

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Example: If typing, type over the lines.

12FE4M5

TOM RICE FOR CONGRESS

ADDRESS (number and street)

PO Box 70098

Check if different than previously reported. (ACC)

Myrtle Beach

SC

29572-0020

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00506048

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

STATE ▼ DISTRICT

SC

07

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

(a) Quarterly Reports:

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

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

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

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

Lisker, Lisa, , ,

Type or Print Name of Treasurer

Lisker, Lisa, , ,

Signature of Treasurer

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
TOM RICE FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	117675.00	1131244.00
(b) Total Contribution Refunds (from Line 20(d))	0.00	10250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	117675.00	1120994.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	92660.69	478026.90
(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)).....	92660.69	478026.90
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1425379.91	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

TOM RICE FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	18400.00	499069.00
(ii) Unitemized.....	175.00	3775.00
(iii) TOTAL of contributions from individuals ▶	18575.00	502844.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	99100.00	628400.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	117675.00	1131244.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	4807.19	16000.68
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	122482.19	1147244.68

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	92660.69	478026.90
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	5250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	10250.00
21. OTHER DISBURSEMENTS	5070.00	256505.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	97730.69	744781.90

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1400628.41
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	122482.19
25. SUBTOTAL (add Line 23 and Line 24).....	1523110.60
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	97730.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1425379.91

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

Form/Schedule: F3A
Transaction ID :

Amended in response to request for additional information, dated 4/27/2020, to properly disclose previously reported redesignations.

Form/Schedule:
Transaction ID:

**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 6 OF 79	
	<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)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) Faison, Jay, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2020	
Mailing Address 1355 Greenwood Clfs Ste. 301			Transaction ID : A8AB02C381A8049A3884	
City Charlotte	State NC	Zip Code 28204-2981	Amount of Each Receipt this Period _____,_____,_____ 2800.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Clear Path		Occupation CEO		
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____,_____,_____ 5600.00		

Full Name (Last, First, Middle Initial) Kies, Kenneth, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 02 / 25 / 2020	
Mailing Address 6109 Franklin Park Rd			Transaction ID : A9BEE22CCF88C456C8D8	
City Mc Lean	State VA	Zip Code 22101-4214	Amount of Each Receipt this Period _____,_____,_____ 1300.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Federal Policy Group		Occupation Managing Director		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____,_____,_____ 4300.00		

Full Name (Last, First, Middle Initial) Rogers, Gill, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 29 / 2020	
Mailing Address 1901 E Carolina Ave			Transaction ID : A2F7BC65C206140DF967	
City Hartsville	State SC	Zip Code 29550-7434	Amount of Each Receipt this Period _____,_____,_____ 500.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer Rogers Brother Farm		Occupation Farmer		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____,_____,_____ 500.00		

SUBTOTAL of Receipts This Page (optional)..... ▶	_____,_____,_____ 4600.00
TOTAL This Period (last page this line number only)..... ▶	_____,_____,_____ _____

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

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

FOR LINE NUMBER: PAGE 7 OF 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stein, Shimon, , ,

Mailing Address 2122 Massachusetts Ave NW
Apt 614

City Washington State DC Zip Code 20008-2830

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

Name of Employer West Front Strategies LLC Occupation Government Affairs

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 10 / 2020

Transaction ID : ACC5AAAC2716D44509F4

Amount of Each Receipt this Period
1400.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Griffin, Jody, , ,

Mailing Address 2214 W Palmetto St.

City Florence State SC Zip Code 29501-3901

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

Name of Employer Self Employed Occupation Doctor

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2020

Transaction ID : AB5E0EFBDEFDA46FB935

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 1355 Greenwood Clfs
Ste. 301

City Charlotte State NC Zip Code 28204-2981

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2020

Transaction ID : A8940F9B70A1C4E208A8

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 5200.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Faison, Jay, , ,

Mailing Address 1355 Greenwood Clfs
Ste. 301

City Charlotte State NC Zip Code 28204-2981

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

Name of Employer Clear Path Occupation CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2020

Transaction ID : **A4F8AF50020CB475497C**

Amount of Each Receipt this Period
 2800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RMS - Resource Management Service LLC

Mailing Address PO Box 380757

City Birmingham State AL Zip Code 35238-0757

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 16 / 2020

Transaction ID : **A61CB15495F51464FBD7**

Amount of Each Receipt this Period
 1000.00

Memo Item
No Partners Req. Item.

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

Mailing Address 1355 Greenwood Clfs
Ste. 301

City Charlotte State NC Zip Code 28204-2981

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2020

Transaction ID : **A11B1264C89BE4DF08AF**

Amount of Each Receipt this Period
 2800.00

Memo Item

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

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

6600.00

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

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

FOR LINE NUMBER: PAGE 9 OF 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kies, Kenneth, , ,

Mailing Address 6109 Franklin Park Rd

City Mc Lean State VA Zip Code 22101-4214

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

Name of Employer Federal Policy Group Occupation Managing Director

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2020

Transaction ID : **ABBA732964B124380A9C**

Amount of Each Receipt this Period
1500.00

Memo Item

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

Mailing Address 1304 4th Ave.

City Conway State SC Zip Code 29526-5018

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

Name of Employer Ray Realty Inc Occupation Realtor

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2020

Transaction ID : **A1CBF287E146F4DC5968**

Amount of Each Receipt this Period
500.00

Memo Item
Votesane EM Rcd 2/19/20

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

Mailing Address P.O. Box 2713

City Alexandria State VA Zip Code 22301-0713

FEC ID number of contributing federal political committee. **C** C00484535

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 24 / 2020

Transaction ID : **AE1389EEFAA0A474CA6F**

Amount of Each Receipt this Period
500.00

Memo Item
Earmark Transmittal Total
Earmark Directed

SUBTOTAL of Receipts This Page (optional)..... ▶ 2000.00

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

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

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

FOR LINE NUMBER: PAGE 10 OF 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Bell, J., Edward, Mr., III

Mailing Address 219 S Ridge St

City: Georgetown State: SC Zip Code: 29440-2966

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

Name of Employer: Bell Law Firm Occupation: Attorney

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2019

Transaction ID : A949C014AF7EE41F6B30

Amount of Each Receipt this Period
5000.00

Memo Item

See Redesignation below

B. Full Name (Last, First, Middle Initial)
Bell, J., Edward, Mr., III

Mailing Address 219 S Ridge St

City: Georgetown State: SC Zip Code: 29440-2966

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

Name of Employer: Bell Law Firm Occupation: Attorney

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2020

Transaction ID : A9EB25854EFC456EA51

Amount of Each Receipt this Period
2200.00

Memo Item

Redesig from Primary-Orig Contrib 11/1/19

C. Full Name (Last, First, Middle Initial)
Bell, J., Edward, Mr., III

Mailing Address 219 S Ridge St

City: Georgetown State: SC Zip Code: 29440-2966

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

Name of Employer: Bell Law Firm Occupation: Attorney

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2020

Transaction ID : A17392F9E087346408ED

Amount of Each Receipt this Period
- 2200.00

Memo Item

Redesig to General-Orig Contrib 11/1/19

SUBTOTAL of Receipts This Page (optional)..... ▶ 0.00

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

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

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

FOR LINE NUMBER: PAGE 11 OF 79
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lowell, Randy, , ,

Mailing Address 1527 Wando Landing St

City Daniel Island State SC Zip Code 29492-8506

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

Name of Employer Willoughby & Hoefer Occupation Attorney

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 08 / 2019

Transaction ID : **A38B79AA7EDB54C5090B**

Amount of Each Receipt this Period
1000.00

Memo Item

See Redesignation below

B. Full Name (Last, First, Middle Initial)
Lowell, Randy, , ,

Mailing Address 1527 Wando Landing St

City Daniel Island State SC Zip Code 29492-8506

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

Name of Employer Willoughby & Hoefer Occupation Attorney

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 01 / 2020

Transaction ID : **A989F7CCF5EB147E899E**

Amount of Each Receipt this Period
1000.00

Memo Item

Redesig from Primary-Orig Contrib 11/8/19

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

Mailing Address 1527 Wando Landing St

City Daniel Island State SC Zip Code 29492-8506

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

Name of Employer Willoughby & Hoefer Occupation Attorney

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 01 / 2020

Transaction ID : **A616B9B2867F84D4E957**

Amount of Each Receipt this Period
- 1000.00

Memo Item

Redesig to General-Orig Contrib 11/8/19

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	18400.00

**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 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TUESDAY GROUP POLITICAL ACTION COMMITTEE

Mailing Address 610 S. BOULEVARD

City TAMPA	State FL	Zip Code 33606
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FEC ID number of contributing federal political committee. **C** C00433060

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2020

Transaction ID : A454CF5DF5429495DABD

Amount of Each Receipt this Period

1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 S.W. 8TH STREET

City BENTONVILLE	State AR	Zip Code 72716
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00093054

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 25 / 2020

Transaction ID : A0D7C2C2F67A64A97998

Amount of Each Receipt this Period

1000.00

Memo Item

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

Mailing Address 317 Massachusetts Ave NE

City Washington	State DC	Zip Code 20002-5769
--------------------	-------------	------------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : A18CF6933EE32498881A

Amount of Each Receipt this Period

4000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KPMG, PAC

Mailing Address Post Office Box 18254

City Washington	State DC	Zip Code 20036-8254
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00280222

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2020

Transaction ID : A4F0FDA68D53641A1A0D

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 1445 Ross Avenue Suite 1400

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

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 27 / 2020

Transaction ID : AF804A4F3164448A19BA

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 824 S MILLEDGE AVE STE 101

City ATHENS	State GA	Zip Code 30605
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00541078

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2020

Transaction ID : AC30FCBC2DAC3450086E

Amount of Each Receipt this Period
1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	9000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
H&R BLOCK INC. POLITICAL ACTION COMMITTEE (BLOCKPAC)

Mailing Address ONE H&R BLOCK WAY

City KANSAS CITY	State MO	Zip Code 64105
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00188177

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2020

Transaction ID : A53A9742664D940D7957

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Employees of Northrop Grumman Corporation PAC

Mailing Address 2980 Fairview Park Drive

City Falls Church	State VA	Zip Code 22042-4511
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00088591

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 11 / 2020

Transaction ID : AB6F31170784D47A4BC7

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 STATE STREET

City SPRINGFIELD	State MA	Zip Code 01111
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00118943

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 04 / 2020

Transaction ID : A84D4F0F4E8F144BE9BE

Amount of Each Receipt this Period
 _____ 5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 8500.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VALERO ENERGY CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address ONE VALERO WAY

City SAN ANTONIO	State TX	Zip Code 78249
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00109546

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		18		2020

Transaction ID : A1C8986F5F4794EF1914

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
VALERO ENERGY CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address ONE VALERO WAY

City SAN ANTONIO	State TX	Zip Code 78249
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00109546

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		18		2020

Transaction ID : A46D8B8C58DEF4A149A7

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
National Telecommun Coop. Assoc. PAC

Mailing Address 4121 Wilson Blvd FI 10

City Arlington	State VA	Zip Code 22203-1839
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004473

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		04		2020

Transaction ID : A6C0FAD19C0A945978CC

Amount of Each Receipt this Period
3000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	8000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
General Electric PAC

Mailing Address 1299 Pennsylvania Ave NW
Suite 900

City Washington State DC Zip Code 20004-2414

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2020

Transaction ID : ACC507B5CCD8744238C3

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
American Health Care Association PAC

Mailing Address 1201 L St NW

City Washington State DC Zip Code 20005-4024

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 17 / 2020

Transaction ID : ABAD4383B92824ED1B20

Amount of Each Receipt this Period
3000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE GRANT THORNTON LLP POLITICAL ACTION COMMITTEE LLC

Mailing Address 171 N. CLARK STREET
SUITE 200

City CHICAGO State IL Zip Code 60601

FEC ID number of contributing federal political committee. **C** C00408260

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2020

Transaction ID : A8FB89E75157B47C3AB5

Amount of Each Receipt this Period
3000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	7000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Lowes Companies, Inc. PAC

Mailing Address 1000 Lowes Blvd

City Mooreville	State NC	Zip Code 28117-8520
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00251751

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2020

Transaction ID : AEEC34625312A43A9A60

Amount of Each Receipt this Period
 _____ 5000.00

Memo Item

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

Mailing Address 1500 Industrial Rd.

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

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2020

Transaction ID : A60806257BBB14EEA82C

Amount of Each Receipt this Period
 _____ 2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
The Boeing Company PAC

Mailing Address 1200 Wilson Blvd

City Arlington	State VA	Zip Code 22209-2305
-------------------	-------------	------------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 29 / 2020

Transaction ID : A1397AAB3999A42D9BF0

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 10300.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ernst & Young PAC

Mailing Address 1101 New Your Avenue, NW

City Washington	State DC	Zip Code 20005-4269
--------------------	-------------	------------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 25 / 2020

Transaction ID : ABC98ADABC6DA4980B7D

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TUESDAY GROUP POLITICAL ACTION COMMITTEE

Mailing Address 610 S. BOULEVARD

City TAMPA	State FL	Zip Code 33606
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00433060

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 17 / 2020

Transaction ID : A3ED1F6CDF60E430D846

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 1915 Rexford Road

City Charlotte	State NC	Zip Code 28211-3465
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00379628

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 11 / 2020

Transaction ID : A8C2904CF08B8499DA05

Amount of Each Receipt this Period
2000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	12000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN SENIORS HOUSING ASSOCIATION (SENIORS HOUSING PAC)

Mailing Address 5225 WISCONSIN AVE., NW
SUITE 502

City WASHINGTON	State DC	Zip Code 20015
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00325332

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2020

Transaction ID : A34CDA9B0A6BE456D940

Amount of Each Receipt this Period
 _____,_____,_____ 2500.00

Memo Item

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

Mailing Address 1500 Industrial Rd.

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

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 5600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 02 / 2020

Transaction ID : A29DDC0213F224CC9B81

Amount of Each Receipt this Period
 _____,_____,_____ 2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MOLINA HEALTHCARE, INC. PAC

Mailing Address 200 OCEANGATE
SUITE 100

City LONG BEACH	State CA	Zip Code 90802
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00430256

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 25 / 2020

Transaction ID : ABA98B21236324D61B49

Amount of Each Receipt this Period
 _____,_____,_____ 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ , _____ , _____ 7800.00
TOTAL This Period (last page this line number only)..... ▶	_____ , _____ , _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 1605 King St

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

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 10 / 2020

Transaction ID : AE0E9D66DEC05411E825

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 1 Fountain Sq

City Chattanooga	State TN	Zip Code 37402-1306
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00177436

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : A70494FAA84F84579822

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
STANLEY BLACK & DECKER, INC. POLITICAL ACTION COMMITTEE

Mailing Address 701 8TH STREET, NW
SUITE 500

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

FEC ID number of contributing federal political committee. **C** C00060087

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 21 / 2020

Transaction ID : AB6A16819C8B5449DBFC

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	10000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 400

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

FEC ID number of contributing federal political committee. **C** C00076810

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 6000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 30 / 2020

Transaction ID : A9724D3D8EDF846659F0

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MANUFACTURED HOUSING INSTITUTE PAC

Mailing Address 1655 FORT MYER DRIVE, SUITE 200

City Arlington	State VA	Zip Code 22209-3108
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00043463

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 16 / 2020

Transaction ID : AB5DB5CCC0F844B91B52

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 WILSON BLVD
SUITE 1500

City ARLINGTON	State VA	Zip Code 22209
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00097568

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 17 / 2020

Transaction ID : A520F9883A47341DCBF4

Amount of Each Receipt this Period
 _____ 2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 4500.00
TOTAL This Period (last page this line number only)..... ▶	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 805 15th St NW Ste 430
Suite 430

City Washington State DC Zip Code 20005-2273

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : **ACF662CCA63464A50930**

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BLOOMIN' BRANDS, INC. POLITICAL ACTION COMMITTEE

Mailing Address 2202 N. WESTSHORE BLVD.
5TH FLOOR

City TAMPA State FL Zip Code 33607

FEC ID number of contributing federal political committee. **C** C00253153

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 17 / 2020

Transaction ID : **A7468EBA049334D3FB31**

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AT&T, Inc. Federal PAC

Mailing Address c/o 1133 21st Street, NW
Suite 900

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2020

Transaction ID : **AAD1CD620308442F4891**

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	10000.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 OF 79
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CIGNA CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 701 PENNSYLVANIA AVENUE, NW
SUITE 720

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00085316

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 04 / 2020

Transaction ID : ABCA9F737AD164E4A93D

Amount of Each Receipt this Period
2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
GENERAL MOTORS COMPANY POLITICAL ACTION COMMITTEE (GM PAC)

Mailing Address 25 MASSACHUSETTS AVENUE, NW
SUITE 400

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00076810

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 30 / 2020

Transaction ID : A424ECB1B9B2F4A56B0B

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 10 / 2020

Transaction ID : ADFE648A971B74C65BE3

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 79	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Plain State PAC

Mailing Address 525 Ninth Street NW #800

City Washington	State DC	Zip Code 20004-2147
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00287045

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 31 / 2019

Transaction ID : A20E5F3BF50D44C3090F

Amount of Each Receipt this Period
3000.00

Memo Item

See Redesignation below

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

Mailing Address 525 Ninth Street NW #800

City Washington	State DC	Zip Code 20004-2147
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00287045

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2020

Transaction ID : A857C619324A5400F914

Amount of Each Receipt this Period
- 2200.00

Memo Item
Redesig Orig Contrib 12/31/19

C. Full Name (Last, First, Middle Initial)
Plain State PAC

Mailing Address 525 Ninth Street NW #800

City Washington	State DC	Zip Code 20004-2147
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00287045

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 31 / 2020

Transaction ID : A11BBCB69AF9B4938A42

Amount of Each Receipt this Period
2200.00

Memo Item
Redesig Orig Contrib 12/31/19

SUBTOTAL of Receipts This Page (optional)..... ▶	0.00
TOTAL This Period (last page this line number only)..... ▶	99100.00

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

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

FOR LINE NUMBER: PAGE 25 OF 79
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Wells Fargo

Mailing Address 2110 N Oak St

City Myrtle Beach State SC Zip Code 29577-3120

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12827.92

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2020

Transaction ID : **A398700F0A087425A8E7**

Amount of Each Receipt this Period
1634.43

Memo Item
Interest Inc

B. Full Name (Last, First, Middle Initial)
Wells Fargo

Mailing Address 2110 N Oak St

City Myrtle Beach State SC Zip Code 29577-3120

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
16000.68

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2020

Transaction ID : **AE282CED7BC5E4123A52**

Amount of Each Receipt this Period
1535.05

Memo Item
Interest Inc

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

Mailing Address 2110 N Oak St

City Myrtle Beach State SC Zip Code 29577-3120

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
14465.63

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 21 / 2020

Transaction ID : **ACDCDE567C12641E4A69**

Amount of Each Receipt this Period
1637.71

Memo Item
Interest Inc

SUBTOTAL of Receipts This Page (optional)..... ▶	4807.19
TOTAL This Period (last page this line number only)..... ▶	4807.19

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bogart Associates Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2020
Mailing Address 1200 Trinity Dr		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-4724
Purpose of Disbursement Fundraising Consulting/Event Catering/Shipping		Amount of Each Disbursement this Period 16073.32
Candidate Name		Transaction ID : BA4B5CBBE2D614213B01
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Kiawah Island Golf Resort		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2020
Mailing Address 1 Sanctuary Beach Dr		FEC Identification Number C
City Johns Island	State SC	Zip Code 29455-5434
Purpose of Disbursement Event Catering/Site Rental		Amount of Each Disbursement this Period 6164.00
Candidate Name		Transaction ID : B7BEF325262884F38849
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Bogart Associates Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2020
Mailing Address 1200 Trinity Dr		FEC Identification Number C
City Alexandria	State VA	Zip Code 22314-4724
Purpose of Disbursement Fundraising Consulting/Shipping		Amount of Each Disbursement this Period 4107.81
Candidate Name		Transaction ID : B38B6E5DE1D014183920
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	26345.13
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 27 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AccuChecks		Date of Disbursement
Mailing Address 605 19th Ave N		M M / D D / Y Y Y Y 01 / 31 / 2020
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Accounting Service	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 48.40	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BBEC65B08B00542FDB24
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AccuChecks		Date of Disbursement
Mailing Address 605 19th Ave N		M M / D D / Y Y Y Y 01 / 31 / 2020
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Payroll Taxes	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 333.97	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BA1D145D9CA8E4027BBF
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Hudson, Susan, , ,		Date of Disbursement
Mailing Address PO Box 70098		M M / D D / Y Y Y Y 01 / 31 / 2020
City Myrtle Beach	State SC	Zip Code 29572-0020
Purpose of Disbursement Salary	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 374.80	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B0E6B7D2250DB46B2AAD
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	757.17
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 28 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rice, James, Lucas, ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2020	
Mailing Address 5100 N Ocean Blvd			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-2541	Amount of Each Disbursement this Period 459.53	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B73DE096DB4484ADE94C	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Bienvenu, Claire, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2020	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 384.80	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : B36F847B522084632979	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Tuttle, Emily, , ,			Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2020	
Mailing Address PO Box 70098			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29572-0020	Amount of Each Disbursement this Period 432.59	
Purpose of Disbursement Salary		Category/ Type	Transaction ID : BE336414A6C1C4E499D1	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1276.92
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 29 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Association of Orthopaedic Surgeons		Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2020
Mailing Address 317 Massachusetts Ave NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-5769
Purpose of Disbursement Event Catering/Site Rental		Amount of Each Disbursement this Period 230.40
Candidate Name		Transaction ID : B248DF19FF1CB499AAC4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. AccuChecks		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2020
Mailing Address 605 19th Ave N		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Accounting Service		Amount of Each Disbursement this Period 41.72
Candidate Name		Transaction ID : BBFE328F0842B4CFB982
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. AccuChecks		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2020
Mailing Address 605 19th Ave N		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Payroll Taxes		Amount of Each Disbursement this Period 225.03
Candidate Name		Transaction ID : B07E82D5E48264F138C9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	497.15
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 30 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bienvenu, Claire, , ,		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2020
Mailing Address PO Box 70098		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572-0020
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 384.79
Candidate Name	Category/ Type	Transaction ID : BAF85B687934F4E4C8EB
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Rice, James, Lucas, ,		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2020
Mailing Address 5100 N Ocean Blvd		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-2541
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 459.53
Candidate Name	Category/ Type	Transaction ID : B1A60440501BE4908955
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Hudson, Susan, , ,		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2020
Mailing Address PO Box 70098		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572-0020
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 374.79
Candidate Name	Category/ Type	Transaction ID : B65BF4972C9B341FBA2E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1219.11
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 31 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Anedot			Date of Disbursement M M / D D / Y Y Y Y 02 / 29 / 2020		
Mailing Address PO Box 84314			FEC Identification Number C		
City Baton Rouge	State LA	Zip Code 70884-4314	Amount of Each Disbursement this Period 61.35		
Purpose of Disbursement Online Processing		Category/Type	Transaction ID : B6CC8F95CB5B54104A76		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. SOUTH CAROLINA REPUBLICAN PARTY FEDERAL			Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2020		
Mailing Address P.O. BOX 12373			FEC Identification Number C C00034033		
City Columbia	State SC	Zip Code 29211-2373	Amount of Each Disbursement this Period 3480.00		
Purpose of Disbursement Filing Fee		Category/Type	Transaction ID : B16D26D9B1C5245009B8		
Candidate Name SOUTH CAROLINA REPUBLICAN PARTY FEDERAL			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Aristotle			Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2020		
Mailing Address 205 Pennsylvania Ave SE			FEC Identification Number C		
City Washington	State DC	Zip Code 20003-1164	Amount of Each Disbursement this Period 2400.00		
Purpose of Disbursement Software		Category/Type	Transaction ID : B7577BF112D444195932		
Candidate Name			<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5941.35
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AccuChecks		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020
Mailing Address 605 19th Ave N		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Payroll Taxes	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 318.12	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B0DE72C76F2644774873
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. AccuChecks		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020
Mailing Address 605 19th Ave N		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3103
Purpose of Disbursement Accounting Service	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 52.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BF9BB039355543DBAC4
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Wunderlick, Margaret, , ,		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020
Mailing Address PO Box 70098		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572-0020
Purpose of Disbursement Salary	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 461.75	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B1D5527C410EB4D1082D
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	832.37
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 33 OF 79
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hudson, Susan, , ,		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020
Mailing Address PO Box 70098		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572-0020
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 374.79
Candidate Name	Category/ Type	Transaction ID : B7B05611E9E7D405693A
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Perkins, Cally, , ,		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020
Mailing Address PO Box 70098		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572-0020
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 461.75
Candidate Name	Category/ Type	Transaction ID : B8E6C8D929C934651AED
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Rice, James, Lucas, ,		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2020
Mailing Address 5100 N Ocean Blvd		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-2541
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 459.53
Candidate Name	Category/ Type	Transaction ID : B5EDFC17D0F0648F7A89
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1296.07
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 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Citi Card		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address PO Box 9001037		FEC Identification Number C
City Louisville	State KY	Zip Code 40290-1037
Purpose of Disbursement Credit Card Payment- See Memos		Amount of Each Disbursement this Period 24250.77
Candidate Name		Transaction ID : B67BEE2C108114B5CB7E
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 16.15
Candidate Name		Transaction ID : B1D3146ACD64248D8894
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 2512 Virginia Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20037-9997
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 8.70
Candidate Name		Transaction ID : B0F5EB125ABF24B80BF9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	24250.77
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 35 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. National Indian Gaming Association			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 430 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1826	Amount of Each Disbursement this Period 950.00	
Purpose of Disbursement Event Site Rental		Category/ Type	Transaction ID : B6E3E1DA9C52B4EDB911	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Exxon Mobile			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 24264 Highway 17			FEC Identification Number C	
City Garden City	State SC	Zip Code 29576	Amount of Each Disbursement this Period 22.52	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B264F88F9C5024BD49AF	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Joe's Seafood, Prime Steak & Stone Crab			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 750 15th St NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period 439.42	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : BF2ED38127E214480845	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Airlines			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 491.40	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B62635B111EC9436D936	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) B. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 640.19	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : B7EE65B9BE6A34403A33	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) c. Uber			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 1.00	
Purpose of Disbursement Travel		Category/Type	Transaction ID : BC277AFA8A4F44AE0814	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 12.48
Candidate Name	Category/ Type	Transaction ID : B566FB7474BF3473FABB
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 9.00
Candidate Name	Category/ Type	Transaction ID : B7876C6FA0A504BFB82F
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Courtyard by Marriott		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 140 L St. SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-3335
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 512.68
Candidate Name	Category/ Type	Transaction ID : B88FFBE64603F4AD5BF8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DC Taxis		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 1636 Bladensburg Rd NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-1804
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 7.85	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BC946D3EE5987423F8A7
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Heidis Corner		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 82 Ave. N		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577
Purpose of Disbursement Event Catering	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 543.06	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BB9EDC0CD533E4ED7BFB
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Capitol Lounge		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 229 Pennsylvania Ave. SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1107
Purpose of Disbursement Event Catering	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 338.79	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BD49995D8484A41F396C
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 11.21	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BDFFE8C584740447AA01
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Rose's Luxury		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 717 8th St SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-2802
Purpose of Disbursement Event Catering	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 1250.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BDE2A9DFA1A01488A8E5
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. House Members Dining Room		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address Capitol 117		FEC Identification Number C
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Meeting Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 53.85	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BE352318A5BBA44B6AB4
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 2153.78	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : B813AD5D5BAA4494E9D7	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 551 Seaboard St			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-9733	Amount of Each Disbursement this Period 126.21	
Purpose of Disbursement Cell Phone		Category/Type	Transaction ID : BC3DC3C45559145AD87C	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Capital Grille			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 601 Pennsylvania Ave SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-4303	Amount of Each Disbursement this Period 89.80	
Purpose of Disbursement Meeting Expense		Category/Type	Transaction ID : B77433117310F4151AEB	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mission		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 1221 Van S. SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Event Catering	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 277.35	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BE3A0750ECDF04E69B39
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 2512 Virginia Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20037-9997
Purpose of Disbursement Postage	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 35.59	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BFEB835911507477DAE9
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 6.89	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BCF059C38208A4681B8B
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DC Taxis		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 1636 Bladensburg Rd NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-1804
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 10.55
Candidate Name	Category/ Type	Transaction ID : BA2FFFE7BFEE640AABB0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 18.71
Candidate Name	Category/ Type	Transaction ID : B9534FA1A52894269901
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Minibar		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 855 E St. NW		FEC Identification Number C
City Washington	State DC	Zip Code 20004-2182
Purpose of Disbursement Event Catering		Amount of Each Disbursement this Period 12308.07
Candidate Name	Category/ Type	Transaction ID : B3558B60A01C6474B852
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 12.90	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BE5EF0F36C21D45FEB57
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 4333 Amon Carter Blvd		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155-2605
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 564.61	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B476A6296BD0D423F8CE
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Bright and Beautiful		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 9902 N Kings Hwy Ste B		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572-4049
Purpose of Disbursement Flowers	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 172.80	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BA27C35EFF304476DAE5
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. House Members Dining Room			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address Capitol 117			FEC Identification Number C	
City Washington	State DC	Zip Code 20001	Amount of Each Disbursement this Period 121.70	
Purpose of Disbursement Meeting Expense		Category/Type	Transaction ID : BBD447AA51D6F4EF1B2E	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Gogo air			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 1250 N Arlington Heights Rd			FEC Identification Number C	
City Itasca	State IL	Zip Code 60143-1286	Amount of Each Disbursement this Period 49.95	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B1BF53619A30E40A7A98	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Thompson Hotel			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 221 Tingey St. SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-4630	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Travel		Category/Type	Transaction ID : BFB3DB2E0749849CBA71	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Magnolias		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 2605 N Ocean Blvd		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3238
Purpose of Disbursement Meeting Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 64.84	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B80072BD73C844AA6A13 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Vonage Inc.		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 23 Main St		FEC Identification Number C
City Holmdel	State NJ	Zip Code 07733-2136
Purpose of Disbursement Cell Phone	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 22.29	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BFFF1C3A9B4194CF8B15 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Callas in the Inlet-SC		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020
Mailing Address 4516 Hwy 17		FEC Identification Number C
City Murrells Inlet	State SC	Zip Code 29576-5030
Purpose of Disbursement Flowers	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 89.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B7C34BAF9C49D45D18D8 <input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Filomena Ristorante			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 1063 Wisconsin Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20007-3605	Amount of Each Disbursement this Period 348.32	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : B80AF3578B30E4D51BF1	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Memo Item	
State: District:		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Uline			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address PO Box 88741			FEC Identification Number C	
City Chicago	State IL	Zip Code 60680-1741	Amount of Each Disbursement this Period 53.20	
Purpose of Disbursement Shipping		Category/Type	Transaction ID : B6B0CF737B57D4016981	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Memo Item	
State: District:		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DC Taxis			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 1636 Bladensburg Rd NE			FEC Identification Number C	
City Washington	State DC	Zip Code 20002-1804	Amount of Each Disbursement this Period 9.55	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B78ACEED7DDE04CF69E9	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Memo Item	
State: District:		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wall Street Journal			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 1211 Avenue of the Americas			FEC Identification Number C	
City New York	State NY	Zip Code 10036-8701	Amount of Each Disbursement this Period 38.99	
Purpose of Disbursement Subscription		Category/ Type	Transaction ID : BFAABEE1626054B2793E	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Uber			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 9.83	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B943551C27E1446BA97E	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. The Door of Hope Christian Church			Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2020	
Mailing Address 401 Martin luther King Jr. Blvd.			FEC Identification Number C	
City Marion	State SC	Zip Code 29571-4946	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : B0BE9DE9B35B44B1383D	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Citi Card		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address PO Box 9001037		FEC Identification Number C
City Louisville	State KY	Zip Code 40290-1037
Purpose of Disbursement Credit Card Payment- See Memos		Amount of Each Disbursement this Period 18729.73
Candidate Name		Transaction ID : B05A184BE08794BC1B19
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Brasserie 8 1/2		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 9 W 57th St.		FEC Identification Number C
City New York	State NY	Zip Code 10019-2701
Purpose of Disbursement Event Catering		Amount of Each Disbursement this Period 376.83
Candidate Name		Transaction ID : B0A337C1B626D4DA78C4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. DC Taxis		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 1636 Bladensburg Rd NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-1804
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 10.09
Candidate Name		Transaction ID : B98EFADB8E663410FB90
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	18729.73
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 14.28	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BC759F51008D94B61AA7	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Shell Oil			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 2103 W Bobo Newsom Hwy			FEC Identification Number C	
City Hartsville	State SC	Zip Code 29550-4770	Amount of Each Disbursement this Period 69.78	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B840E7E0FBE4B41C0A3C	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Uber			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 10.60	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B6657DE906E224C4680E	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DC Taxis		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 1636 Bladensburg Rd NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-1804
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 11.36
Candidate Name		Transaction ID : B31A433B13F4046C79A4
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Bright and Beautiful		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 9902 N Kings Hwy Ste B		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29572-4049
Purpose of Disbursement Flowers		Amount of Each Disbursement this Period 178.20
Candidate Name		Transaction ID : BD7A8B37942A247BB910
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 10.60
Candidate Name		Transaction ID : BA00324A041704A1486C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Airlines			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 305.50	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B4C1E7A80BCA84555944	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) B. Uber			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 18.89	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B53FEB4EAF90F4613999	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) C. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 551 Seaboard St			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-9733	Amount of Each Disbursement this Period 126.31	
Purpose of Disbursement Cell Phone		Category/Type	Transaction ID : BFB47632640F64413AF2	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 718.46	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B6BCAC3D066E94A6195B	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Congressional Club			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 2001 New Hampshire Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20009-3414	Amount of Each Disbursement this Period 100.00	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : B9FFC02833C2A4FABA55	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. DC Taxis			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 1636 Bladensburg Rd NE			FEC Identification Number C	
City Washington	State DC	Zip Code 20002-1804	Amount of Each Disbursement this Period 10.82	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B7A8AD1E735EF496295C	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gogo air		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 1250 N Arlington Heights Rd		FEC Identification Number C
City Itasca	State IL	Zip Code 60143-1286
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 49.95
Candidate Name		Transaction ID : B3D6F78383E4546DC886
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Covered in Cotton		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 3490 Cherrywood Rd		FEC Identification Number C
City Florence	State SC	Zip Code 29501-7353
Purpose of Disbursement Blankets		Amount of Each Disbursement this Period 8402.00
Candidate Name		Transaction ID : B5B27034E36D04544A5D
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Vonage Inc.		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 23 Main St		FEC Identification Number C
City Holmdel	State NJ	Zip Code 07733-2136
Purpose of Disbursement Cell Phone		Amount of Each Disbursement this Period 22.45
Candidate Name		Transaction ID : BA29C5F1C17F84D3DB06
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. House Members Dining Room		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address Capitol 117		FEC Identification Number C
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 42.90
Candidate Name		Transaction ID : B97E9823FBE77479BB63
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. DC Taxis		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 1636 Bladensburg Rd NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-1804
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 19.14
Candidate Name		Transaction ID : B48740A13B05745B1836
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Network for Good		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 1140 Connecticut Ave NW Ste 700		FEC Identification Number C
City Washington	State DC	Zip Code 20036-4011
Purpose of Disbursement Software		Amount of Each Disbursement this Period 103.00
Candidate Name		Transaction ID : B34BF546DAED343FA9C8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Magnolias			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020		
Mailing Address 2605 N Ocean Blvd			FEC Identification Number C		
City Myrtle Beach	State SC	Zip Code 29577-3238	Amount of Each Disbursement this Period 112.30		
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : BD489073A5B554889ACC		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. DC Taxis			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020		
Mailing Address 1636 Bladensburg Rd NE			FEC Identification Number C		
City Washington	State DC	Zip Code 20002-1804	Amount of Each Disbursement this Period 9.98		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B4ED15CD00E3543B4B2D		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. DC Taxis			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020		
Mailing Address 1636 Bladensburg Rd NE			FEC Identification Number C		
City Washington	State DC	Zip Code 20002-1804	Amount of Each Disbursement this Period 17.38		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B63AF5FFAEDE548BEE905		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wynn Las Vegas			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 3131 Las Vegas Blvd S			FEC Identification Number C	
City Las Vegas	State NV	Zip Code 89109-1967	Amount of Each Disbursement this Period 1229.93	
Purpose of Disbursement Travel		Category/Type	Transaction ID : BD085532590AA4F58908	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) B. Uber			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 21.55	
Purpose of Disbursement Travel		Category/Type	Transaction ID : BE86878C74B85410DB59	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) C. Minibar			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 855 E St. NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20004-2182	Amount of Each Disbursement this Period 2695.00	
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : B51A855E320FD4D00A6C	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 79			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020		
Mailing Address 182 Howard St # 8			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 10.60		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B1C13A25A5E124E0AB52		
Candidate Name			<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Chloe			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020		
Mailing Address 1331 4th St SE			FEC Identification Number C		
City Washington	State DC	Zip Code 20003-4459	Amount of Each Disbursement this Period 1145.12		
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B29AC18E83EB440F38C8		
Candidate Name			<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Uber			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020		
Mailing Address 182 Howard St # 8			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 10.93		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BBA42FB43EB2F40F7883		
Candidate Name			<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Amtrak			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020		
Mailing Address 50 Massachusetts Ave NE			FEC Identification Number C		
City Washington	State DC	Zip Code 20002-4214	Amount of Each Disbursement this Period 3.50		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BE504A055B7CE4413BFA		
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) B. American Airlines			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020		
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C		
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 75.00		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BD644C0F1621B4B938A7		
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

Full Name (Last, First, Middle Initial) C. FedEx			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020		
Mailing Address 258 Highway 17 N			FEC Identification Number C		
City North Myrtle Beach	State SC	Zip Code 29582-2938	Amount of Each Disbursement this Period 48.28		
Purpose of Disbursement Shipping		Category/ Type	Transaction ID : B91577C1553FA433A908		
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HARRIS TEETER			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address US 76 Cashua DR.			FEC Identification Number C	
City Florence	State SC	Zip Code 29501	Amount of Each Disbursement this Period 174.18	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : B1D68E65706264D9080E	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Amazon			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 1516 2nd Ave N			FEC Identification Number C	
City Seattle	State WA	Zip Code 98109-3171	Amount of Each Disbursement this Period 126.06	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : B3F790395FD064908B06	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. American Airlines			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C	
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 561.00	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BD2751F5F1F1747FF813	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wall Street Journal			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 1211 Avenue of the Americas			FEC Identification Number C	
City New York	State NY	Zip Code 10036-8701	Amount of Each Disbursement this Period 38.99	
Purpose of Disbursement Subscription		Category/ Type	Transaction ID : BBFFE8F686D63459F940	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Uber			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 9.17	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BE61BB1A9BBDB48F2B1C	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 310.79	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : BB24B364E725B48BCB0D	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DC Taxis		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 1636 Bladensburg Rd NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-1804
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 11.39
Candidate Name		Transaction ID : B4A72E3F376BA4D48974
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2020
Mailing Address 2301 N Kings Hwy		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-3040
Purpose of Disbursement Office Supplies		Amount of Each Disbursement this Period 426.18
Candidate Name		Transaction ID : B1C5AA5047DC14FC68B0
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Citi Card		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address PO Box 9001037		FEC Identification Number C
City Louisville	State KY	Zip Code 40290-1037
Purpose of Disbursement Credit Card Payment- See Memos		Amount of Each Disbursement this Period 11489.92
Candidate Name		Transaction ID : B2C470F84DF8049B1B3F
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	11489.92
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 62 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 1168.09	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B047C5EBCBBEE41A7ABF	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. The Swiss Colony			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 851 1st Avenue			FEC Identification Number C	
City Monroe	State WI	Zip Code 53566-3806	Amount of Each Disbursement this Period 116.96	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : B7ED31DEA38204984AC0	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. La Chaumiere			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 2813 M St NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20007-3712	Amount of Each Disbursement this Period 506.80	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B3FE70D0EE0BB471F9AB	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. We The Pizza		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 305 Pennsylvania Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1148
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 85.70
Candidate Name		Transaction ID : BB96959669BA74A93978
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. House Members Dining Room		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address Capitol 117		FEC Identification Number C
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 8.75
Candidate Name		Transaction ID : B745FCC6A37294EED8F7
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 10.60
Candidate Name		Transaction ID : BB67E8CAB40AE416983C
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 79			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020		
Mailing Address 182 Howard St # 8			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 10.90		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B9F8328786E6A42AB942		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Uber			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020		
Mailing Address 182 Howard St # 8			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 18.76		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BE965C308D2C84322961		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. Uber			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020		
Mailing Address 182 Howard St # 8			FEC Identification Number C		
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 24.94		
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B7CCDBC4A6F8F402083B		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 18.55	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B5662D64A4D2742C5A21	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Vonage Inc.			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 23 Main St			FEC Identification Number C	
City Holmdel	State NJ	Zip Code 07733-2136	Amount of Each Disbursement this Period 22.29	
Purpose of Disbursement Cell Phone		Category/ Type	Transaction ID : B26FA96220DC043309A6	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Uber			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 17.20	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B43BB3C777573411E8F9	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DC Taxis		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 1636 Bladensburg Rd NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-1804
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 13.25	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BBA961BBE02054CF0A0A
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Shutterfly		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 1000 Shutterfly Blvd		FEC Identification Number C
City Fort Mill	State SC	Zip Code 29708-5000
Purpose of Disbursement Printing	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1169.56	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BA171E32914E344CF8AF
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Intuit		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 21215 Burbank Blvd		FEC Identification Number C
City Woodland Hills	State CA	Zip Code 91367-7090
Purpose of Disbursement Accounting Service	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 740.66	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B50840958B9E444C0ACF
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 14.83	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BC311D4E562F94BD7B7A
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Campaign Financial Services		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 7315 Wisconsin Ave Ste 703E		FEC Identification Number C
City Bethesda	State MD	Zip Code 20814-3202
Purpose of Disbursement Accounting Service	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 520.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B32E8F053FA1346128B3
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Firehook Bakery		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 215 Pennsylvania Ave SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-1155
Purpose of Disbursement Meeting Expense	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 19.80	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B07A6257E53184161AB9
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 39.89
Candidate Name	Category/ Type	Transaction ID : B65A653DC84BE4DFABCE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Uber		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 1.00
Candidate Name	Category/ Type	Transaction ID : B0D2228D9920A46E99EC
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. HARRIS TEETER		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address US 76 Cashua DR.		FEC Identification Number C
City Florence	State SC	Zip Code 29501
Purpose of Disbursement Meeting Expense		Amount of Each Disbursement this Period 140.70
Candidate Name	Category/ Type	Transaction ID : BACE7C3B6CA8947F28D8
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 2512 Virginia Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20037-9997
Purpose of Disbursement Postage	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 11.10	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B0FFAC12E507F4B33937 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Fiola		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 601 Pennsylvania Ave NW		FEC Identification Number C
City Washington	State DC	Zip Code 20004-2601
Purpose of Disbursement Event Catering	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 341.05	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9DCA103B5C8643A293E <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Shutterfly		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 1000 Shutterfly Blvd		FEC Identification Number C
City Fort Mill	State SC	Zip Code 29708-5000
Purpose of Disbursement Printing	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 670.34	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B0ADAEAE286954BD48B0 <input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 10.60	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B1B3DDEA41B2F4CC1B99	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Carmine's			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 425 7th St NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20004-2229	Amount of Each Disbursement this Period 401.28	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : BDB6679CB626D491D8F4	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 2512 Virginia Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20037-9997	Amount of Each Disbursement this Period 11.10	
Purpose of Disbursement Postage		Category/ Type	Transaction ID : B4906A03617324A0BBFB	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 15.74	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B0EA23485735948AFB36	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Verizon Wireless			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 551 Seaboard St			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-9733	Amount of Each Disbursement this Period 126.31	
Purpose of Disbursement Cell Phone		Category/ Type	Transaction ID : BCE4855D3BD6D4D0487F	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. PJ Morans Restaurant			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 3 E 48th St.			FEC Identification Number C	
City New York	State NY	Zip Code 10017-1027	Amount of Each Disbursement this Period 260.45	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : B12ECF985B4254676BAE	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LOTTE NY Palace			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 455 Madison Ave			FEC Identification Number C	
City New York	State NY	Zip Code 10022-6845	Amount of Each Disbursement this Period 1446.35	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B6788598EB53349AE838	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) B. Uber			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 11.96	
Purpose of Disbursement Travel		Category/Type	Transaction ID : B0F57F3307E9643BDA16	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 2512 Virginia Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20037-9997	Amount of Each Disbursement this Period 1056.00	
Purpose of Disbursement Postage		Category/Type	Transaction ID : B41EE08E032434789AFE	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 18.84	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B513D27CD606A4D4CBCE
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. LOTTE NY Palace		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 455 Madison Ave		FEC Identification Number C
City New York	State NY	Zip Code 10022-6845
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 985.32	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B56217616882C4B22ACB
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Uber		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 182 Howard St # 8		FEC Identification Number C
City San Francisco	State CA	Zip Code 94105-1611
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 29.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : BF0F58B9ED48E4C62BD9
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DC Taxis		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 1636 Bladensburg Rd NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-1804
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 13.52
Candidate Name		Transaction ID : B60095A89DCBE4107A25
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Gogo air		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 1250 N Arlington Heights Rd		FEC Identification Number C
City Itasca	State IL	Zip Code 60143-1286
Purpose of Disbursement Travel		Amount of Each Disbursement this Period 49.95
Candidate Name		Transaction ID : B8F52D7FDC94741278C9
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Wall Street Journal		Date of Disbursement MM / DD / YYYY 02 / 06 / 2020
Mailing Address 1211 Avenue of the Americas		FEC Identification Number C
City New York	State NY	Zip Code 10036-8701
Purpose of Disbursement Subscription		Amount of Each Disbursement this Period 38.99
Candidate Name		Transaction ID : B0634B1DCB1AE44B1B77
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Firehook Bakery			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 215 Pennsylvania Ave SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1155	Amount of Each Disbursement this Period 19.80	
Purpose of Disbursement Meeting Expense		Category/Type	Transaction ID : B146516F4B5194E3FB74	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) B. Shutterfly			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 1000 Shutterfly Blvd			FEC Identification Number C	
City Fort Mill	State SC	Zip Code 29708-5000	Amount of Each Disbursement this Period 598.40	
Purpose of Disbursement Printing		Category/Type	Transaction ID : B650EA1F977D64EC3BC8	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) C. USPS			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 2512 Virginia Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20037-9997	Amount of Each Disbursement this Period 10.55	
Purpose of Disbursement Postage		Category/Type	Transaction ID : B806DD23C5B8F45E9A1A	
Candidate Name		Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 300 1st St SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-1801	Amount of Each Disbursement this Period 307.63	
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : BC48A3207562E4480956	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Hilton			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 1919 Connecticut Ave NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20009-5701	Amount of Each Disbursement this Period 320.71	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B0BB6461C2A1A418DA50	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Uber			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 182 Howard St # 8			FEC Identification Number C	
City San Francisco	State CA	Zip Code 94105-1611	Amount of Each Disbursement this Period 18.76	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : B5E417A4A5F594C81875	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. American Airlines		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 4333 Amon Carter Blvd		FEC Identification Number C
City Fort Worth	State TX	Zip Code 76155-2605
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 32.31	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B2668C1ABC68547AEBE6 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Ciao Italian Restaurant		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 5223 N Kings Hwy		FEC Identification Number C
City Myrtle Beach	State SC	Zip Code 29577-2510
Purpose of Disbursement Meeting Expense	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 74.81	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B1EE9E84025B942BFBE0 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. DC Taxis		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020
Mailing Address 1636 Bladensburg Rd NE		FEC Identification Number C
City Washington	State DC	Zip Code 20002-1804
Purpose of Disbursement Travel	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 19.68	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : B9FB7C641CA924E7EB29 <input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 79	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ciao Italian Restaurant			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 5223 N Kings Hwy			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-2510	Amount of Each Disbursement this Period 15.00	
Purpose of Disbursement Meeting Expense		Category/ Type	Transaction ID : B2328E45FA68D485DA3A	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. DC Taxis			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 1636 Bladensburg Rd NE			FEC Identification Number C	
City Washington	State DC	Zip Code 20002-1804	Amount of Each Disbursement this Period 15.42	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : BA1174B497A68459588F	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Office Depot			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2020	
Mailing Address 2301 N Kings Hwy			FEC Identification Number C	
City Myrtle Beach	State SC	Zip Code 29577-3040	Amount of Each Disbursement this Period - 988.57	
Purpose of Disbursement Office Supplies Credit		Category/ Type	Transaction ID : B6CCAABF36A5747CE96C	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	92635.69

**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 79	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Horry County Victory			Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2020	
Mailing Address PO Box 437			FEC Identification Number C	
City Conway	State SC	Zip Code 29528-0437	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Nonfederal Contribution		Category/ Type	Transaction ID : B7C666091134944519F6	
Candidate Name		Memo Item <input type="checkbox"/>		
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. Florence County Republican Party			Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2020	
Mailing Address 1825 Brigadoone Ln.			FEC Identification Number C	
City Florence	State SC	Zip Code 29505-3236	Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement Nonfederal Contribution		Category/ Type	Transaction ID : BA737351FC6DB42D2809	
Candidate Name Florence County Republican Party		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00