

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Gloria Bromell Tinubu for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	9053.77	22550.74
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	9053.77	22550.74
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9261.93	50529.14
(b) Total Offsets to Operating Expenditures (from Line 14).....	9.30	1629.20
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	9252.63	48899.94
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1869.13	
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).....	347273.04	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Gloria Bromell Tinubu 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).....	5400.00	14600.00
(ii) Unitemized.....	3653.77	7950.74
(iii) TOTAL of contributions from individuals ▶	9053.77	22550.74
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	9053.77	22550.74
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	1500.00	25000.00
(b) All Other Loans.....	500.00	500.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	2000.00	25500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	9.30	1629.20
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	11063.07	49679.94

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	9261.93	50529.14
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	500.00	5000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	500.00	5000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	9761.93	55529.14

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	567.99
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	11063.07
25. SUBTOTAL (add Line 23 and Line 24).....	11631.06
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9761.93
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1869.13

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
Thomas C. Brittain

Mailing Address 4614 Oleander Dr.

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 13 / 2013

Transaction ID : C9494981

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Kathleen S Britton

Mailing Address 620 Ansley St.

City Florence	State SC	Zip Code 29505
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FEC ID number of contributing federal political committee. **C**

Name of Employer Florence Darlington Tech	Occupation Faculty
--	-----------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 05 / 2013

Transaction ID : C9188599

Amount of Each Receipt this Period
500.00

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

Mailing Address 879 Ralph David Abernathy Blvd SW

City Atlanta	State GA	Zip Code 30310
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FEC ID number of contributing federal political committee. **C**

Name of Employer Soul Vegetarian Restaurant	Occupation Owner
--	---------------------

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 05 / 2013

Transaction ID : C9188600

Amount of Each Receipt this Period
500.00

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

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

1300.00

**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 6 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
J. Michael Daniels

Mailing Address Post Office Box 23285

City Columbia State SC Zip Code 29224

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

Name of Employer Enviro AgScience Inc Occupation Business Operations Manager

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 20 / 2013

Transaction ID : C9506726

Amount of Each Receipt this Period
 500.00

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

Mailing Address 2315 Bluff Rd

City Marion State SC Zip Code 29571

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

Name of Employer Self Employed Occupation Pastor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2013

Transaction ID : C9567683

Amount of Each Receipt this Period
 800.00

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

Mailing Address 2315 Bluff Rd

City Marion State SC Zip Code 29571

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

Name of Employer Self Employed Occupation Pastor

Receipt For: 2012
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 30 / 2013

Transaction ID : C9567690

Amount of Each Receipt this Period
 200.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
Russell Holliday

Mailing Address 125 Highway 501 W

City Galivants Ferry State SC Zip Code 29544-7601

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

Name of Employer Holliday Associates Occupation Timber Production

Receipt For: 2012
 Primary General
 Other (specify) Runoff

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 09 / 2013

Transaction ID : C9191888

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Herlina Morris

Mailing Address Post Office Box 277

City Darlington State SC Zip Code 29532

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

Name of Employer retired Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 29 / 2013

Transaction ID : C9567674

Amount of Each Receipt this Period
250.00

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

Mailing Address 2300 Windsor Forest Dr

City Florence State SC Zip Code 29501-2092

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

Name of Employer N/A Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 05 / 2013

Transaction ID : C9188605

Amount of Each Receipt this Period
300.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
Patricia Shama

Mailing Address 1680 Essex Way

City Myrtle Beach State SC Zip Code 29577-1794

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

Name of Employer NA Occupation Volunteer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 08 / 2013

Transaction ID : C9188880

Amount of Each Receipt this Period
100.00

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

Mailing Address 1680 Essex Way

City Myrtle Beach State SC Zip Code 29577-1794

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

Name of Employer NA Occupation Volunteer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 08 / 2013

Transaction ID : C9382848

Amount of Each Receipt this Period
100.00

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

Mailing Address 1680 Essex Way

City Myrtle Beach State SC Zip Code 29577-1794

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

Name of Employer NA Occupation Volunteer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 08 / 2013

Transaction ID : C9483246

Amount of Each Receipt this Period
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 55
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
Glen H. Stassen

Mailing Address 2030 Casa Grande St

City Pasadena State CA Zip Code 91104-3245

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

Name of Employer Fuller Theo. Seminary Occupation Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 08 / 2013

Transaction ID : C9483562

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
William Penn Troy

Mailing Address 247 E. Front St.

City Mullins State SC Zip Code 29574

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

Name of Employer Penn Troy Funeral Home Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 28 / 2013

Transaction ID : C9567704

Amount of Each Receipt this Period
 500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1500.00

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 55
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
Gloria Bromell Tinubu

Mailing Address 1403 7th Ave

City Conway State SC Zip Code 29526

FEC ID number of contributing federal political committee. **C H2SC07108**

Name of Employer Coastal Carolina University Occupation Economist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 03 / 2013

Transaction ID : C9471231

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Gloria Bromell Tinubu

Mailing Address 1403 7th Ave

City Conway State SC Zip Code 29526

FEC ID number of contributing federal political committee. **C H2SC07108**

Name of Employer Coastal Carolina University Occupation Economist

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
25000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2013

Transaction ID : C9567650

Amount of Each Receipt this Period
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1500.00

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 55
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
Conway National Bank

Mailing Address **PO Box 320**

City **Conway** State **SC** Zip Code **29528**

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

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 10 / 2013

Transaction ID : C9566946

Amount of Each Receipt this Period
 _____ **400.00**

B. Full Name (Last, First, Middle Initial)
Conway National Bank

Mailing Address **PO Box 320**

City **Conway** State **SC** Zip Code **29528**

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

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 28 / 2013

Transaction ID : C9566949

Amount of Each Receipt this Period
 _____ **100.00**

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

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

_____ **500.00**

_____ **500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. First Data Corporation		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2013
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 24.81
City Atlanta	State GA Zip Code 30342	
Purpose of Disbursement credit card processing fee	Category/Type	Transaction ID : D438108
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. First Data Corporation		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2013
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 17.42
City Atlanta	State GA Zip Code 30342	
Purpose of Disbursement credit card processing fee	Category/Type	Transaction ID : D439515
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. First Data Corporation		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 5565 Glenridge Connector NE		Amount of Each Disbursement this Period 16.93
City Atlanta	State GA Zip Code 30342	
Purpose of Disbursement credit card processing fee	Category/Type	Transaction ID : D441813
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	59.16
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 13 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Google Apps		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 34.16
City Mountain View	State CA Zip Code 94043	
Purpose of Disbursement email/advertisement	Candidate Name	Transaction ID : D443893
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Google Apps		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2013
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 35.00
City Mountain View	State CA Zip Code 94043	
Purpose of Disbursement email/advertisement	Candidate Name	Transaction ID : D439704
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Google Apps		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 30.00
City Mountain View	State CA Zip Code 94043	
Purpose of Disbursement email/advertisement	Candidate Name	Transaction ID : D443902
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	99.16
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 14 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Dwane Heyward		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 800.00 Transaction ID : D443905
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services- financial management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dwane Heyward		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 800.00 Transaction ID : D443908
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services- financial management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Dwane Heyward		Date of Disbursement MM / DD / YYYY 05 / 10 / 2013
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 800.00 Transaction ID : D443895
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting srvs-financial management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2400.00
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 15 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Dwane Heyward		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 200.00 Transaction ID : D443896
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services- financial management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dwane Heyward		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 600.00 Transaction ID : D443898
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services- financial management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Dwane Heyward		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2013
Mailing Address 92 Abraham PI		Amount of Each Disbursement this Period 800.00 Transaction ID : D438230
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services-financial management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1600.00
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 16 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Dwane Heyward		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2013
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 800.00 Transaction ID : D436635
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services-financial management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Dwane Heyward		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2013
Mailing Address 92 Abraham Pl		Amount of Each Disbursement this Period 800.00 Transaction ID : D434380
City Georgetown	State SC	
Zip Code 29440-6341	Purpose of Disbursement consulting services- financial management	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. HTC		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2013
Mailing Address Post Office Box 1819		Amount of Each Disbursement this Period 170.75 Transaction ID : D439707
City Conway	State SC	
Zip Code 29528-1819	Purpose of Disbursement telephone services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1770.75
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 17 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. HTC		Date of Disbursement MM / DD / YYYY 05 / 22 / 2013
Mailing Address Post Office Box 1819		Amount of Each Disbursement this Period 162.71
City Conway	State SC	
Zip Code 29528-1819	Purpose of Disbursement telephone services	Transaction ID : D439708
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Antonious Nesmith		Date of Disbursement MM / DD / YYYY 04 / 11 / 2013
Mailing Address 420 West Cheves Apt C		Amount of Each Disbursement this Period 70.00
City Florence	State SC	
Zip Code 29501	Purpose of Disbursement replace of lost check - 12/26/2012 exp	Transaction ID : D436610
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Antonious Nesmith		Date of Disbursement MM / DD / YYYY 04 / 11 / 2013
Mailing Address 420 West Cheves Apt C		Amount of Each Disbursement this Period -70.00
City Florence	State SC	
Zip Code 29501	Purpose of Disbursement lost check 1549	Transaction ID : D438107
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	162.71
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 18 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 115.52 Transaction ID : D443899
City Conway	State SC	
Purpose of Disbursement office supplies/postage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 110.35 Transaction ID : D443900
City Conway	State SC	
Purpose of Disbursement office supplies/postage	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot #2179		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2013
Mailing Address 2701 Church Street Suite A		Amount of Each Disbursement this Period 72.34 Transaction ID : D443901
City Conway	State SC	
Purpose of Disbursement office supplies	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	298.21
TOTAL This Period (last page this line number only).....	

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

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

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

Full Name (Last, First, Middle Initial) A. The Oblander Group LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2013
Mailing Address 1100 Spring St Suite 360		Amount of Each Disbursement this Period 1200.00 Transaction ID : D434367
City Atlanta State GA Zip Code 30309	Purpose of Disbursement consulting services- fundraising	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2013
Mailing Address Conway Main PO		Amount of Each Disbursement this Period 92.00 Transaction ID : D443907
City Conway State SC Zip Code 29526-9998	Purpose of Disbursement postage	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2013
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 246.56 Transaction ID : D443906
City Conway State SC Zip Code 29526	Purpose of Disbursement campaign cell service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1538.56
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 20 OF 55			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2013
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 247.61 Transaction ID : D443894
City Conway	State SC	
Purpose of Disbursement campaign cell phone service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2013
Mailing Address 2709 Church Street		Amount of Each Disbursement this Period 247.44 Transaction ID : D436207
City Conway	State SC	
Purpose of Disbursement campaign cell services		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Woodfield Group Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2013
Mailing Address 1118 Old Breckenridge Lane		Amount of Each Disbursement this Period 600.00 Transaction ID : D438119
City Montgomery	State AL	
Purpose of Disbursement Consulting Services (FEC Compliance/Regulations)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1095.05
TOTAL This Period (last page this line number only).....	9023.60

**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 21 OF 55	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. Gloria Bromell Tinubu		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2013
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 250.00 Transaction ID : D436616
City Conway	State SC	
Purpose of Disbursement partial loan repayment		Category/ Type
Candidate Name Gloria Bromell Tinubu		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
State: SC	District: 07	

Full Name (Last, First, Middle Initial) B. Gloria Bromell Tinubu		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2013
Mailing Address 1403 7th Ave		Amount of Each Disbursement this Period 250.00 Transaction ID : D436617
City Conway	State SC	
Purpose of Disbursement partial loan repayment		Category/ Type
Candidate Name Gloria Bromell Tinubu		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	
State: SC	District: 07	

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L776

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

City State ZIP Code
 Conway SC 29526

Original Amount of Loan 5000.00	Cumulative Payment To Date 2000.00	Balance Outstanding at Close of This Period 3000.00
------------------------------------	---------------------------------------	--

TERMS

Date Incurred M 12 / D 30 / Y 2011	Date Due M / D / Y none	Interest Rate none % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	----------------------------	-------------------------------	---

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

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

SUBTOTALS This Period This Page (optional).....	[] 3000.00
TOTALS This Period (last page in this line only).....	[]

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L777

Gloria Bromell Tinubu for Congress

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

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary
 General
 Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526

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

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y none % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 10000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L779

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

City State ZIP Code
 Conway SC 29526

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

TERMS

Date Incurred M 02 / D 14 / Y 2012	Date Due M / D / Y none	Interest Rate none % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional).....	▶	[] 10000.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L792

Gloria Bromell Tinubu for Congress

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

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

13000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

13000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 03 /

D 05 /

Y 2012 Y

M /

D /

Y none Y

none % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

13000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L800

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

City State ZIP Code
 Conway SC 29526

Original Amount of Loan 51000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 51000.00
-------------------------------------	------------------------------------	---

TERMS

Date Incurred M 03 / D 30 / Y 2012	Date Due M / D / Y none	Interest Rate none % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	----------------------------	-------------------------------	---

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

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

SUBTOTALS This Period This Page (optional).....	▶	51000.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L802**

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

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526

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

TERMS

Date Incurred: M 03 / D 14 / Y 2012
Date Due: M / D / Y none
Interest Rate: none % (apr)
Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 10000.00

TOTALS This Period (last page in this line only)..... ▶ []

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L803

Gloria Bromell Tinubu for Congress

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

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary
 General
 Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526

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

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 14 / Y 2012 M M / D D / Y non none % (apr) Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 10000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L818

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

Mailing Address
1403 7th Ave
 City State ZIP Code
 Conway SC 29526

Original Amount of Loan 25000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25000.00
-------------------------------------	------------------------------------	---

TERMS
 Date Incurred: M 05 / D 14 / Y 2012
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 25000.00
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L823

Gloria Bromell Tinubu for Congress

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

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M 05 / D 21 / Y 2012

Date Due

M / D / Y none

Interest Rate

none % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L825**

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

Mailing Address
1403 7th Ave
 City State ZIP Code
 Conway SC 29526

Original Amount of Loan 25000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 25000.00
-------------------------------------	------------------------------------	---

TERMS
 Date Incurred: M 05 / D 30 / Y 2012
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 25000.00
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L826

Gloria Bromell Tinubu for Congress

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

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

30000.00

0.00

30000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

06

04

2012

none

none

% (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

30000.00

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

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

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

NAME OF COMMITTEE (In Full) Transaction ID : L828
Gloria Bromell Tinubu for Congress

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

City	State	ZIP Code
Conway	SC	29526

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 07 / Y 2012	M M / D D / Y no due date	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	30000.00
TOTALS This Period (last page in this line only).....	

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L830

Gloria Bromell Tinubu for Congress

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

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

26000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

26000.00

TERMS

Date Incurred

M 06 / D 11 / Y 2012 Y Y

Date Due

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

Interest Rate

0.00 % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

26000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

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

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7000.00	6500.00	500.00

TERMS

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

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

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

SUBTOTALS This Period This Page (optional).....	▶	500.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

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

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

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3500.00	2500.00	1000.00

TERMS

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

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

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

SUBTOTALS This Period This Page (optional).....	1000.00
TOTALS This Period (last page in this line only).....	

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L840**

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

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2500.00	2000.00	500.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 30 / Y 2012	M / D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	500.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : L846

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

Mailing Address
 1403 7th Ave
 City State ZIP Code
 Conway SC 29526

Original Amount of Loan 10000.00	Cumulative Payment To Date 1300.00	Balance Outstanding at Close of This Period 8700.00
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TERMS
 Date Incurred: M 08 / D 06 / Y 2012
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 8700.00
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

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

City State ZIP Code
 Conway SC 29526

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

TERMS
 Date Incurred: M 08 / D 17 / Y 2012
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

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

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L855

Gloria Bromell Tinubu for Congress

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

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526

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

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

08

20

2012

none

none % (apr)

Yes No

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

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

SUBTOTALS This Period This Page (optional)..... 5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L856**

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

City State ZIP Code
 Conway SC 29526

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

TERMS
 Date Incurred: M 08 / D 20 / Y 2012
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 10000.00
TOTALS This Period (last page in this line only)..... ▶ []

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L862

Gloria Bromell Tinubu for Congress

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

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

3000.00

0.00

3000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09

19

2012

no due date

0.00

% (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

3000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L868

Gloria Bromell Tinubu for Congress

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

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

5000.00

0.00

5000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

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

M M / D D / Y Y Y Y
none

0.00 % (apr)

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

5000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L870

Gloria Bromell Tinubu for Congress

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

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 11 /

D 01 /

Y 2012 Y

M M /

D D /

Y none Y

none % (apr)

Yes

No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

10000.00

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L872

Gloria Bromell Tinubu for Congress

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

[PERSONAL FUNDS]

Election: 2012

Gloria Bromell Tinubu PERS FUNDS

Primary

General

Other (specify) ▼

Mailing Address

1403 7th Ave

City

State

ZIP Code

Conway

SC

29526

Original Amount of Loan

15000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

15000.00

TERMS

Date Incurred

M 11 / D 13 / Y 2012 Y

Date Due

M / D / Y none Y

Interest Rate

none % (apr)

Secured:

Yes No

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

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

15000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L876**

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

City State ZIP Code
 Conway SC 29526

Original Amount of Loan 2500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2500.00
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TERMS
 Date Incurred: M 12 / D 26 / Y 2012
 Date Due: M / D / Y no due date
 Interest Rate: none % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 2500.00
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

NAME OF COMMITTEE (In Full) Transaction ID : L877
Gloria Bromell Tinubu for Congress

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

City	State	ZIP Code
Conway	SC	29526

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

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 26 / Y 2012	M M / D D / no due date	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="5000.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

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

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L879**

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

City	State	ZIP Code
Conway	SC	29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 31 / Y 2012	M / D / Y none	none % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	1000.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L881**

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

City Conway State SC ZIP Code 29526

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
------------------------------------	------------------------------------	--

TERMS
 Date Incurred: M 06 / D 03 / Y 2013
 Date Due: M / D / Y none
 Interest Rate: none % (apr)
 Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 1000.00
TOTALS This Period (last page in this line only)..... ▶ []
 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L882**

LOAN SOURCE Full Name (Last, First, Middle Initial) Conway National Bank	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 320	

City	State	ZIP Code
Conway	SC	29528

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
400.00	0.00	400.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05 / 10 / 2013	minimum monthly	18.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	400.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L883**

LOAN SOURCE Full Name (Last, First, Middle Initial) Conway National Bank	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO Box 320	

City	State	ZIP Code
Conway	SC	29528

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100.00	0.00	100.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 28 / Y 2013	M M / D D / Y Y Y Y Y Y minimum monthly	18.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional).....	▶	100.00
TOTALS This Period (last page in this line only).....	▶	[]

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

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **Gloria Bromell Tinubu for Congress** Transaction ID : **L884**

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

Mailing Address
1403 7th Ave

City State ZIP Code
Conway SC 29526

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0.00	500.00

TERMS

Date Incurred: M 06 / D 28 / Y 2013
Date Due: M / D / Y no due date
Interest Rate: 0.00 % (apr)
Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)..... ▶ 500.00

TOTALS This Period (last page in this line only)..... ▶ 322200.00

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 53 OF 55
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

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

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

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

Outstanding Balance Beginning This Period 1200.00	Transaction ID : D426716	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1200.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lake Research Partners Inc	Nature of Debt (Purpose): polling and survey services
Mailing Address 1726 M Street NW Suite 1100	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period 7500.00	Transaction ID : D426709	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7500.00

1) SUBTOTALS This Period This Page (optional)	8785.80
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mad Dog Mail Inc		Nature of Debt (Purpose): campaign mailing/advertisement
Mailing Address 5542 First Coast Highway Suite 300		
City	State	Zip Code
Fernandina Beach	FL	32034

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Mr Reginald Poplus		Nature of Debt (Purpose): Consulting Services - management
Mailing Address 2475 Enon Rd		
City	State	Zip Code
Atlanta	GA	30331

Outstanding Balance Beginning This Period	Transaction ID : D441821	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="4191.66"/>	<input type="text" value="0.00"/>	<input type="text" value="4191.66"/>

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

Outstanding Balance Beginning This Period	Transaction ID : D426714	
<input type="text" value="1000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="1000.00"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="6691.66"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

NAME OF COMMITTEE (In Full)

Gloria Bromell Tinubu for Congress

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

Outstanding Balance Beginning This Period 1200.00	Transaction ID : D426712	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1200.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Oblander Group LLC		Nature of Debt (Purpose): consulting services-fundraising
Mailing Address 1100 Spring St Suite 360		
City State Zip Code Atlanta GA 30309		

Outstanding Balance Beginning This Period 8091.58	Transaction ID : D426710	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8091.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Oblander Group LLC		Nature of Debt (Purpose): fundraising consulting
Mailing Address 1100 Spring St Suite 360		
City State Zip Code Atlanta GA 30309		

Outstanding Balance Beginning This Period 0.00	Transaction ID : D441820	
Amount Incurred This Period 304.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 304.00

1) SUBTOTALS This Period This Page (optional)	9595.58
2) TOTALS This Period (last page this line number only)	25073.04
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	322200.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	347273.04