
625.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mr. David Brown**

Nature of Debt (Purpose):  
campaign expenses

Mailing Address 1941 Highway 177

City State Zip Code  
Wallace SC 29596-5313

Outstanding Balance Beginning This Period  
0.00

Transaction ID : D426860

Amount Incurred This Period  
829.73

Payment This Period  
0.00

Outstanding Balance at Close of This Period  
829.73

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

1579.73

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

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

Mailing Address 418 Battey Drive

City State Zip Code  
Myrtle Beach SC 29588

Nature of Debt (Purpose):  
computer repair

Outstanding Balance Beginning This Period  **Transaction ID : D426859**

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mr. Craig Conwell**

Mailing Address 1515 5th Ave

City State Zip Code  
Conway SC 29526

Nature of Debt (Purpose):  
consulting services-field coordination

Outstanding Balance Beginning This Period  **Transaction ID : D426856**

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mr. Tyhesh Cross**

Mailing Address 45 Briarwood Pl

City State Zip Code  
Sanford NC 27332-2509

Nature of Debt (Purpose):  
consulting services-photography/transportation

Outstanding Balance Beginning This Period  **Transaction ID : D426725**

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="455.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mr. Tyhesh Cross**

Mailing Address 45 Briarwood Pl

City Sanford State Zip Code NC 27332-2509

Nature of Debt (Purpose):  
travel expense-mileage

Outstanding Balance Beginning This Period  **Transaction ID : D426861**

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Ms. Eartha Davis**

Mailing Address 121 Marshall St.

City Mullins State Zip Code SC 29574

Nature of Debt (Purpose):  
postage

Outstanding Balance Beginning This Period  **Transaction ID : D426866**

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mrs. Regina Dyer**

Mailing Address P.O. Box 438 Hwy 41A South

City Centenary State Zip Code SC 29519

Nature of Debt (Purpose):  
consulting services-field coordination

Outstanding Balance Beginning This Period  **Transaction ID : D426719**

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="1556.15"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mrs. Regina Dyer**

Mailing Address P.O. Box 438 Hwy 41A South

City State Zip Code  
Centenary SC 29519

Nature of Debt (Purpose):  
travel expense-gas

Outstanding Balance Beginning This Period **Transaction ID : D426863**  
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
90.05 0.00 90.05

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mrs. Irish A Eickhoff**

Mailing Address 632 Tattlesbury Drive

City State Zip Code  
Conway SC 29526

Nature of Debt (Purpose):  
office supplies

Outstanding Balance Beginning This Period **Transaction ID : D426865**  
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
28.76 0.00 28.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Jacqueline Ellerbe-Shannon**

Mailing Address 106 Agerton St

City State Zip Code  
Cheraw SC 29520-3308

Nature of Debt (Purpose):  
consulting services-field coordination

Outstanding Balance Beginning This Period **Transaction ID : D426854**  
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
125.00 0.00 125.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	243.81
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Asa Fludd</b>		Nature of Debt (Purpose): consulting services-field coordination
Mailing Address 1302 Valparairo Dr. Apt L2		
City	State	Zip Code
Florence	SC	29501

Outstanding Balance Beginning This Period	<b>Transaction ID : D426852</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="125.00"/>	<input type="text" value="0.00"/>	<input type="text" value="125.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ms Tyra Ford</b>		Nature of Debt (Purpose): Consulting services-field coordination
Mailing Address 5020 Exodus Drive		
City	State	Zip Code
Georgetown	SC	29440

Outstanding Balance Beginning This Period	<b>Transaction ID : D426733</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="250.00"/>	<input type="text" value="0.00"/>	<input type="text" value="250.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Donald Gilliard</b>		Nature of Debt (Purpose): consulting services-field organization
Mailing Address 2229 Front St.		
City	State	Zip Code
Georgetown	SC	29440

Outstanding Balance Beginning This Period	<b>Transaction ID : D426857</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="250.00"/>	<input type="text" value="0.00"/>	<input type="text" value="250.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="625.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Donald Gilliard</b>		Nature of Debt (Purpose): travel expense- gas
Mailing Address 2229 Front St.		
City State Georgetown SC	Zip Code 29440	

Outstanding Balance Beginning This Period 0.00		<b>Transaction ID : D426864</b>	
Amount Incurred This Period 120.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 120.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>		Nature of Debt (Purpose): travel expense-gas-cc trans
Mailing Address 1403 7th Ave		
City State Conway SC	Zip Code 29526	

Outstanding Balance Beginning This Period 40.00		<b>Transaction ID : D384287</b>	
Amount Incurred This Period 0.00	Payment This Period 40.00	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>		Nature of Debt (Purpose): Bennett's Calabash Seafood-dinner
Mailing Address 1403 7th Ave		
City State Conway SC	Zip Code 29526	

Outstanding Balance Beginning This Period 76.87		<b>Transaction ID : D384290</b>	
Amount Incurred This Period 0.00	Payment This Period 76.87	Outstanding Balance at Close of This Period 0.00	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	120.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶		



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 113 OF 117
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gloria Bromell Tinubu</b>	Nature of Debt (Purpose): travel expense-gas/food
Mailing Address 1403 7th Ave	
City State Zip Code Conway SC 29526	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D426862</b>	
Amount Incurred This Period 85.80	Payment This Period 0.00	Outstanding Balance at Close of This Period 85.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Wayne Green</b>	Nature of Debt (Purpose): consulting services-field coordination
Mailing Address 1924 Rocking Chair Ct	
City State Zip Code Dillon SC 29536	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D426737</b>	
Amount Incurred This Period 250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Dwane Heyward</b>	Nature of Debt (Purpose): consulting services-financial services
Mailing Address 92 Abraham Pl	
City State Zip Code Georgetown SC 29440-6341	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : D426716</b>	
Amount Incurred This Period 1500.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	1835.80
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Lake Research Partners Inc**

Mailing Address 1726 M Street NW Suite 1100

City State Zip Code  
 Washington DC 20036

Nature of Debt (Purpose):  
 polling and survey services

Outstanding Balance Beginning This Period		<b>Transaction ID : D426709</b>	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="7500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="7500.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Ms. LaNina Linton**

Mailing Address 2140 Tillers Plow Row

City State Zip Code  
 Effingham SC 29541

Nature of Debt (Purpose):  
 consulting services-field coordination

Outstanding Balance Beginning This Period		<b>Transaction ID : D426853</b>	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="125.00"/>	<input type="text" value="0.00"/>	<input type="text" value="125.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Mad Dog Mail Inc**

Mailing Address 5542 First Coast Highway Suite 300

City State Zip Code  
 Fernandina Beach FL 32034

Nature of Debt (Purpose):  
 campaign mailing/advertisement

Outstanding Balance Beginning This Period		<b>Transaction ID : D426708</b>	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="1500.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1500.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="9125.00"/>
<b>2) TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

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

Mailing Address 1403 Centerside Dr

City State Zip Code  
 Florence SC 29506

Nature of Debt (Purpose):  
 postage

Outstanding Balance Beginning This Period  **Transaction ID : D426858**

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**NGP Van Inc**

Mailing Address 1101 15th Street NW Suite 500

City State Zip Code  
 Washington DC 20005

Nature of Debt (Purpose):  
 campaign tracking,disbursement,contribution system

Outstanding Balance Beginning This Period  **Transaction ID : D426713**

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Ms Mckean Nowlin**

Mailing Address 771 Murray Ave

City State Zip Code  
 Myrtle Beach SC 29577-1734

Nature of Debt (Purpose):  
 consulting services-social media/communications

Outstanding Balance Beginning This Period  **Transaction ID : D426722**

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="1550.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>William Sengstacken</b>	Nature of Debt (Purpose): consulting services-social/pr
Mailing Address 906 Teton Ave SE	
City State Zip Code Atlanta GA 30312	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : D426711</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="875.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="875.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Robbin Shipp</b>	Nature of Debt (Purpose): consulting services-general counsel
Mailing Address 154 Chester Dr.	
City State Zip Code Atlanta GA 30316	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : D426714</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="3000.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="3000.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. James E. Smith Jr. P.A</b>	Nature of Debt (Purpose): legal services
Mailing Address 1422 Laurel Street	
City State Zip Code Columbia SC 29201	

Outstanding Balance Beginning This Period <input style="width:100%;" type="text" value="0.00"/>	<b>Transaction ID : D426712</b>
Amount Incurred This Period <input style="width:100%;" type="text" value="1200.00"/>	Payment This Period <input style="width:100%;" type="text" value="0.00"/>
Outstanding Balance at Close of This Period <input style="width:100%;" type="text" value="1200.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%;" type="text" value="5075.00"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%;" type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%;" type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%;" type="text"/>

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

NAME OF COMMITTEE (In Full)

**Gloria Bromell Tinubu for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Oblander Group LLC</b>		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	<b>Transaction ID : D426710</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="8091.58"/>	<input type="text" value="0.00"/>	<input type="text" value="8091.58"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Mr. Allen Thomas</b>		Nature of Debt (Purpose): consulting services-field coordination
Mailing Address 1307 Academy Rd.		
City	State	Zip Code
Bennettsville	SC	29512

Outstanding Balance Beginning This Period	<b>Transaction ID : D426851</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="250.00"/>	<input type="text" value="0.00"/>	<input type="text" value="250.00"/>

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		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="8341.58"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="30507.07"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="316700.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="347207.07"/>