

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

TOM RICE FOR CONGRESS

ADDRESS (number and street) 1107 48th Ave., N.

Suite 310-A

Check if different than previously reported. (ACC)

Myrtle Beach

SC

29577-5443

2. FEC IDENTIFICATION NUMBER ▼

C C00506048

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

SC

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

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

Election on MM / DD / YYYY in the State of

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

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

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY through MM / DD / YYYY

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

Type or Print Name of Treasurer Lisa Lisker

Signature of Treasurer Lisa Lisker

[Electronically Filed]

Date

MM / DD / YYYY

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

Office Use Only									
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
TOM RICE FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	121559.35	1074595.68
(b) Total Contribution Refunds (from Line 20(d))	400.00	8250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	121159.35	1066345.68
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	89054.99	531668.67
(b) Total Offsets to Operating Expenditures (from Line 14).....	92.00	1101.41
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	88962.99	530567.26
8. Cash on Hand at Close of Reporting Period (from Line 27).....	488841.81	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	24000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

TOM RICE FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	35600.00	625424.05
(ii) Unitemized.....	1105.00	12028.00
(iii) TOTAL of contributions from individuals ▶	36705.00	637452.05
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	84854.35	437143.63
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	121559.35	1074595.68
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	92.00	1101.41
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	121651.35	1075697.09

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	89054.99	531668.67
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	76000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	76000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	400.00	6250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	400.00	8250.00
21. OTHER DISBURSEMENTS	82600.00	211955.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	172054.99	827873.67

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	539245.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	121651.35
25. SUBTOTAL (add Line 23 and Line 24).....	660896.80
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	172054.99
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	488841.81

**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 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Traci Miles		Date of Receipt M M / D D / Y Y Y Y 07 / 17 / 2014	
Mailing Address PO Box 70205		Transaction ID : A22CBEC174D1045CCA5B	
City Myrtle Beach	State SC	Zip Code 29572-0022	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Miles Real Estate	Occupation Realtor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Darrell L. Conner		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2014	
Mailing Address 3105 Wynford Drive		Transaction ID : ABA28BAAEBAD348449EF	
City Fairfax	State VA	Zip Code 22031-2825	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer K&L Gates	Occupation Government Affairs Counselor		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. Jerry Owens		Date of Receipt M M / D D / Y Y Y Y 07 / 22 / 2014	
Mailing Address 1411 Easty Jefferson St		Transaction ID : A39AB76676E7D48119CD	
City Dillon	State SC	Zip Code 29536	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Industrial Performance Partners, Inc	Occupation General Manager		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

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

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

FOR LINE NUMBER: PAGE 6 OF 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Marsha S Bryant

Mailing Address 3031 Hoffmeyer Rd

City State Zip Code
Florence SC 29501-7553

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

Name of Employer Occupation
Pee Dee Pediatric Dentistry Admin. Assistant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : A8DE652AE15E645EA9F9

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Lynda Hardee

Mailing Address 55 Park Street Ext

City State Zip Code
Little River SC 29566-7818

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

Name of Employer Occupation
Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : AE7E4DA008A734A60BF2

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
Dr. Charles Welch

Mailing Address 2304 Windsor Forest Dr

City State Zip Code
Florence SC 29501-2092

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

Name of Employer Occupation
Self Employed Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A01979E3F1B3F4790BB9

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. Allen Martin

Mailing Address 10095 Lawyers Road

City Vienna	State VA	Zip Code 22181-2939
----------------	-------------	------------------------

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

Name of Employer The Livingston Group	Occupation Partner
--	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : A5BBCBF97AC3E4384842

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Furman Brodie

Mailing Address 1214 Dunvegan Rd

City Florence	State SC	Zip Code 29501-5628
------------------	-------------	------------------------

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

Name of Employer Charles Ingram Lumber Co.	Occupation CEO
---	-------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : AB10BCC9248D04468BFF

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Clyde A. Selleck III

Mailing Address 501 Chamblee Blvd

City Greenville	State SC	Zip Code 29615-6740
--------------------	-------------	------------------------

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

Name of Employer Michelin North America	Occupation President
--	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : A20EAF2275B7C4575A42

Amount of Each Receipt this Period
1000.00

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

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

3850.00

**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 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Victoria Dickey

Mailing Address 225 Silvercreek Drive

City Lexington State SC Zip Code 29072-8089

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

Name of Employer Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : ACA5CB22ADF7E464782F

Amount of Each Receipt this Period
 500.00

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

Mailing Address 4012 Ethan Thomas Drive

City Clinton State MD Zip Code 20735-4420

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

Name of Employer Occupation
 Capital Hill Consulting Group Lobbyist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : AC1897F09374E4C858A1

Amount of Each Receipt this Period
 500.00

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

Mailing Address 3020 Watersedge Lane

City Florence State SC Zip Code 29501-6387

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

Name of Employer Occupation
 Self Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A2AEFF6EA86A34223AC3

Amount of Each Receipt this Period
 1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Charles Maxwell

Mailing Address 441 Country Club Dr

City Johnsonville State SC Zip Code 29555-6608

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

Name of Employer Self Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 05 / 2014

Transaction ID : A5A632AA2BF50439092E

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
W. Henry Johnson

Mailing Address 71 Rivers Street

City Lake City State SC Zip Code 29560

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

Name of Employer W. Lee Flowers & Co., Inc. Occupation Grocer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : ADAAFDF72A67A4270B19

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Paul Benik Jr.

Mailing Address 414 Queens Rd

City Myrtle Beach State SC Zip Code 29572-5411

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

Name of Employer Arcadian Risk Management Occupation Insurance Agent

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 11 / 2014

Transaction ID : A9D39E1E4503847FCA79

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 2228 Windsor Forest Dr

City Florence State SC Zip Code 29501-2069

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

Name of Employer Palmetto Packaging Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014

Transaction ID : A4ECBBBF7D2534D028AC

Amount of Each Receipt this Period
 500.00

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

Mailing Address 2512 W Edgefield Rd

City Florence State SC Zip Code 29501-1919

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

Name of Employer Charles Ingram Lumber Co. Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : AB47EA9703A2A4A56998

Amount of Each Receipt this Period
 2600.00

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

Mailing Address PO Box 829

City Shallotte State NC Zip Code 28459-0829

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

Name of Employer Self Occupation Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : A4EB6D6E71C6C4EDCB5C

Amount of Each Receipt this Period
 2000.00

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

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

5100.00

**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 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Thaddeus E. Strom

Mailing Address 4919 Sedgwick Street NW

City Washington State DC Zip Code 20016-2326

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

Name of Employer Parry, Romani, DeConcini & Symms Occupation Vice President for Congressional Relat

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 15 / 2014

Transaction ID : AF1B53B03E02C4AC383A

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Benjy A. Hardee

Mailing Address 55 Park Street Ext

City Little River State SC Zip Code 29566-7818

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

Name of Employer AO Hardee & Sons, Inc. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5500.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 24 / 2014

Transaction ID : A1C284B3614BE443194F

Amount of Each Receipt this Period
2200.00

C. Full Name (Last, First, Middle Initial)
Reamer B. King

Mailing Address 1700 W Evans Street

City Florence State SC Zip Code 29501-3332

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

Name of Employer King Cadillac Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 19 / 2014

Transaction ID : AE255BCDD63404CA4AEB

Amount of Each Receipt this Period
1000.00

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

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

3400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 710 Aldwich Place

City State Zip Code
Florence SC 29501-2913

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

Name of Employer Occupation
Self Business Owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : A8BFD7575A97540009D4

Amount of Each Receipt this Period
1000.00

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

Mailing Address 802 Mast Ct

City State Zip Code
Murrells Inlet SC 29576-8727

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

Name of Employer Occupation
Retired Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1900.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : AFAB7CD2864C746E9A1D

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Benjy A. Hardee

Mailing Address 55 Park Street Ext

City State Zip Code
Little River SC 29566-7818

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

Name of Employer Occupation
AO Hardee & Sons, Inc. Owner

Receipt For: 2012
 Primary General
 Other (specify) Runoff2012

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : AB9176235936545C985B

Amount of Each Receipt this Period
300.00

Runoff Debt Contribution

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

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

1400.00

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

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

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15
 PAGE 13 OF 94

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. Gerald Harmon

Mailing Address 117 Shearwater Ct

City State Zip Code
 Georgetown SC 29440-7072

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

Name of Employer Occupation
 Self Employed Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : A2C3EA7FB47744668B2C

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Carolyn Schaffer

Mailing Address 5310 S Trimble Rd NE

City State Zip Code
 Atlanta GA 30342-2175

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

Name of Employer Occupation
 Self Architect

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : AD73B40C514C34080A1A

Amount of Each Receipt this Period
 3000.00

Refunded 9/15

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

Mailing Address 180 H L King Dr

City State Zip Code
 Lake City SC 29560-4449

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

Name of Employer Occupation
 W. Lee Flowers & Co., Inc. Wholesale & Retail Grocer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : A3B6A64C4728F4E5BADC

Amount of Each Receipt this Period
 1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dot Thompson

Mailing Address 3313 Maple Chase Lane

City Florence State SC Zip Code 29501-8046

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : A73FA6847C4BA4287B5F

Amount of Each Receipt this Period
2600.00

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

Mailing Address 642 Ascot Drive

City Florence State SC Zip Code 29501-1913

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

Name of Employer Self Employed Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : AF314968AE6484FF8ABB

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Charles R. Jackson

Mailing Address 198 Kaminer Ln

City Lexington State SC Zip Code 29072-9280

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

Name of Employer Cr Jackson Occupation Real Estate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A97ED2D0605D54D0E8E5

Amount of Each Receipt this Period
250.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address **PO Box 6769**

City **Myrtle Beach** State **SC** Zip Code **29572-0001**

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

Name of Employer _____ Occupation Information Requested _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : AAF4C405F99D04D4BBB7

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
Robert Moser

Mailing Address **PO Box 8084**

City **Columbia** State **SC** Zip Code **29202-8084**

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

Name of Employer _____ Occupation Information Requested _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : A6D93079D0F684367A25

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
Dr. Stephen Imbeau MD

Mailing Address **950 Park Ave**

City **Florence** State **SC** Zip Code **29501-5734**

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

Name of Employer **Allergy, Asthma, And Sinus Cen** Occupation **Owner/founder**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 02 / 2014

Transaction ID : A0DF2B435D5CF4387BE1

Amount of Each Receipt this Period
 _____ 1000.00

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

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

_____ 2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 94
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 4604 North Kings Highway

City State Zip Code
Myrtle Beach SC 29577-2769

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

Name of Employer Occupation
Self Employed Realtor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 11 / 2014

Transaction ID : A23B33E077E144150922

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Cameron F. Crawford

Mailing Address 20 Hilton Glen Ct

City State Zip Code
Chapin SC 29036-7525

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

Name of Employer Occupation
Sc House Rep. Caucus Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 25 / 2014

Transaction ID : A6370161A41C74F68A41

Amount of Each Receipt this Period
250.00

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).....

750.00

35600.00

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

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

FOR LINE NUMBER: PAGE 17 OF 94
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Realtors Pac

Mailing Address 430 N Michigan Ave # 60611

City Chicago State IL Zip Code 60611-4011

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : AFC7DD4FAC8574CBBAF8

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
THE WILLIAMS COMPANIES, INC. POLITICAL ACTION COMMITTEE

Mailing Address 1627 EYE STREET NW SUITE 900

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00040394

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : A87ECF9C1BD5E4B5FA6C

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN MOVING AND STORAGE ASSOCIATION POLITICAL ACTION COMMITTEE (AMPAC)

Mailing Address 1611 DUKE STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00255257

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : A99EACD7FA78D4C74BDA

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 18 OF 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 1915 Rexford Road

City State Zip Code
Charlotte NC 28211-3465

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2014

Transaction ID : AEEB8E03370084FD0A9A

Amount of Each Receipt this Period
 _____ 2000.00

B. Full Name (Last, First, Middle Initial)
Blue Cross Blue Shield of SC PAC

Mailing Address I-20 at Alpine Rd.

City State Zip Code
Columbia SC 29219-0001

FEC ID number of contributing federal political committee. **C C00406850**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 6500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 24 / 2014

Transaction ID : A2B85C7C90A514C89A0E

Amount of Each Receipt this Period
 _____ 2000.00

C. Full Name (Last, First, Middle Initial)
Duke Energy Corporation PAC

Mailing Address 550 S. Tryon Street

City State Zip Code
Charlotte NC 28202-4200

FEC ID number of contributing federal political committee. **C C00083535**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2014

Transaction ID : AF794A732D42B46269CA

Amount of Each Receipt this Period
 _____ 2000.00

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

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

_____ 6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 2941 Fairview Park Dr Ste 100
#100

City Falls Church State VA Zip Code 22042-4541

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : A4BA0EE8B2FF14D95869

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Blue Cross Blue Shield of SC PAC

Mailing Address I-20 at Alpine Rd.

City Columbia State SC Zip Code 29219-0001

FEC ID number of contributing federal political committee. **C C00406850**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : A0061B5F3098B427F988

Amount of Each Receipt this Period
3000.00

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

Mailing Address 1101 Pennsylvania Avenue NW
Suite 200

City Washington State DC Zip Code 20004-2514

FEC ID number of contributing federal political committee. **C C00034405**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : A5E40EEBC0FC74418ACC

Amount of Each Receipt this Period
1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Dealers Election Action Committee

Full Name (Last, First, Middle Initial)
Dealers Election Action Committee

Mailing Address 8400 Westpark Dr.

City State Zip Code
Mc Lean VA 22102-5116

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : AC355D7D9BAC548C9952

Amount of Each Receipt this Period
1000.00

B. Kelley Drye & Warren, LLP PAC

Full Name (Last, First, Middle Initial)
Kelley Drye & Warren, LLP PAC

Mailing Address 3050 K St. NW
Suite 400

City State Zip Code
Washington DC 20007-5100

FEC ID number of contributing federal political committee. **C** C00301929

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : AA02771215E1B4E95AD4

Amount of Each Receipt this Period
1000.00

C. Committee for the Advancement of Southeast Cotton

Full Name (Last, First, Middle Initial)
Committee for the Advancement of Southeast Cotton

Mailing Address 139 Prominence Court
Suite 110

City State Zip Code
Dawsonville GA 30534-8940

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : ADDC16B070A8B4AF4968

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SAFARI CLUB INTERNATIONAL PAC (SCI-PAC)

Mailing Address 4800 W. GATES PASS ROAD

City TUCSON State AZ Zip Code 85745

FEC ID number of contributing federal political committee. **C** C00122101

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : A5559767F5F6F4667B4D

Amount of Each Receipt this Period
2000.00

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

Mailing Address 1301 K St NW Suite 800 West

City Washington State DC Zip Code 20005-3317

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : A1C053890249E4F8BBE1

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Conservative Victory Fund

Mailing Address P.O. Box 15245

City Washington State DC Zip Code 20003-0245

FEC ID number of contributing federal political committee. **C** C00009704

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1087.80

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : AC7D3B6C6678C4150A97

Amount of Each Receipt this Period
354.35

In-kind:Printing/Fax

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

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

3854.35

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

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

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

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 1932 Wynnton Rd.

City State Zip Code
Columbus GA 31909

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : A2D7372D1E32644EB850

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
National Assoc of Home Builders PAC

Mailing Address 1201 15th St NW

City State Zip Code
Washington DC 20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A9C0AFB5851E1473495A

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
United Technologies Corporation PAC

Mailing Address 1101 Pennsylvania Ave NW Fl 10
10th Floor

City State Zip Code
Washington DC 20004-2566

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : A9D3ABD886C07428792E

Amount of Each Receipt this Period
1000.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 23 OF 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 1000 Lowes Blvd

City State Zip Code
Mooresville NC 28117-8520

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : A949CF192E561433287D

Amount of Each Receipt this Period
2500.00

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

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

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : A1FD6570A1BF540AE8EA

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1932 Wynnton Rd.

City State Zip Code
Columbus GA 31909

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : A19ABCF978CC647E6867

Amount of Each Receipt this Period
2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. NRA- Political Victory Fund

Full Name (Last, First, Middle Initial)
Mailing Address 11250 Waples Mill Rd

City State Zip Code
Fairfax VA 22030-6003

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 18 / 2014

Transaction ID : AA56D3597B2934BD884E

Amount of Each Receipt this Period
1000.00

B. Lockheed Martin Employees' Political Action Committee

Full Name (Last, First, Middle Initial)
Mailing Address 2121 Crystal Drive Suite 100

City State Zip Code
Arlington VA 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : AF408369D6A7849D7BD3

Amount of Each Receipt this Period
1000.00

C. AISI-Steel PAC

Full Name (Last, First, Middle Initial)
Mailing Address 25 Massachusetts Avenue NW Suite 800

City State Zip Code
Washington DC 20001-7406

FEC ID number of contributing federal political committee. **C** C00295097

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014

Transaction ID : A0E1A5634FDFD41BCB1B

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address Post Office Box 18254

City Washington State DC Zip Code 20036-8254

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
8000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 01 / 2014

Transaction ID : A1450FD6402814FEBB51

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
VULCAN MATERIALS COMPANY POLITICAL ACTION COMMITTEE

Mailing Address P.O. BOX 385014

City BIRMINGHAM State AL Zip Code 35238

FEC ID number of contributing federal political committee. **C C00116020**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 07 / 2014

Transaction ID : A4EEC612E93C947309DD

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1200 Wilson Blvd

City Arlington State VA Zip Code 22209-2300

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
11500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : A107EF3F64F2B44CDAE8

Amount of Each Receipt this Period
500.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 26 OF 94
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 220 Leigh Farm Rd.

City State Zip Code
Durham NC 27707-8110

FEC ID number of contributing federal political committee. **C C00077321**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
15000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 04 / 2014

Transaction ID : A3207DAB37F72438F99F

Amount of Each Receipt this Period
5000.00

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

Mailing Address PO Box 764

City State Zip Code
Columbia SC 29202-0764

FEC ID number of contributing federal political committee. **C C00200907**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : AA836420866FE4B99BE9

Amount of Each Receipt this Period
2500.00

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

Mailing Address 2202 N. WESTSHORE BLVD.
5TH FLOOR

City State Zip Code
TAMPA FL 33607

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 28 / 2014

Transaction ID : A37C38B950DC244BE883

Amount of Each Receipt this Period
2000.00

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

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

9500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Aircraft Owners and Pilots Association PAC

Full Name (Last, First, Middle Initial)
Mailing Address 421 Aviation Way

City	State	Zip Code
Frederick	MD	21701-4756

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2014

Transaction ID : AC80B423E51524659B5D

Amount of Each Receipt this Period
1000.00

B. SCANA Corporation PAC

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 764

City	State	Zip Code
Columbia	SC	29202-0764

FEC ID number of contributing federal political committee. **C** C00200907

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 07 / 2014

Transaction ID : A6AC7398AF2F04C22A7E

Amount of Each Receipt this Period
500.00

C. The Boeing Company PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1200 Wilson Blvd

City	State	Zip Code
Arlington	VA	22209-2300

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

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
11000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 01 / 2014

Transaction ID : A9880228273A947A7AE5

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Outdoor Advertising PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1850 M St NW Ste 1040
 City Washington State DC Zip Code 20036-5821
 FEC ID number of contributing federal political committee. **C** C00045781
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014
Transaction ID : ABDFE80511314488BA5B
 Amount of Each Receipt this Period
 1000.00

B. Owner Operator Independent Drivers Assoc PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 1000
 City Grain Valley State MO Zip Code 64029-1000
 FEC ID number of contributing federal political committee. **C** C00236778
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 28 / 2014
Transaction ID : A2E40BCAB588F40C6870
 Amount of Each Receipt this Period
 1000.00

C. NFIB Safe Trust PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1201 F St NW Ste 200
 City Washington State DC Zip Code 20004-1221
 FEC ID number of contributing federal political committee. **C** C00101105
 Name of Employer Occupation
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 19 / 2014
Transaction ID : AFE24778FA4C647CCB2C
 Amount of Each Receipt this Period
 1000.00

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

3000.00

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

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

FOR LINE NUMBER: PAGE 29 OF 94
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address P.O. BOX 3535

City State Zip Code
BALLWIN MO 63022

FEC ID number of contributing federal political committee. **C** C00531764

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2014

Transaction ID : A9BFCF1A83DBA4250A31

Amount of Each Receipt this Period
1000.00

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

Mailing Address 4121 Wilson Blvd FI 10

City State Zip Code
Arlington VA 22203-1839

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2014

Transaction ID : A2F352C28AE3A408D94A

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1000 Lowes Blvd

City State Zip Code
 Mooresville NC 28117-8520

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2014

Transaction ID : AF12B8DE5F657453BB22

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Tenet Healthcare Corporation PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1445 Ross Avenue
Suite 1400

City Dallas State TX Zip Code 75202-2703

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 15 / 2014

Transaction ID : A199A2CC8087D4E96B1B

Amount of Each Receipt this Period
500.00

B. American Dental PAC

Full Name (Last, First, Middle Initial)
Mailing Address 1111 14th St., NW

City Washington State DC Zip Code 20005-5603

FEC ID number of contributing federal political committee. **C C00000729**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 18 / 2014

Transaction ID : A0026C5005A574B7B98C

Amount of Each Receipt this Period
2500.00

C. Wine & Spirits Wholesalers of Amer PAC

Full Name (Last, First, Middle Initial)
Mailing Address 805 15th St NW Ste 430
Suite 430

City Washington State DC Zip Code 20005-2273

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : AB808AC8FBAC946E9B24

Amount of Each Receipt this Period
2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 MASSACHUSETTS AVE. NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : A481FD78C30CC43E9866

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN BAKERS ASSOCIATION AMERICAN BAKERS POLITICAL ACTION COMMITTEE

Mailing Address 1300 I STREET NW SUITE 700 WEST

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee. **C** C00016386

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 31 / 2014

Transaction ID : A8B0537C7B5134DD4892

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
Transportation Intermediaries Association PAC

Mailing Address 1625 Prince Street
Suite 200

City	State	Zip Code
Alexandria	VA	22314-2883

FEC ID number of contributing federal political committee. **C** C00335091

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : A79E023D3B48A467DAF6

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 2300 Wilson Blvd Ste 400

City State Zip Code
Arlington VA 22201-5426

FEC ID number of contributing federal political committee. **C** C00082917

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : A42A43EFC03FF4706A66

Amount of Each Receipt this Period
1000.00

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

Mailing Address 5959 Las Colinas Blvd

City State Zip Code
Irving TX 75039-4202

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : AFE7851F21C5F4381967

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
OLD DOMINION FREIGHT LINE INC POLITICAL ACTION COMMITTEE (OLD DOMINION PAC)

Mailing Address 500 OLD DOMINION WAY

City State Zip Code
THOMASVILLE NC 27360

FEC ID number of contributing federal political committee. **C** C00496836

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 24 / 2014

Transaction ID : AC0C86DF38CB74EB5B94

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
U.S. TRAVEL ASSOCIATION PAC

Mailing Address 1100 NEW YORK AVENUE
SUITE 450W

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00457754**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 31 / 2014

Transaction ID : A91CCB7E0173C4905868

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Title Industry Political Action Committee

Mailing Address 1828 L Street, NW
Suite 705

City Washington State DC Zip Code 20036-5107

FEC ID number of contributing federal political committee. **C C00012914**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2014

Transaction ID : ABA188F49D2A34E52B88

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
FEDEXPAC FEDERAL EXPRESS POLITICAL ACTION COMMITTEE

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

FEC ID number of contributing federal political committee. **C C00068692**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 15 / 2014

Transaction ID : ADF6DBA3B31474EF7B83

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) General Electric PAC		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2014	
Mailing Address 1299 Pennsylvania Ave NW Suite 900		Transaction ID : A4C784A9AA4C2474B9A8	
City Washington State DC Zip Code 20004-2414	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00024869	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7000.00		

Full Name (Last, First, Middle Initial) CROP INSURANCE PROFESSIONALS ASSOCIATION PAC-CIPA PAC		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2014	
Mailing Address 316 PENNSYLVANIA AVE SE SUITE 401		Transaction ID : A1292E24245024D5AA1A	
City WASHINGTON State DC Zip Code 20003	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00503680	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) ARCELORMITTAL USA GOOD GOVERNMENT		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address 1808 Eye St. NW 5th Floor		Transaction ID : A729455258D844947B93	
City Washington State DC Zip Code 20006-5416	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C C00104109	Name of Employer Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 35 OF 94
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PIEDMONT NATURAL GAS PAC

Mailing Address PO BOX 33068

City State Zip Code
CHARLOTTE NC 28233

FEC ID number of contributing federal political committee. **C** C00144824

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 10 / 2014

Transaction ID : A28FAE40612B0495BBD9

Amount of Each Receipt this Period
1000.00

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

Mailing Address 403 E Capitol St SE

City State Zip Code
Washington DC 20003-3810

FEC ID number of contributing federal political committee. **C** C00034132

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 01 / 2014

Transaction ID : A1E470AC080D54354929

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN CONCRETE PIPE ASSOCIATION PAC

Mailing Address 1303 W WALNUT HILL LANE SUITE 305

City State Zip Code
IRVING TX 75038

FEC ID number of contributing federal political committee. **C** C00425686

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : A6CBF3782EBC14FF9976

Amount of Each Receipt this Period
500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 94
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

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

Mailing Address 1 Fountain Sq

City State Zip Code
Chattanooga TN 37402-1306

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2014

Transaction ID : A6A0ECCF871F245BCAD7

Amount of Each Receipt this Period
1000.00

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

Mailing Address P.O. Box 22930

City State Zip Code
San Diego CA 92192-2930

FEC ID number of contributing federal political committee. **C** C00215285

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2014

Transaction ID : AC90166F4FF6741D48FC

Amount of Each Receipt this Period
2500.00

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).....

3500.00

84854.35

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Conservative Victory Fund		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address P.O. Box 15245		Amount of Each Disbursement this Period 354.35 Transaction ID : BC7D3B6C6678C4150A97
City Washington	State DC	
Zip Code 20003-0245	Purpose of Disbursement In-kind:Printing/Fax	Category/ Type
Candidate Name Conservative Victory Fund	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Alex Eline		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 7901 Beach Dr.		Amount of Each Disbursement this Period 197.96 Transaction ID : BFAFABF094C94455DAA0
City Myrtle Beach	State SC	
Zip Code 29572-4337	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Alex Eline		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 7901 Beach Dr.		Amount of Each Disbursement this Period 197.94 Transaction ID : BC2AC1B3151794565A63
City Myrtle Beach	State SC	
Zip Code 29572-4337	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	750.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. AccuChecks		M M / D D / Y Y Y Y 07 / 03 / 2014	
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period	
City	State	Zip Code	Transaction ID : BA9AB4596DADE462FBD5
Myrtle Beach	SC	29577-3103	29.04
Purpose of Disbursement Accounting		Category/ Type	
Candidate Name			
Office Sought:	Disbursement For: 2014		
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		
<input type="checkbox"/> President			
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. AccuChecks		M M / D D / Y Y Y Y 07 / 03 / 2014	
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period	
City	State	Zip Code	Transaction ID : B33C1ED52C33A4E03B1B
Myrtle Beach	SC	29577-3103	59.35
Purpose of Disbursement Payroll Taxes		Category/ Type	
Candidate Name			
Office Sought:	Disbursement For: 2014		
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		
<input type="checkbox"/> President			
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
c. Thrifty Car Rental		M M / D D / Y Y Y Y 07 / 06 / 2014	
Mailing Address 5310 East 31st St		Amount of Each Disbursement this Period	
City	State	Zip Code	Transaction ID : B63D5C199DDFA4BECB1F
Tulsa	OK	74135-5073	328.76
Purpose of Disbursement Travel		Category/ Type	
Candidate Name			
Office Sought:	Disbursement For: 2014		
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		
<input type="checkbox"/> President			
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	417.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fed Ex		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 1170 Seaboard St		Amount of Each Disbursement this Period 15.09 Transaction ID : BFF360C2F5A3A47668C0
City Myrtle Beach	State SC Zip Code 29577-6517	
Purpose of Disbursement Shipping	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Fed Ex		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 1170 Seaboard St		Amount of Each Disbursement this Period 30.58 Transaction ID : B056900B6CFB44BF1ACE
City Myrtle Beach	State SC Zip Code 29577-6517	
Purpose of Disbursement Printing	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Gordon Birsch		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address Market Commons		Amount of Each Disbursement this Period 35.00 Transaction ID : BCB231F621D0A46BD87F
City Myrtle Beach	State SC Zip Code 29577	
Purpose of Disbursement Meeting-Meals	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	80.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fed Ex		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 1170 Seaboard St		Amount of Each Disbursement this Period 76.46 Transaction ID : B6E4219C98C064BEF9D1
City Myrtle Beach	State SC Zip Code 29577-6517	
Purpose of Disbursement Shipping	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Transfirst		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 12202 Airport Way Ste 100		Amount of Each Disbursement this Period 417.05 Transaction ID : B9EE7227394D64A0BA25
City Broomfield	State CO Zip Code 80021-2596	
Purpose of Disbursement Merchant Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Rayburn Cafeteria		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address Rayburn Building		Amount of Each Disbursement this Period 86.25 Transaction ID : B31ECE067F85F4FB19B4
City Washington	State DC Zip Code 20515-0001	
Purpose of Disbursement Meeting-Meals	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	579.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. Fed Ex		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		14		2014
M M	/	D D	/	Y Y Y Y								
07		14		2014								
Mailing Address 1170 Seaboard St		Amount of Each Disbursement this Period										
City	State Zip Code											
Myrtle Beach	SC 29577-6517	<table border="1"> <tr> <td>721.22</td> </tr> </table>	721.22									
721.22												
Purpose of Disbursement	Category/Type	Transaction ID : BCD380F67BA574DB18FC										
Shipping												
Candidate Name												
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. UsAirways		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		14		2014
M M	/	D D	/	Y Y Y Y								
07		14		2014								
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period										
City	State Zip Code											
Phoenix	AZ 85034-3802	<table border="1"> <tr> <td>539.50</td> </tr> </table>	539.50									
539.50												
Purpose of Disbursement	Category/Type	Transaction ID : B7ED8143BB8034AE091F										
Travel												
Candidate Name												
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. UsAirways		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	07		14		2014
M M	/	D D	/	Y Y Y Y								
07		14		2014								
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period										
City	State Zip Code											
Phoenix	AZ 85034-3802	<table border="1"> <tr> <td>539.50</td> </tr> </table>	539.50									
539.50												
Purpose of Disbursement	Category/Type	Transaction ID : BB91626352D744B31B61										
Travel												
Candidate Name												
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>1800.22</td> </tr> </table>	1800.22
1800.22		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Exxon Mobile		Date of Disbursement MM / DD / YYYY 07 / 14 / 2014
Mailing Address 24264 Highway 17		Amount of Each Disbursement this Period 61.08 Transaction ID : BC40D4975BDE84F15BBC
City Garden City State SC Zip Code 29576	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Prime Rib		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 2020 K Street NW		Amount of Each Disbursement this Period 570.58 Transaction ID : B8340B3965610442D92D
City Washington State DC Zip Code 20006-1817	Purpose of Disbursement Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Lee Ann Rice		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 3771 Rice Hope Ct		Amount of Each Disbursement this Period 125.92 Transaction ID : BFAC5443C0EF34CB0A1A
City Myrtle Beach State SC Zip Code 29577-5950	Purpose of Disbursement Salary	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	757.58
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 892.72 Transaction ID : BD5857506EA9C4524A04
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 1003.75 Transaction ID : B8110AC42DE9C4C3D997
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Event Catering	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Vertical Response		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 50 Beale St., 10th Floor		Amount of Each Disbursement this Period 150.00 Transaction ID : BECC7047687E24A6CA00
City San Francisco State CA Zip Code 94105-1813	Purpose of Disbursement Web Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2046.47
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 10.78 Transaction ID : B2E98810E40704F9495A
City San Francisco	State CA Zip Code 94105-1611	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AccuChecks		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 134.87 Transaction ID : B42215823752B449CBD0
City Myrtle Beach	State SC Zip Code 29577-3103	
Purpose of Disbursement Payroll Taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. AccuChecks		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 36.51 Transaction ID : BF95B8C5803154B5BA2B
City Myrtle Beach	State SC Zip Code 29577-3103	
Purpose of Disbursement Accounting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	182.16
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 45 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Fed Ex		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		21		2014
M M	/	D D	/	Y Y Y Y									
07		21		2014									
Mailing Address 1170 Seaboard St		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Myrtle Beach</td> <td>SC</td> <td>29577-6517</td> </tr> </table>		City	State	Zip Code	Myrtle Beach	SC	29577-6517	<table border="1"> <tr> <td>21.25</td> </tr> </table>		21.25			
City	State	Zip Code											
Myrtle Beach	SC	29577-6517											
21.25													
Purpose of Disbursement Shipping		Transaction ID : B774B5BEA65744FA89BD											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Kangaroo Express		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		21		2014
M M	/	D D	/	Y Y Y Y									
07		21		2014									
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Myrtle Beach</td> <td>SC</td> <td>29577-5705</td> </tr> </table>		City	State	Zip Code	Myrtle Beach	SC	29577-5705	<table border="1"> <tr> <td>37.49</td> </tr> </table>		37.49			
City	State	Zip Code											
Myrtle Beach	SC	29577-5705											
37.49													
Purpose of Disbursement Travel		Transaction ID : BEA82F348941F421391B											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. Victors Bistro & Garden Room		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		21		2014
M M	/	D D	/	Y Y Y Y									
07		21		2014									
Mailing Address 1247 S Irby St		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Florence</td> <td>SC</td> <td>29505-2754</td> </tr> </table>		City	State	Zip Code	Florence	SC	29505-2754	<table border="1"> <tr> <td>187.90</td> </tr> </table>		187.90			
City	State	Zip Code											
Florence	SC	29505-2754											
187.90													
Purpose of Disbursement Meeting-Meals		Transaction ID : B9D24E29131424CD1A61											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	246.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Exxon Mobile		Date of Disbursement MM / DD / YYYY 07 / 21 / 2014
Mailing Address 24264 Highway 17		Amount of Each Disbursement this Period 39.77
City Garden City	State SC	
Zip Code 29576	Purpose of Disbursement Travel	Transaction ID : BD90A70C758BF42DF806
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hawk N Dove		Date of Disbursement MM / DD / YYYY 07 / 21 / 2014
Mailing Address 329 Pennsylvania Ave SE		Amount of Each Disbursement this Period 476.00
City Washington	State DC	
Zip Code 20003-1148	Purpose of Disbursement Event Catering	Transaction ID : B89ACFC93206249E59EC
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Hertz		Date of Disbursement MM / DD / YYYY 07 / 22 / 2014
Mailing Address Reagan National Airport		Amount of Each Disbursement this Period 311.94
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Travel	Transaction ID : B325B1A581BB546D09A2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	827.71
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 47 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 7.14 Transaction ID : BCCB252802D2F4F148F7
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DC Taxis		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 1636 Bladensburg Rd NE		Amount of Each Disbursement this Period 9.63 Transaction ID : B47B863A2866F4AAD807
City Washington State DC Zip Code 20002-1804	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 7.48 Transaction ID : B06A22D11B5CB4A8BA6C
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	24.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address Mb Main PO		Amount of Each Disbursement this Period 19.60 Transaction ID : B83CCDC0373994D6B86A
City Myrtle Beach	State SC	
Zip Code 29577-0000	Purpose of Disbursement Shipping	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Harrys Reserve		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 909 New Jersey Ave, SE		Amount of Each Disbursement this Period 92.38 Transaction ID : B1FAAE81C1416483DB92
City Washington	State DC	
Zip Code 20003-3382	Purpose of Disbursement Meeting-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CVS		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 1303 38th Ave., N.		Amount of Each Disbursement this Period 5.99 Transaction ID : B5578C03DE86848AD86C
City Myrtle Beach	State SC	
Zip Code 29577-1315	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	117.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DC Taxis		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 1636 Bladensburg Rd NE		Amount of Each Disbursement this Period 11.44 Transaction ID : B8B7403D624B943AA899
City Washington	State DC Zip Code 20002-1804	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Capital Grill		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 601 Pennsylvania Ave SE		Amount of Each Disbursement this Period 442.40 Transaction ID : BB1CF3C8314F44EAD8FD
City Washington	State DC Zip Code 20003-4303	
Purpose of Disbursement Event Catering	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address Mb Main PO		Amount of Each Disbursement this Period 39.20 Transaction ID : B8955C559755F4D22AAB
City Myrtle Beach	State SC Zip Code 29577-0000	
Purpose of Disbursement Shipping	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	493.04
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bullfeathers		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 410 First St., SE		Amount of Each Disbursement this Period 184.34 Transaction ID : B554084D698D14257B20
City Washington State DC Zip Code 20003-1819	Purpose of Disbursement Meeting-Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Horry County Parks & Recreation		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 2830 Oak Street		Amount of Each Disbursement this Period 500.00 Transaction ID : B8D71FC6150CE4CEE8D8
City Conway State SC Zip Code 29526-4560	Purpose of Disbursement Meeting-Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Rayburn Cafeteria		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address Rayburn Building		Amount of Each Disbursement this Period 65.75 Transaction ID : B4E1CB2F196604864A77
City Washington State DC Zip Code 20515-0001	Purpose of Disbursement Meeting-Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	750.09
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fed Ex		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 1170 Seaboard St		Amount of Each Disbursement this Period 11.39
City Myrtle Beach	State SC	
Zip Code 29577-6517	Purpose of Disbursement Shipping	Transaction ID : BC31EF23F7333444E9F7
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 24264 Highway 17		Amount of Each Disbursement this Period 54.47
City Garden City	State SC	
Zip Code 29576	Purpose of Disbursement Travel	Transaction ID : B1ABA7AD2B3E84DC8A8A
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Rayburn Cafeteria		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address Rayburn Building		Amount of Each Disbursement this Period 35.65
City Washington	State DC	
Zip Code 20515-0001	Purpose of Disbursement Meeting-Meals	Transaction ID : BAAD9B034D4E34D2ABD0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	101.51
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 52 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 99.99 Transaction ID : B51F16E4BE7774DECB20
City Myrtle Beach	State SC	
Zip Code 29577-5705	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 24264 Highway 17		Amount of Each Disbursement this Period 99.99 Transaction ID : BAAD30F14FB7846A4931
City Garden City	State SC	
Zip Code 29576	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 99.99 Transaction ID : B1805BECE5FB94F98A9D
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	99.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 94		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Alex Eline		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 7901 Beach Dr.		Amount of Each Disbursement this Period 197.96 Transaction ID : B9BA86DA03502446DBFC
City Myrtle Beach	State SC	
Zip Code 29572-4337	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Uber Technologies		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 10.96 Transaction ID : B3407FB1A3455433980A
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. AccuChecks		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 59.35 Transaction ID : B13FE3746ECE84F97A0E
City Myrtle Beach	State SC	
Zip Code 29577-3103	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	268.27
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. AccuChecks		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		06		2014
M M	/	D D	/	Y Y Y Y								
08		06		2014								
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period										
City	State Zip Code											
Myrtle Beach	SC 29577-3103	<table border="1"> <tr> <td>29.04</td> </tr> </table>	29.04									
29.04												
Purpose of Disbursement	Category/Type	Transaction ID : B1FBD433A02C24CE6BB6										
Accounting												
Candidate Name												
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. Kangaroo Express		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		07		2014
M M	/	D D	/	Y Y Y Y								
08		07		2014								
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period										
City	State Zip Code											
Myrtle Beach	SC 29577-5705	<table border="1"> <tr> <td>57.37</td> </tr> </table>	57.37									
57.37												
Purpose of Disbursement	Category/Type	Transaction ID : B0F6385FDBAEA4ED6A3E										
Travel												
Candidate Name												
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. Fed Ex		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>07</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	08		07		2014
M M	/	D D	/	Y Y Y Y								
08		07		2014								
Mailing Address 1170 Seaboard St		Amount of Each Disbursement this Period										
City	State Zip Code											
Myrtle Beach	SC 29577-6517	<table border="1"> <tr> <td>26.15</td> </tr> </table>	26.15									
26.15												
Purpose of Disbursement	Category/Type	Transaction ID : BD4DBE5F8171649E8981										
Shipping												
Candidate Name												
Office Sought:	Disbursement For: 2014											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>112.56</td> </tr> </table>	112.56
112.56		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bi-Lo		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address Store #116		Amount of Each Disbursement this Period 209.41 Transaction ID : B864D5725CAE04D198C5
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 08 / 08 / 2014
Mailing Address Store #338		Amount of Each Disbursement this Period 1541.82 Transaction ID : B872EF26E090C40F6ABE
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement Equipment Purchase	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. Transfirst		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 12202 Airport Way Ste 100		Amount of Each Disbursement this Period 73.30 Transaction ID : BABC1774290E24DA5B38
City Broomfield	State CO	
Zip Code 80021-2596	Purpose of Disbursement Merchant Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1824.53
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address Mb Main PO		Amount of Each Disbursement this Period 146.00 Transaction ID : BDC24D5EEB01C42889B9
City Myrtle Beach	State SC	
Zip Code 29577-0000	Purpose of Disbursement PO Box Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 24264 Highway 17		Amount of Each Disbursement this Period 51.71 Transaction ID : BCFF1C1A7C53745E4BAD
City Garden City	State SC	
Zip Code 29576	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Dunes Club		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 9000 N Ocean Blvd		Amount of Each Disbursement this Period 14664.86 Transaction ID : B66B15A4D396449C3938
City Myrtle Beach	State SC	
Zip Code 29572-4424	Purpose of Disbursement Event Catering/Site Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	14862.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Pottery Barn		Date of Disbursement MM / DD / YYYY 08 / 11 / 2014
Mailing Address 700 Haywood Road		Amount of Each Disbursement this Period 250.56 Transaction ID : B6E7C5CE67C70426D87D
City Greenville	State SC Zip Code 29607-2755	
Purpose of Disbursement Office Furniture	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Gordon Birsch		Date of Disbursement MM / DD / YYYY 08 / 11 / 2014
Mailing Address Market Commons		Amount of Each Disbursement this Period 39.17 Transaction ID : B88096048F8ED4F61AF1
City Myrtle Beach	State SC Zip Code 29577	
Purpose of Disbursement Meeting-Meals	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Flowers By Richard		Date of Disbursement MM / DD / YYYY 08 / 12 / 2014
Mailing Address 2817 N Oak Street		Amount of Each Disbursement this Period 58.50 Transaction ID : B097F51180F7B4003855
City Myrtle Beach	State SC Zip Code 29577-3133	
Purpose of Disbursement Flowers	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	348.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 94			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Flowers By Richard		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 2817 N Oak Street		Amount of Each Disbursement this Period 26.50 Transaction ID : B35FAB43E010149769BB
City Myrtle Beach	State SC	
Zip Code 29577-3133	Purpose of Disbursement Flowers	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 5.16 Transaction ID : BF55508A1C4744F6BAA
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Winfrey & Company		Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014
Mailing Address 228 S Washington St Ste B7		Amount of Each Disbursement this Period 13700.20 Transaction ID : B7D88B6423EE94E6ABC6
City Alexandria	State VA	
Zip Code 22314-5408	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	13731.86
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Vertical Response		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 50 Beale St., 10th Floor		Amount of Each Disbursement this Period 150.00 Transaction ID : B2E2CDA2C9978452A983
City San Francisco State CA Zip Code 94105-1813	Purpose of Disbursement Web Services	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <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		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 2301 N Kings Hwy		Amount of Each Disbursement this Period 84.00 Transaction ID : BA363BC85486C45AD94E
City Myrtle Beach State SC Zip Code 29577-3040	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: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 18.54 Transaction ID : BBA3CC0F3484A4611AEB
City San Francisco State CA Zip Code 94105-1611	Purpose of Disbursement Travel	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	252.54
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Alex Eline		Date of Disbursement MM / DD / YYYY 08 / 19 / 2014
Mailing Address 7901 Beach Dr.		Amount of Each Disbursement this Period 197.95 Transaction ID : BB356CB12F7AC42E59F0
City Myrtle Beach	State SC	
Zip Code 29572-4337	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. United States Post Office		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address Mb Main PO		Amount of Each Disbursement this Period 147.00 Transaction ID : B6DFD1F7288F643B1BCE
City Myrtle Beach	State SC	
Zip Code 29577-0000	Purpose of Disbursement Shipping	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) c. Tortilla Coast		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address 400 First St., SE		Amount of Each Disbursement this Period 19.10 Transaction ID : B4CFE6710FA5847BDAF4
City Washington	State DC	
Zip Code 20003-1826	Purpose of Disbursement Meeting-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	364.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. AccuChecks		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>20</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		20		2014
M M	/	D D	/	Y Y Y Y									
08		20		2014									
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Myrtle Beach</td> <td>SC</td> <td>29577-3103</td> </tr> </table>		City	State	Zip Code	Myrtle Beach	SC	29577-3103	<table border="1"> <tr> <td>29.04</td> </tr> </table>		29.04			
City	State	Zip Code											
Myrtle Beach	SC	29577-3103											
29.04													
Purpose of Disbursement Accounting		Transaction ID : B7DA5168E1F7A4505B73											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Capitol Hill Club		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>20</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		20		2014
M M	/	D D	/	Y Y Y Y									
08		20		2014									
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20003-1801</td> </tr> </table>		City	State	Zip Code	Washington	DC	20003-1801	<table border="1"> <tr> <td>369.75</td> </tr> </table>		369.75			
City	State	Zip Code											
Washington	DC	20003-1801											
369.75													
Purpose of Disbursement Event Catering		Transaction ID : B8084DC20753F45E68CD											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. AccuChecks		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>20</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		20		2014
M M	/	D D	/	Y Y Y Y									
08		20		2014									
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Myrtle Beach</td> <td>SC</td> <td>29577-3103</td> </tr> </table>		City	State	Zip Code	Myrtle Beach	SC	29577-3103	<table border="1"> <tr> <td>59.36</td> </tr> </table>		59.36			
City	State	Zip Code											
Myrtle Beach	SC	29577-3103											
59.36													
Purpose of Disbursement Payroll Taxes		Transaction ID : B5DFC7AD43A2F4569A4F											
Candidate Name		Category/Type											
Office Sought:	Disbursement For: 2014												
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	458.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Exxon Mobile		Date of Disbursement MM / DD / YYYY 08 / 20 / 2014
Mailing Address 24264 Highway 17		Amount of Each Disbursement this Period 47.08
City Garden City	State SC	
Zip Code 29576	Purpose of Disbursement Travel	Transaction ID : BF4250E9EE931401891F
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. UsAirways		Date of Disbursement MM / DD / YYYY 08 / 25 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 529.20
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Travel	Transaction ID : B64A623212AB04929947
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. UsAirways		Date of Disbursement MM / DD / YYYY 08 / 26 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 272.20
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Travel	Transaction ID : B40E42B4585A74872BA0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	848.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 458.74 Transaction ID : B49C763ACEE394478A20
City Washington	State DC Zip Code 20003-1801	
Purpose of Disbursement Event Catering	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Edible Arrangements		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 7827 N Kings Hwy		Amount of Each Disbursement this Period 82.89 Transaction ID : B33481F79DDCF4EE8B05
City Myrtle Beach	State SC Zip Code 29572-3054	
Purpose of Disbursement Event Catering	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. UsAirways		Date of Disbursement M M / D D / Y Y Y Y 08 / 27 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 330.10 Transaction ID : BCA481E15AA4E43909DD
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement Travel	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	871.73
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Croissants			Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 3751 Robert M Grissom Pkwy			Amount of Each Disbursement this Period 40.90 Transaction ID : BA758D46792AE407AAEB
City Myrtle Beach	State SC	Zip Code 29577-6412	
Purpose of Disbursement Meeting-Meals	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. Croissants			Date of Disbursement MM / DD / YYYY 08 / 28 / 2014
Mailing Address 3751 Robert M Grissom Pkwy			Amount of Each Disbursement this Period 106.10 Transaction ID : BE7C87CFF97D6484F95C
City Myrtle Beach	State SC	Zip Code 29577-6412	
Purpose of Disbursement Meeting-Meals	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Sanphan Thai Cuisine			Date of Disbursement MM / DD / YYYY 09 / 01 / 2014
Mailing Address 653 Pennsylvania Ave., NW			Amount of Each Disbursement this Period 79.61 Transaction ID : B9DA6B8EDB0A3431EA7E
City Washington	State DC	Zip Code 20006	
Purpose of Disbursement Meeting-Meals	Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	226.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UsAirways		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 15.00 Transaction ID : B3BA3D190A6BB413DAD7
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. UsAirways		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 29.00 Transaction ID : B332F5DA1F5334FA8AAF
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. PNC Bank		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address One PNC Plaza		Amount of Each Disbursement this Period 165.00 Transaction ID : B65D4F8191A0343818BD
City Pittsburgh	State PA Zip Code 15222	
Purpose of Disbursement Merchant Fees	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	209.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 94		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UsAirways		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 265.20 Transaction ID : B426275283E274548A54
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. UsAirways		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 22.00 Transaction ID : BC74B6678FD8242C292F
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. UsAirways		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 339.10 Transaction ID : B03262650F7DB4E439AB
City Phoenix	State AZ Zip Code 85034-3802	
Purpose of Disbursement Travel	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	626.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AccuChecks		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 38.04
City Myrtle Beach	State SC	
Zip Code 29577-3103	Purpose of Disbursement Accounting	Transaction ID : BACA7776C93F34382BF1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Alex Eline		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 7901 Beach Dr.		Amount of Each Disbursement this Period 197.95
City Myrtle Beach	State SC	
Zip Code 29572-4337	Purpose of Disbursement Salary	Transaction ID : BDC7070F049824DF8BC8
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. AccuChecks		Date of Disbursement M M / D D / Y Y Y Y 09 / 05 / 2014
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 1720.39
City Myrtle Beach	State SC	
Zip Code 29577-3103	Purpose of Disbursement Payroll Taxes	Transaction ID : B1D16FCF1AED5432A84A
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1956.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Flowers By Richard		Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2014
Mailing Address 2817 N Oak Street		Amount of Each Disbursement this Period 64.80 Transaction ID : B759171482C4F42CC934
City Myrtle Beach	State SC Zip Code 29577-3133	
Purpose of Disbursement Flowers	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Bi-Lo		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014
Mailing Address Store #116		Amount of Each Disbursement this Period 49.89 Transaction ID : BD2D6C44491AC41DEA73
City Myrtle Beach	State SC Zip Code 29577	
Purpose of Disbursement Event Catering	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Vertical Response		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 50 Beale St., 10th Floor		Amount of Each Disbursement this Period 150.00 Transaction ID : B3DC4FCE426E94B41B08
City San Francisco	State CA Zip Code 94105-1813	
Purpose of Disbursement Web Services	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	264.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. James Lucas Rice			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 5100 N Ocean Blvd			Amount of Each Disbursement this Period 1139.70	
City Myrtle Beach	State SC	Zip Code 29577-2541	Transaction ID : B37967E2E550E48E4BC2	
Purpose of Disbursement Salary		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) B. James Lucas Rice			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 5100 N Ocean Blvd			Amount of Each Disbursement this Period 2074.53	
City Myrtle Beach	State SC	Zip Code 29577-2541	Transaction ID : B83E98683AB8845CC9AA	
Purpose of Disbursement Salary		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) c. Transfirst			Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014	
Mailing Address 12202 Airport Way Ste 100			Amount of Each Disbursement this Period 9.50	
City Broomfield	State CO	Zip Code 80021-2596	Transaction ID : B0A8C0B0C0ECE4AA1A74	
Purpose of Disbursement Merchant Fees		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3223.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United States Post Office		Date of Disbursement
Mailing Address Mb Main PO		M M / D D / Y Y Y Y 09 / 09 / 2014
City	State	Zip Code
Myrtle Beach	SC	29577-0000
Purpose of Disbursement Shipping		Amount of Each Disbursement this Period
Candidate Name	Category/ Type	44.10
Office Sought:	Disbursement For: 2014	Transaction ID : B3293500DE5D047FEA59
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<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 Post Office		Date of Disbursement
Mailing Address Mb Main PO		M M / D D / Y Y Y Y 09 / 09 / 2014
City	State	Zip Code
Myrtle Beach	SC	29577-0000
Purpose of Disbursement Shipping		Amount of Each Disbursement this Period
Candidate Name	Category/ Type	44.10
Office Sought:	Disbursement For: 2014	Transaction ID : B83F966753A214591BBB
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Kangaroo Express		Date of Disbursement
Mailing Address 3791 Oleander Dr		M M / D D / Y Y Y Y 09 / 15 / 2014
City	State	Zip Code
Myrtle Beach	SC	29577-5705
Purpose of Disbursement Travel		Amount of Each Disbursement this Period
Candidate Name	Category/ Type	29.16
Office Sought:	Disbursement For: 2014	Transaction ID : B90CDE42CFA6A49AFBC3
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	117.36
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Dunes Club		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 9000 N Ocean Blvd		Amount of Each Disbursement this Period 239.68 Transaction ID : B4206F309F4BD4F1ABD6
City Myrtle Beach	State SC Zip Code 29572-4424	
Purpose of Disbursement Event Catering/Site Rental	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 2301 N Kings Hwy		Amount of Each Disbursement this Period 86.71 Transaction ID : BCA9D242F70F443E1BDE
City Myrtle Beach	State SC Zip Code 29577-3040	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 2301 N Kings Hwy		Amount of Each Disbursement this Period 119.63 Transaction ID : B9B8239E841154BE1ADA
City Myrtle Beach	State SC Zip Code 29577-3040	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	446.02
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address Mb Main PO		Amount of Each Disbursement this Period 5.95 Transaction ID : B626BC7619279407A80C
City Myrtle Beach	State SC Zip Code 29577-0000	
Purpose of Disbursement Shipping	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bagsandbowsonline.com		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 236 Spring St., NW		Amount of Each Disbursement this Period 202.85 Transaction ID : B32961BA6E10F48468A7
City Atlanta	State GA Zip Code 30303-1004	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Carolina Roadhouse		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 4617 N. Kings Hwy		Amount of Each Disbursement this Period 74.21 Transaction ID : B6613ABD16376451587A
City Myrtle Beach	State SC Zip Code 29577-2770	
Purpose of Disbursement Meeting-Meals	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	283.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 2301 N Kings Hwy		Amount of Each Disbursement this Period 88.42
City Myrtle Beach	State SC	
Zip Code 29577-3040	Purpose of Disbursement Office Supplies	Transaction ID : BD6CB118149444EEC82D
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Thread Logic		Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2014
Mailing Address 18190 Dairy Ln Ste 204		Amount of Each Disbursement this Period 1661.60
City Jordan	State MN	
Zip Code 55352-4560	Purpose of Disbursement Advertising:Tshirt/Bumper Stickers	Transaction ID : BBB6C7D216AA547B48E4
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 51.86
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Meeting-Meals	Transaction ID : BF2268922C5154426A71
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1801.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 94		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Pink Cabana		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 5900 N. King's Hwy		Amount of Each Disbursement this Period 46.00
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement Meeting-Meals	Transaction ID : B72B23F56B6924143A48
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 10.00
City San Francisco	State CA	
Zip Code 94105-1611	Purpose of Disbursement Travel	Transaction ID : B9691AE55486946FD916
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 337.74
City Washington	State DC	
Zip Code 20003-1801	Purpose of Disbursement Event Catering	Transaction ID : BB390D109827A43A1988
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	393.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AccuChecks		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 31.55 Transaction ID : BC9CB00EB97B442D88C2
City Myrtle Beach	State SC	
Zip Code 29577-3103	Purpose of Disbursement Accounting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Aristotle		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2550.00 Transaction ID : B34FFB777EA30413C860
City Washington	State DC	
Zip Code 20003-1164	Purpose of Disbursement Software	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Exxon Mobile		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 24264 Highway 17		Amount of Each Disbursement this Period 63.34 Transaction ID : B69A7E2FE23C84C60A20
City Garden City	State SC	
Zip Code 29576	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2644.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AccuChecks		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 605 19th Ave N		Amount of Each Disbursement this Period 544.74 Transaction ID : B9A9C460E879841E68AF
City Myrtle Beach	State SC Zip Code 29577-3103	
Purpose of Disbursement Payroll Taxes	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Rayburn Cafeteria		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address Rayburn Building		Amount of Each Disbursement this Period 192.45 Transaction ID : BFAA352CDBB4A4FE58D8
City Washington	State DC Zip Code 20515-0001	
Purpose of Disbursement Meeting-Meals	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Uber Technologies		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 182 Howard St. #8		Amount of Each Disbursement this Period 8.74 Transaction ID : BD1B79E42A8CB4EF0923
City San Francisco	State CA Zip Code 94105-1611	
Purpose of Disbursement Travel	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	745.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Alex Eline		Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2014
Mailing Address 7901 Beach Dr.		Amount of Each Disbursement this Period 197.96 Transaction ID : BD1248C1F7BE54385B20
City Myrtle Beach	State SC	
Purpose of Disbursement Salary		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 52.05 Transaction ID : B647A277E8B8A4D9DB98
City Myrtle Beach	State SC	
Purpose of Disbursement Travel		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Facebook		Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2014
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 25.12 Transaction ID : B57591BAACC2E45A9967
City Menlo Park	State CA	
Purpose of Disbursement Telemarketing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	275.13
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 2301 N Kings Hwy		Amount of Each Disbursement this Period 11.86 Transaction ID : B201F4A1624984951935
City Myrtle Beach	State SC Zip Code 29577-3040	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Office Depot		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 2301 N Kings Hwy		Amount of Each Disbursement this Period 92.86 Transaction ID : B7C4F6C4CECF1486FA9B
City Myrtle Beach	State SC Zip Code 29577-3040	
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Time Warner Cable		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 1901 N Oak Street		Amount of Each Disbursement this Period 442.53 Transaction ID : BBC2D180E7AF646DC825
City Myrtle Beach	State SC Zip Code 29577-3142	
Purpose of Disbursement Utilities	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	547.25
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 79 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address Mb Main PO		Amount of Each Disbursement this Period 21.00 Transaction ID : B48F69E0CD4E54425A4F
City Myrtle Beach	State SC Zip Code 29577-0000	
Purpose of Disbursement Shipping	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United States Post Office		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address Mb Main PO		Amount of Each Disbursement this Period 17.90 Transaction ID : B7DC267675BFB4B6E95B
City Myrtle Beach	State SC Zip Code 29577-0000	
Purpose of Disbursement Shipping	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Discount Mugs		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 12610 NW 115th Ave.		Amount of Each Disbursement this Period 699.93 Transaction ID : BB128246E60534456B4C
City Medley	State FL Zip Code 33178-3178	
Purpose of Disbursement Advertising:Tshirt/Bumper Stickers	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	738.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 94			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Deb Dawson		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 917 Castlewood Dr.		Amount of Each Disbursement this Period 250.00 Transaction ID : BDC7E8268233E4333861
City Conway	State SC	
Zip Code 29526-9185	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. James Lucas Rice		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 5100 N Ocean Blvd		Amount of Each Disbursement this Period 1139.70 Transaction ID : BD86556C4FCBD402A94B
City Myrtle Beach	State SC	
Zip Code 29577-2541	Purpose of Disbursement Salary	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. National Car Rental		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 6929 N. Lakewood Ave. Ste. 100		Amount of Each Disbursement this Period 252.79 Transaction ID : BE46757A9B1834FF8BE8
City Tulsa	State OK	
Zip Code 74117-1824	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1642.49
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 81 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Facebook		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address 1601 Willow Rd		Amount of Each Disbursement this Period 50.93 Transaction ID : BCA7E104FB8B14243946
City Menlo Park	State CA	
Zip Code 94025-1452	Purpose of Disbursement Telemarketing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Lowes Foods		Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2014
Mailing Address Store #234 Grand Dunes		Amount of Each Disbursement this Period 260.88 Transaction ID : BCEFEDA7AC7484CC7B84
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement Meeting-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Winfrey & Company		Date of Disbursement M M / D D / Y Y Y Y 09 / 24 / 2014
Mailing Address 228 S Washington St Ste B7		Amount of Each Disbursement this Period 1979.45 Transaction ID : B30EE9925944541B3997
City Alexandria	State VA	
Zip Code 22314-5408	Purpose of Disbursement Fundraising Consulting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2291.26
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 82 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bi-Lo		Date of Disbursement
Mailing Address Store #116		M M / D D / Y Y Y Y 09 / 24 / 2014
City	State	Zip Code
Myrtle Beach	SC	29577
Purpose of Disbursement Event Catering		Amount of Each Disbursement this Period 4.74
Candidate Name	Category/ Type	Transaction ID : B5F42BCCF7FDE456BBC2
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Starboard Communications		Date of Disbursement
Mailing Address 1043 Barr Rd		M M / D D / Y Y Y Y 09 / 25 / 2014
City	State	Zip Code
Lexington	SC	29072-8648
Purpose of Disbursement Polling		Amount of Each Disbursement this Period 8800.00
Candidate Name	Category/ Type	Transaction ID : B2A3D9E7A0EFB425F95F
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Bi-Lo		Date of Disbursement
Mailing Address Store #116		M M / D D / Y Y Y Y 09 / 25 / 2014
City	State	Zip Code
Myrtle Beach	SC	29577
Purpose of Disbursement Event Catering		Amount of Each Disbursement this Period 32.75
Candidate Name	Category/ Type	Transaction ID : B90CDAE289C674105AFD
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8837.49
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 83 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bi-Lo		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address Store #116		Amount of Each Disbursement this Period 364.58 Transaction ID : B2F52C3612EE1406B967
City Myrtle Beach	State SC	
Zip Code 29577	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. GS Beverage Co.		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 2850 North Kings Hwy		Amount of Each Disbursement this Period 245.03 Transaction ID : B9E6483CCCA8F44629EE
City Myrtle Beach	State SC	
Zip Code 29577-3014	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Victors Bistro & Garden Room		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 1247 S Irby St		Amount of Each Disbursement this Period 34.95 Transaction ID : B1B2A33BBEBAF4DC6AB7
City Florence	State SC	
Zip Code 29505-2754	Purpose of Disbursement Meeting-Meals	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	644.56
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 84 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 2.38 Transaction ID : B5ED43297A1CB4E7A9C9
City Myrtle Beach	State SC	
Zip Code 29577-5705	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Tervis Tumbler Corp.		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 201 Triple Diamond Blvd		Amount of Each Disbursement this Period 5712.23 Transaction ID : B49F69918FD564545B06
City North Venice	State FL	
Zip Code 34275-3634	Purpose of Disbursement Advertising:Tshirt/Bumper Stickers	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Parkway Office Plaza, LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address P.O. Box 70700		Amount of Each Disbursement this Period 1000.00 Transaction ID : B93417628E8F7440183D
City Myrtle Beach	State SC	
Zip Code 29572-0030	Purpose of Disbursement Rent	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	6714.61
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 85 OF 94			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Huckaby Davis Lisker		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address 228 S Washington St Ste 115		Amount of Each Disbursement this Period 3006.25 Transaction ID : B679A36602CF147A89F0
City Alexandria	State VA Zip Code 22314-5404	
Purpose of Disbursement Compliance Consulting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 09 / 25 / 2014
Mailing Address Store #338		Amount of Each Disbursement this Period 534.92 Transaction ID : B2D1B8CEDAC624155BA5
City Myrtle Beach	State SC Zip Code 29577	
Purpose of Disbursement Event Catering	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Costco Wholesale		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address Store #338		Amount of Each Disbursement this Period 39.93 Transaction ID : B13C50E16BE4A4B65A31
City Myrtle Beach	State SC Zip Code 29577	
Purpose of Disbursement Event Catering	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3581.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Strand Metal Service Inc.		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address PO Box 3088		Amount of Each Disbursement this Period 819.51 Transaction ID : BB5F3FF18092C477EBB2
City Myrtle Beach	State SC	
Zip Code 29578-3088	Purpose of Disbursement Signage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Edible Arrangements		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 7827 N Kings Hwy		Amount of Each Disbursement this Period 125.97 Transaction ID : BF1B601CB728A4767B9A
City Myrtle Beach	State SC	
Zip Code 29572-3054	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Kangaroo Express		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period 85.18 Transaction ID : B09C550C310DB4298904
City Myrtle Beach	State SC	
Zip Code 29577-5705	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1030.66
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 87 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Nosh Artful Dining		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 10880 Ocean Hwy		Amount of Each Disbursement this Period 1134.00 Transaction ID : B022D0CD193F84FD2993
City Pawleys Island	State SC	
Zip Code 29585-7987	Purpose of Disbursement Event Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. UsAirways		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 4000 E Sky Harbor Blvd		Amount of Each Disbursement this Period 25.00 Transaction ID : B73F75EF0C83E486EBB8
City Phoenix	State AZ	
Zip Code 85034-3802	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. The Dunes Club		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 9000 N Ocean Blvd		Amount of Each Disbursement this Period 158.63 Transaction ID : B7AFB8ACC719840658C0
City Myrtle Beach	State SC	
Zip Code 29572-4424	Purpose of Disbursement Event Catering/Site Rental	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1317.63
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 88 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CVS		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 1303 38th Ave., N.		Amount of Each Disbursement this Period 11.92 Transaction ID : BFC325CADB4CA46AB9B8
City Myrtle Beach State SC Zip Code 29577-1315	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: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Best Buy		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address Store #855		Amount of Each Disbursement this Period 1184.36 Transaction ID : BE54A26EF149B484AA22
City Myrtle Beach State SC Zip Code 29577	Purpose of Disbursement Equipment Purchase	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Croissants		Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2014
Mailing Address 3751 Robert M Grissom Pkwy		Amount of Each Disbursement this Period 54.35 Transaction ID : BE80AED965F81472E84B
City Myrtle Beach State SC Zip Code 29577-6412	Purpose of Disbursement Meeting-Meals	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1250.63
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 89 OF 94	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. Budget		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		29		2014
M M	/	D D	/	Y Y Y Y									
09		29		2014									
Mailing Address P.O. 699000		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Tulsa</td> <td>OK</td> <td>74169</td> </tr> </table>		City	State	Zip Code	Tulsa	OK	74169	<table border="1"> <tr> <td>629.04</td> </tr> </table>		629.04			
City	State	Zip Code											
Tulsa	OK	74169											
629.04													
Purpose of Disbursement Travel		Transaction ID : BD8336F93DA6F41D395E											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. Kangaroo Express		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		29		2014
M M	/	D D	/	Y Y Y Y									
09		29		2014									
Mailing Address 3791 Oleander Dr		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Myrtle Beach</td> <td>SC</td> <td>29577-5705</td> </tr> </table>		City	State	Zip Code	Myrtle Beach	SC	29577-5705	<table border="1"> <tr> <td>19.23</td> </tr> </table>		19.23			
City	State	Zip Code											
Myrtle Beach	SC	29577-5705											
19.23													
Purpose of Disbursement Travel		Transaction ID : BDA66A56CEDC246EC9E7											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. Piryx		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		30		2014
M M	/	D D	/	Y Y Y Y									
09		30		2014									
Mailing Address 144 2nd St FL 1		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>San Francisco</td> <td>CA</td> <td>94105-3718</td> </tr> </table>		City	State	Zip Code	San Francisco	CA	94105-3718	<table border="1"> <tr> <td>66.61</td> </tr> </table>		66.61			
City	State	Zip Code											
San Francisco	CA	94105-3718											
66.61													
Purpose of Disbursement Online Processing		Transaction ID : B7C4D987475F84DF5A55											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	629.04
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 90 OF 94			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Collectors Cafe		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 7740 N Kings Hwy		Amount of Each Disbursement this Period 734.05
City Myrtle Beach	State SC	
Zip Code 29572-3041	Purpose of Disbursement Event Catering	Transaction ID : BA3766F16EDCD4F239D0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
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).....	734.05
TOTAL This Period (last page this line number only).....	86391.90

**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 91 OF 94			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Carolyn Schaffer		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 5310 S Trimble Rd NE		Amount of Each Disbursement this Period 400.00 Transaction ID : BB60C9F7943994C32A9A
City Atlanta	State GA Zip Code 30342-2175	
Purpose of Disbursement Refund: Refund	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	400.00

**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 92 OF 94			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dillon Kiwanis Club		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address P O Box 1084		Amount of Each Disbursement this Period 250.00 Transaction ID : B2051D5C78B2F4C50B6B
City Dillon	State SC	
Zip Code 29536-1084	Purpose of Disbursement Charitable Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Latta Recreation Center		Date of Disbursement M M / D D / Y Y Y Y 08 / 07 / 2014
Mailing Address 300 E Academy St		Amount of Each Disbursement this Period 250.00 Transaction ID : B52DA75DE20864F51BE9
City Latta	State SC	
Zip Code 29565-1423	Purpose of Disbursement Charitable Contribution	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. National Republican Congressional Cmte.		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 320 First St., SE		Amount of Each Disbursement this Period 30100.00 Transaction ID : BD82E810705FA4AE7AB1
City Washington	State DC	
Zip Code 20003-1838	Purpose of Disbursement Transfer	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	30600.00
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 93 OF 94	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
TOM RICE FOR CONGRESS

Full Name (Last, First, Middle Initial) A. National Republican Congressional Cmte.		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 320 First St., SE		Amount of Each Disbursement this Period 50000.00 Transaction ID : B877BA331E6E64662888
City Washington State DC Zip Code 20003-1838	Purpose of Disbursement Transfer	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Ted Yoho for Congress		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 8209 SW 95th Lane		Amount of Each Disbursement this Period 2000.00 Transaction ID : BB73C0B144B394D919A8
City Gainesville State FL Zip Code 32608	Purpose of Disbursement Political Contribution	
Candidate Name Rep. Theodore S. Yoho	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 03		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
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).....	52000.00
TOTAL This Period (last page this line number only).....	82600.00

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

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

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

City	State	ZIP Code
Myrtle Beach	SC	29577-2541

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

TERMS

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

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

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

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

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