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#### FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Author	orized Com	mittee		Of	fice Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		ample: If typing, er the lines.	type	12FE4M5	
Gloria Bromell Tinuk	ou for Congress					1
	PO Box 1022					
ADDRESS (number and street)						
Check if different						
than previously reported. (ACC)	Conway				SC 29	528
. FEC IDENTIFICATION	I NIIMRER ▼	CITY ▲		S	TATE A	ZIP CODE ▲
			_		_	STATE ▼ DISTRICT
C C00508242	3	. IS THIS REPORT	X NEW (N)	OR	AMENDED (A)	)   SC   07
						_
. TYPE OF REPORT	(Choose One) (b)	12-Day <b>PRE</b>	-Election Report	for the:		
(a) Quarterly Reports:		П	Primary (12P)		General (12G	Runoff (12R)
X April 15 Quarte	rly Report (Q1)	H				
July 15 Quarter	ly Report (Q2)	ш	Convention (12	C)	Special (12S)	
October 15 Qua	arterly Report (Q3)	Election on	M M /	D D /	Y " Y " Y " Y	in the State of
	v End Depart (VE)					State of
January 31 Tea	ir-Eria Report (YE) (c)	30-Day POS	<b>T</b> -Election Repor	t for the:		
_		ш	General (30G)		Runoff (30R)	Special (30S)
Termination Rep	port (TER)	Floation on	M M /	D D /	Y Y Y Y	in the
		Election on				State of
i. Covering Period	M M / D D / Y	у у у 2017	through	м м 03	/ D D / Y	2017
3						
certify that I have examine			owledge and be	lief it is tru	e, correct and c	omplete.
ype or Print Name of Treas	Fowler, Donald, L, surer	,				
	Fowler, Donald, L, ,				M M /	11 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature of Treasurer			[Electronically File	e <u>d]</u> Da	ate	2011
OTE: Submission of false, er	roneous, or incomplete inf	ormation may	subject the persor	n signing th	is Report to the p	penalties of 52 U.S.C. §3010
Office Use						FEC FORM 3
Only						(Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Gloria Bromell Tinubu for Congress

2017 2017 03 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 150.00 1724.86 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 150.00 1724.86 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 150.00 150.00 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 150.00 150.00 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 66.53 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 374642.99 Schedule C and/or Schedule D).....

#### 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 PAGE 3 / 54 FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

#### Gloria Bromell Tinubu for Congress

01 2017 03 31 2017 Report Covering the Period: From: To:

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
1. C	CONTRIBUTIONS (other than loans) FROM:			
(a	a) Individuals/Persons Other Than Political Committees			
	(i) Itemized (use Schedule A)	0.00	1050.00	
	(ii) Unitemized	0.00	524.86	
	(iii) TOTAL of contributions from individuals	0.00	1574.86	
(k	,	0.00	0.00	
(0	c) Other Political Committees (such as PACs)	0.00	0.00	
(c	) TOTAL CONTRIBUTIONS	150.00	150.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	150.00	1724.86	
	RANSFERS FROM OTHER	0.00	0.00	
	UTHORIZED COMMITTEES	0.00	3.00	
	OANS: a) Made or Guaranteed by the			
(c	Candidate	0.00	0.00	
(k	,	0.00	0.00	
(0	c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00	
_	OFFSETS TO OPERATING			
	XPENDITURES Refunds, Rebates, etc.)	0.00	0.00	
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00	
1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	150.00	1724.86	

**DETAILED SUMMARY PAGE** 

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 54

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date		
17.	OPERATING EXPENDITURES	150.00	150.00		
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00		
19.	LOAN REPAYMENTS:				
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00		
	(b) Of All Other Loans	0.00	0.00		
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00		
20	REFUNDS OF CONTRIBUTIONS TO:				
20.	(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
	(b) Political Party Committees	0.00	0.00		
	(c) Other Political Committees (such as PACs)	0.00	0.00		
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00		
21.	OTHER DISBURSEMENTS	0.00	0.00		
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	150.00	150.00		
	III. CASH SU	JMMARY			
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	66.53		
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)				
25.	s. SUBTOTAL (add Line 23 and Line 24)				
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	150.00		
27.	CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)	G PERIOD	66.53		

#### SCHEDULE A (FEC Form 3)

	F	FOR LINE NUMBER: (check only one)							5	OF	54	
Use separate schedule(s) for each category of the	(c											
			11a		11b		11c	X	11c	ł		
Detailed Summary Page			12		13a		13b		14		15	
y not be sold or used by any person for the purpose of soliciting contributions												

ITEMIZED RECEIPTS Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress Full Name (Last, First, Middle Initial) Tinubu, Gloria, Bromell, , Date of Receipt Mailing Address 8 Laurel St 20 City State Zip Code Transaction ID: VNW1EF1F9J1 SC 29526-5154 Conway FEC ID number of contributing Amount of Each Receipt this Period H2SC07108 federal political committee. 150.00 Name of Employer Occupation self employed **Economist** Memo Item Receipt For: 2014 Election Cycle-to-Date **X** General Primary 150.00 Other (specify) ▼ \* In-Kind: campaign finance software Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation Memo Item Receipt For: Election Cycle-to-Date Primary General Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... 150.00 TOTAL This Period (last page this line number only).....

#### SCHEDULE B (FEC Form 3)

**PAGE** 6 54 FOR LINE NUMBER: Use separate schedule(s) (check only one) **x** 17 18 19a 20a 20b 20c

for each category of the ITEMIZED DISBURSEMENTS 19b Detailed Summary Page 21 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress Full Name (Last, First, Middle Initial) Date of Disbursement Tinubu, Gloria, Bromell, , 2017 Mailing Address 8 Laurel St City State Zip Code FEC Identification Number SC Conway 29526-5154 Purpose of Disbursement campaign finance software H2SC07108 Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: 2014 150.00 Office Sought: House Senate Primary ✗ General Transaction ID: VNW1EF1F9J1I Other (specify) President \* In-Kind Received Memo Item SC State: District: Full Name (Last, First, Middle Initial) Date of Disbursement В. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Disbursement For: Office Sought: House Senate Primary General Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) Date of Disbursement C. Mailing Address City State Zip Code **FEC Identification Number** Purpose of Disbursement Candidate Name Amount of Each Disbursement this Period Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 150.00 TOTAL This Period (last page this line number only)..... 150.00

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

FOR LINE NUMBER: (check only one)

PAGE

13a

OF

		100
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	ess	Transaction ID : VNW1ECAQFA9L
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item   Election: 2012
Tinubu, Gloria, Bromell, ,	wilder initial)	Memo Item    Clection: 2012
Mailing Address 8 Laurel St		Other (specify)
City	State	ZIP Code  Personal Funds of the Candidate
Conway	SC	29526-5154
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		2000.00 3000.00
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M12M / D30D / Y Ž01Ť Y	M M / D D	/ Y ňoně Y none % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTALO This Day 1 This Box 1 T		
SUBTOTALS This Period This Page (options	ป)	3000.00
TOTALS This Period (last page in this line of	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

**PAGE** OF FOR LINE NUMBER: **X** 13a (check only one)

54

13b Transaction ID: VNW1ECAQFR9L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none D01D M 02M Ž01Ž ňoně x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

**PAGE** OF FOR LINE NUMBER: **X** 13a (check only one)

54

13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECAQFH4L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none <sup>D</sup>14<sup>D</sup> M 02M Ž01Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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13a

OF

		100
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	SS	Transaction ID : VNW1ECAQFE0L
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2012
Tinubu, Gloria, Bromell, ,	madic initialy	Memo Item    Clection: 2012
Mailing Address 8 Laurel St		Other (specify)   ———————————————————————————————————
City	State	ZIP Code  Responsible to the Candidate   Responsible to the Ca
Conway	SC	29526-5154
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
13000.00		0.00 13000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03 <sup>M</sup> / D05 <sup>D</sup> / Y Ž01Ž Y	M M / D D	none % (apr) Yes X No
List All Endorsers or Guarantors (if any	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	N	
COSTOTALO TINO I ENOU TINO Page (optiona	·y	13000.00
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Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full)  Gloria Bromell Tinubu for Congres	SS	Transaction ID : VNW1ECAQFB6L
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	Memo Item Election: 2012
Tinubu, Gloria, Bromell, ,	ilidale iliitalij	Memo Item    Clection: 2012
Mailing Address 8 Laurel St		Other (specify)
City	State	ZIP Code  Responsible to the Candidate   Personal Funds of the Candidate
Conway	SC	29526-5154 Tersonal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
10000.00	,	0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03M / D14D / Y Ž01Ž Y	M M / D D	/ Y Ynon <sup>Y</sup> Y none % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LINE 3, Se	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full)  Gloria Bromell Tinubu for Congre	SS	Transaction ID : VNW1ECAQFN5L
LOAN SOURCE Full Name (Last, First, N	liddlo Initial)	Election: 0040
Tinubu, Gloria, Bromell, ,	nddie Iriitiai)	☐ Memo Item
Mailing Address 8 Laurel St		General Other (specify) ▼
City	State	ZIP Code  Responsible to the Candidate   Personal Funds of the Candidate
Conway	SC	29526-5154 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
10000.00	ļ,	0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03M / D14D / Y Ž01Ž Y	M M / D D	/ Y ňoně Y none % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
0.1	710.0.1	Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
	·	
SUBTOTALS This Period This Page (optional	)	10000.00
TOTALS This Period (last page in this line or	nly)	······
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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13a 13b

OF

AME OF COMMITTEE (In Bloria Bromell Tinut	ou for Congress			saction ID : VNW1ECAQFC4L		
Tinubu, Gloria, Br	•	Idle Initial)	☐ Memo Ite	em Election: 2012  x Primary  General		
Mailing Address 8 Laurel St				Other (specify)		
City		State	ZIP Code	V Personal Funds of the Condidate		
Conway		SC	29526-5154	Personal Funds of the Candidate		
Original Amount of Loa	n	Cumulative Pa	ment To Date	Balance Outstanding at Close of This Period		
	51000.00		0.00	51000.00		
TERMS Date Inco	urred	Г	ate Due Interest F			
M03M / D30D /	Y Ž01Ž Y	M M / D D	/ Y ňoně Y	none % (apr) Yes X No		
List All Endorsers or G	Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First	st, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
	la		Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9 9 9 9		
2. Full Name (Last, First	t, Middle Initial)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
	1	T	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9 9		
3. Full Name (Last, First	t, Middle Initial)	•	Name of Employer			
Mailing Address			Occupation			
	1		Amount			
City	State	ZIP Code	Guaranteed Outstanding:	9 9		
4. Full Name (Last, First	t, Middle Initial)	!	Name of Employer			
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	9 9		
IDTOTAL O This Desired T						
JOIOIALS IIIIS PERIOD I	ms rage (optional)		<u> </u>	51000.00		
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arm, outstanding halance	only to LINE 2 Sol	adula D. for thi	line If no Schodule D. come	forward to appropriate line of Summary.		

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

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**PAGE** 

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	13h

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Transaction ID: VNW1ECAQFJ2L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 25000.00 0.00 25000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none <sup>D</sup>14<sup>D</sup> M 05M Ž01Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 25000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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13a 13b

OF

AME OF COMMITTEE (In Gloria Bromell Tinu	bu for Congress							
Tinubu, Gloria, B	•	Idle Initial)	☐ Memo It	em Election: 2012  X Primary  General				
Mailing Address 8 Laurel St				Other (specify)				
City		State	ZIP Code	Personal Funds of the Candidate				
Conway		SC	29526-5154	Personal Funds of the Candidate				
Original Amount of Lo	an	Cumulative Page	yment To Date	Balance Outstanding at Close of This Period				
	5000.00	,	0.00	5000.00				
TERMS Date Inc	curred	С	Date Due Interest F					
M05M / D21D /	Y Ž01Ž Y	M M / D D	/ Y ňoně Y	none % (apr) Yes No				
List All Endorsers or	Guarantors (if any) to	o Loan Source						
1. Full Name (Last, Fin	rst, Middle Initial)		Name of Employer					
Mailing Address	Mailing Address							
City	State	Amount Guaranteed Outstanding:						
2. Full Name (Last, First	st, Middle Initial)		Name of Employer	Name of Employer				
Mailing Address			Occupation					
	la		Amount Guaranteed					
City	State	ZIP Code	Outstanding:	9 9 9				
3. Full Name (Last, Fire	st, Middle Initial)		Name of Employer	Name of Employer				
Mailing Address			Occupation					
City	Ctata	ZID Code	Amount Guaranteed					
City	State	ZIP Code	Outstanding:	7				
4. Full Name (Last, First	st, Middle Initial)		Name of Employer					
Mailing Address			Occupation					
	Ta		Amount					
City	State	ZIP Code	Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,				
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

		130					
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congres	S	Transaction ID: VNW1ECAQFP3L					
LOAN SOURCE Full Name (Last, First, Mid	ddla Initial)	- Clastian 2040					
Tinubu, Gloria, Bromell, ,	udie illitial)	Memo Item Election: 2012    Primary   General					
Mailing Address 8 Laurel St		Other (specify) ▼					
City	State	ZIP Code  Personal Funds of the Candidate					
Conway	SC	29526-5154 Telsonal Funds of the Candidate					
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period					
25000.00		0.00 25000.00					
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)					
M05 <sup>M</sup> / D30 <sup>D</sup> / Y Z01Z Y	M M / D D	/ Y ňoně Y none % (apr) Yes X No					
List All Endorsers or Guarantors (if any) t	o Loan Source						
Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
		Amount					
City State	ZIP Code	Guaranteed Outstanding:					
2. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
		Amount					
City	ZIP Code	Guaranteed Outstanding:					
3. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
		Amount					
City	ZIP Code	Guaranteed Outstanding:					
4. Full Name (Last, First, Middle Initial)		Name of Employer					
Mailing Address		Occupation					
		Amount					
City	ZIP Code	Guaranteed Outstanding:					
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

Bloria Bromell Tinu				L	
Tinubu, Gloria, B	tem Election: 2012    X   Primary     General				
Mailing Address 8 Laurel St				Other (specify) ▼	
City		Personal Funds of the Candidate			
Conway		SC	29526-5154	1 Craonal 1 unus of the Candidate	
Original Amount of Lo	pan	Cumulative Pa	yment To Date	Balance Outstanding at Close of This Period	
	30000.00		0.00	30000.00	
TERMS Date In	curred	С	Date Due Interest		
M06M / D04D	ž01ž <sup>Y</sup>	M M / D D	/ Y ňoně Y	none % (apr) Yes X No	
List All Endorsers or	Guarantors (if any) to	o Loan Source			
1. Full Name (Last, Fi	irst, Middle Initial)		Name of Employer		
Mailing Address	Mailing Address				
City	State	ZIP Code	Amount Guaranteed Outstanding:	7	
2. Full Name (Last, Fir	st, Middle Initial)		Name of Employer	Name of Employer	
Mailing Address			Occupation		
		1	Amount Guaranteed		
City	State	ZIP Code	Code Guaranteed Outstanding:		
3. Full Name (Last, Fir	st, Middle Initial)	•	Name of Employer		
Mailing Address			Occupation		
O:+ .	04-4-	710.01-	Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9 9	
4. Full Name (Last, Fire	st, Middle Initial)		Name of Employer		
Mailing Address			Occupation	Occupation	
City State ZIP Code			Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9 9	
	Ti: D ( :: 1)				
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

		130
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congres	S	Transaction ID: VNW1ECAQFD2L
LOAN SOURCE Full Name (Last, First, Mid	ddla Initial)	
Tinubu, Gloria, Bromell, ,	dale iriitiai)	☐ Memo Item
Mailing Address 8 Laurel St		Other (specify) ▼
City	State	ZIP Code  ** Personal Funds of the Candidate
Conway	SC	29526-5154 Telsonal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	
30000.00		0.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M06M / D07D / Y Ž01Ž Y	M M / D D	/ Yho due date y none % (apr) Yes X No
List All Endorsers or Guarantors (if any) t	o Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional).		30000.00
TOTALS This Period (last page in this line only	y)	······································
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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

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(check only one)

BER: **X** 13a 13b

AME OF COMMITTEE (II Gloria Bromell Tinu	ubu for Congress		Transc	action ID : VNW1ECAQFS7L		
Tinubu, Gloria, E	Primary General					
Mailing Address 8 Laurel St				Other (specify)		
City		Personal Funds of the Candidate				
Conway		SC	29526-5154	Personal Funds of the Candidate		
Original Amount of Lo	oan	Cumulative Page	yment To Date Ba	lance Outstanding at Close of This Period		
	26000.00	7	0.00	26000.00		
TERMS Date In	ncurred	С	Pate Due Interest Ra			
M06 <sup>M</sup> / D11 D	/ Ž01Ž Y	M M / D D		0.00 % (apr) Yes X No		
List All Endorsers or	` **	o Loan Source				
1. Full Name (Last, F	irst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	7		
2. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
00	0	710 0 1	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9		
3. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed			
		ZIF Code	Outstanding:	, , , , , , , , , , , , , , , , , , , ,		
4. Full Name (Last, Fin	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation	Occupation		
City	City State ZIP Code					
Oity	State	ZIF Code	Guaranteed Outstanding:	9 9		
SUBTOTALS This Period	l This Page (optional)		<b>&gt;</b>	26000.00		
				2000.00		
Carry outstanding balance	ce only to LINE 3. Sch	edule D. for this	s line. If no Schedule D. carry for	rward to appropriate line of Summary.		

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

FOR LINE NUMBER: (check only one)

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OF

IAME OF COMMITTEE (In Gloria Bromell Tinu	•	3	irans	action ID : VNW1ECAQFK0L		
Tinubu, Gloria, Bı	Election: 2012 Primary General					
Mailing Address 8 Laurel St	Mailing Address 8 Laurel St					
City		State	ZIP Code	V Daysanal Funda of the Candidate		
Conway		SC	29526-5154	Personal Funds of the Candidate		
Original Amount of Loa	an	Cumulative Page	yment To Date Ba	alance Outstanding at Close of This Period		
	7000.00	2	6700.00	300.00		
TERMS Date Inc	curred	С	rate Due Interest Ra			
M06 <sup>M</sup> / D26 <sup>D</sup> /	<sup>Y</sup> Ž01Ž <sup>Y</sup>	M M / D D		none % (apr) Yes No		
List All Endorsers or 0	Guarantors (if any) to	o Loan Source				
1. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address	Mailing Address			Occupation		
City	Ctoto	ZID Code	Amount Guaranteed	Amount Guaranteed		
City	State	ZIP Code	9 9			
2. Full Name (Last, Firs	st, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	7ID Codo	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9 9		
3. Full Name (Last, Firs	st, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
011	la	·	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	7		
4. Full Name (Last, Firs	et, Middle Initial)		Name of Employer			
Mailing Address	Mailing Address			Occupation		
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	9		
CURTOTAL O TUE DE LE	This David ( ) "		г			
SUBTUTALS This Period	inis Page (optional)		<u> </u>	300.00		
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

IAME OF COMMITTEE (II Gloria Bromell Tinu	•	3	Transa	action ID : VNW1ECAQFW1L		
LOAN SOURCE Full Tinubu, Gloria, B	n Election: 2012 Primary General					
Mailing Address 8 Laurel St				▼ Other (specify) ▼ Runoff		
City		State	ZIP Code	Personal Funds of the Candidate		
Conway		SC	29526-5154	r ersonal runus of the Candidate		
Original Amount of Lo	oan	Cumulative Page	yment To Date Ba	lance Outstanding at Close of This Period		
	2500.00	9	2000.00	500.00		
TERMS Date In	ncurred	С	rate Due Interest Ra			
M06M / D30D	/ Ž01Ž Y	M M / D D		% (apr) Yes X No		
List All Endorsers or	· · · · · · · · · · · · · · · · · · ·	o Loan Source				
1. Full Name (Last, F	irst, Middle Initial)		Name of Employer			
Mailing Address	Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	7		
2. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
	la		Amount Guaranteed			
City	State	ZIP Code	Outstanding:	, ,		
3. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
O:t-	04-4-	7ID 0- 1-	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	7 7 7		
4. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation	Occupation		
City	011					
City	State	ZIP Code	Guaranteed Outstanding:	7		
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				300.00		
Carry outstanding baland	ce only to LINE 3. Sch	edule D. for this	s line. If no Schedule D. carry for	rward to appropriate line of Summary.		

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

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OF

AME OF COMMITTEE (In Gloria Bromell Tinu	ubu for Congress		Transaction ID : VNW1ECAQFX9L
Tinubu, Gloria, B	☐ Memo Item		
Mailing Address 8 Laurel St			▼ Other (specify) ▼ Runoff
City		ZIP Code	
Conway		SC	29526-5154 Personal Funds of the Candidate
Original Amount of Lo	oan	Cumulative Pa	ment To Date Balance Outstanding at Close of This Period
,	3500.00	2	2500.00 1000.00
TERMS Date Inc	curred	Г	ate Due Interest Rate Secured: (If none, enter 0)
M07M / D10D /	ž01ž <sup>v</sup>	M M / D D	/ Yno due date none % (apr) Yes X No
List All Endorsers or	Guarantors (if any) to	o Loan Source	
1. Full Name (Last, Fi	irst, Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed
City	State	ZIF Code	Outstanding:
2. Full Name (Last, Fire	rst, Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed
Oity	State	ZIP Code	Outstanding:
3. Full Name (Last, Fire	rst, Middle Initial)		Name of Employer
Mailing Address			Occupation
011	la		Amount Guaranteed
City	State	ZIP Code	Outstanding:
4. Full Name (Last, First	st, Middle Initial)	•	Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding:
	'		
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

		100			
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	SS	Transaction ID : VNW1ECAQFV3L			
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2012			
Tinubu, Gloria, Bromell, ,	Memo Item  Primary  General				
Mailing Address 8 Laurel St	Other (specify)   —				
City	City State ZIP Code				
Conway	SC	29526-5154 Personal Funds of the Candidate			
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period			
10000.00	,	1300.00 8700.00			
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)			
M08M / D06D / Y Z01Z Y	M M / D D	/ Y ňoně Y none % (apr) Yes X No			
List All Endorsers or Guarantors (if any)	to Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	City State ZIP Code Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)	1	Name of Employer			
Mailing Address		Occupation			
		Amount Guaranteed			
City	ZIP Code	Outstanding:			
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)	-	Name of Employer			
Mailing Address		Occupation			
		Amount			
City	ZIP Code	Guaranteed Outstanding:			
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

						130
AME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Co	ngres	S			Transa	ction ID : VNW1ECAQFZ4L
LOAN SOURCE Full Name (Last, Tinubu, Gloria, Bromell, ,	ddle Initial)			Memo Item	Election: 2012 Primary  General	
Mailing Address 8 Laurel St						Other (specify)
City		State	ZIP Cod			Personal Funds of the Candidate
Conway		SC	29526-	5154 		Totochar Fundo or the Garididate
Original Amount of Loan		Cumulative Pay	yment To	Date	Bala	ance Outstanding at Close of This Period
5000	.00	7		0.00		5000.00
TERMS Date Incurred		D	ate Due		Interest Rate (If none, ente	
M08M / D17D / Y Z012	Υ	M M / D D	/ Y	ňone <sup>Y</sup>		one % (apr) Yes X No
List All Endorsers or Guarantors	(if any) t	o Loan Source				
1. Full Name (Last, First, Middle II	nitial)			Name of Em	ployer	
Mailing Address	Mailing Address			Occupation		
City	State	Amount Guarant Outstan				7 7
2. Full Name (Last, First, Middle In	itial)	I		Name of Em	ployer	
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		
3. Full Name (Last, First, Middle In	itial)			Name of Em	ployer	
Mailing Address				Occupation		
City	State	ZIP Code		Amount Guaranteed Outstanding:		7
4. Full Name (Last, First, Middle In	l itial)			Name of Employer		
Mailing Address				Occupation		
			-	Amount		
City	State	ZIP Code		Guaranteed Outstanding:		9
SUBTOTALS This Period This Page (o	optional).				···· <b>&gt;</b>	5000.00
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Use separate schedule(s) for each category of the Detailed Summary Page

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECAQG02L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none <sup>D</sup>20<sup>D</sup> <sup>M</sup>80<sup>M</sup> Ž01Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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	13b

OF

NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	ess	Transaction ID: VNW1ECAQGC7L				
LOAN SOURCE Full Name (Last, First, I	LOAN SOURCE Full Name (Last, First, Middle Initial) Tinubu, Gloria, Bromell, ,					
Mailing Address 8 Laurel St		★ General   Other (specify) ▼				
City	State	ZIP Code				
Conway	sc	29526-5154 Personal Funds of the Candidate				
Original Amount of Loan	Cumulative Pay	yment To Date Balance Outstanding at Close of This Period				
10000.00		0.00 10000.00				
TERMS Date Incurred	D	Date Due Interest Rate Secured: (If none, enter 0)				
M08M / D20D / Y Ž01Ž Y	M M / D D	none % (apr) Yes No				
List All Endorsers or Guarantors (if any	) to Loan Source					
1. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City	ZIP Code	Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City	ZIP Code	Guaranteed Outstanding:				
3. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City	ZIP Code	Guaranteed Outstanding:				
4. Full Name (Last, First, Middle Initial)		Name of Employer				
Mailing Address		Occupation				
		Amount				
City	ZIP Code	Guaranteed Outstanding:				
	n					
SUBTOTALS This Period This Page (optional)						
TOTALS This Period (last page in this line of	nly)	······				
Carry outstanding balance only to LINE 3,	Schedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.				

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

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECAQG86L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>19<sup>D</sup> M09M Ž01Ž no due date x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

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13b Transaction ID: VNW1ECAQG36L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10<sup>M</sup> 0.00 <sup>D</sup>25<sup>D</sup> Ž01Ž ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

AME OF COMMITTEE (II Gloria Bromell Tinu	ubu for Congress		Truits.	action ID : VNW1ECAQGB9L		
Tinubu, Gloria, B	n Election: 2012 Primary General					
Mailing Address 8 Laurel St				Other (specify) ▼		
City		Personal Funds of the Candidate				
Conway		SC	29526-5154	Personal Funds of the Candidate		
Original Amount of Lo	oan	Cumulative Pa	yment To Date Ba	alance Outstanding at Close of This Period		
	10000.00	7	0.00	10000.00		
TERMS Date In	ncurred	С	rate Due Interest Ra			
M11M / D01D	/ Ž01Ž Y	M M / D D		none % (apr) Yes X No		
List All Endorsers or	· · · · · · · · · · · · · · · · · · ·	o Loan Source				
1. Full Name (Last, F	irst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	7		
2. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
000	lo	710.0.1	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9		
3. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed			
		ZIF Code	Outstanding:	9 9		
4. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation	Occupation		
City	City State ZIP Code					
City	State	ZIF Code	Guaranteed Outstanding:	7		
SUBTOTALS This Period	This Page (optional)			10000.00		
				10000.00		
				7		
Carry outstanding balance	ce only to LINE 3. Sch	edule D. for this	s line. If no Schedule D. carry fo	rward to appropriate line of Summary.		

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

FOR LINE NUMBER: (check only one)

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**X** 13a 13b

OF

IAME OF COMMITTEE (II Gloria Bromell Tinu	•	3	Transa	action ID : VNW1ECAQG60L		
Tinubu, Gloria, E	Primary General					
Mailing Address 8 Laurel St				Other (specify) ▼		
City		X Personal Funds of the Candidate				
Conway		SC	29526-5154	Totoliai Falias of the Saliaidate		
Original Amount of Lo		Cumulative Page	yment To Date Ba	alance Outstanding at Close of This Period		
	15000.00	7	0.00	15000.00		
TERMS Date In	ocurred	С	late Due Interest Ra			
M11M / D13D	<sup>Y</sup> Ž01Ž <sup>Y</sup>	M M / D D	/ Y ňoně Y	none % (apr) Yes X No		
List All Endorsers or	· · · · · · · · · · · · · · · · · · ·	o Loan Source				
1. Full Name (Last, F	irst, Middle Initial)		Name of Employer			
Mailing Address	Mailing Address					
City	State	ZIP Code	Amount Guaranteed Outstanding:	7		
2. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
0::	lo	710.0	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9		
3. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed			
		ZIF Code	Outstanding:	9 9		
4. Full Name (Last, Fin	rst, Middle Initial)		Name of Employer			
Mailing Address			Occupation	Occupation		
City	City State ZIP Code					
City	State	ZIF Code	Guaranteed Outstanding:	9		
SUBTOTALS This Period	This Page (optional)			15000.00		
				15000.00		
Carry outstanding balance	ce only to LINE 3. Sch	edule D. for this	s line. If no Schedule D. carry fo	rward to appropriate line of Summary.		

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

FOR LINE NUMBER: (check only one)

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OF

Gloria Bromell Tinu					
LOAN SOURCE Full Name (Last, First, Middle Initial)  — Memo Item  Tinubu, Gloria, Bromell, ,				m Election: 2012 Primary General	
Mailing Address 8 Laurel St				Other (specify)	
City	City State ZIF			Personal Funds of the Candidate	
Conway		SC	29526-5154	r crostial runds of the Candidate	
Original Amount of Lo	oan	Cumulative Page	yment To Date Ba	alance Outstanding at Close of This Period	
2	2500.00		0.00	2500.00	
TERMS Date In	curred	С	Pate Due Interest Ra (If none, en		
M12M / D26D	Ž01Ž Y	M M / D D	′ Yno due dateY	none % (apr) Yes No	
List All Endorsers or	` *,	o Loan Source			
1. Full Name (Last, Fi	irst, Middle Initial)		Name of Employer		
Mailing Address	Mailing Address				
City	State	ZIP Code	Amount Guaranteed Outstanding:	9	
2. Full Name (Last, Fir	2. Full Name (Last, First, Middle Initial)			Name of Employer	
Mailing Address			Occupation		
Oit.	04-4-	710 01-	Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9 9	
3. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed		
City		ZIP Code	Outstanding:	7	
4. Full Name (Last, Fir	rst, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	Ctata	ZID Code	Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9	
	·	•			
SUBTOTALS This Period	This Page (optional)		<u> </u>	2500.00	
OTALS This Period (last	t page in this line only	·) ······	······	, , , , , , , , ,	
Carry outstanding balance	ce only to LINE 3. Sch	edule D. for this	s line. If no Schedule D. carry fo	orward to appropriate line of Summary.	

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	SS	Transaction ID : VNW1ECAQG44L
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2012
Tinubu, Gloria, Bromell, ,		Primary
		<b>X</b> General
Mailing Address 8 Laurel St		Other (specify)   ———————————————————————————————————
City	State	ZIP Code  Personal Funds of the Candidate
Conway	SC	29526-5154 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M12 <sup>M</sup> / D26 <sup>D</sup> / Y Ž01Ž Y	M M / D D	/ Yno due date none % (apr) Yes ✗ No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
	·	
SUBTOTALS This Period This Page (optional	)	5000.00
TOTALS This Period (last page in this line or	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

_		100
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congi	ess	Transaction ID : VNW1ECAQGA1L
LOAN SOURCE Full Name (Last, First,	Middle Initial)	☐ Memo Item Election: 2012
Tinubu, Gloria, Bromell, ,		Primary  Reneral
Mailing Address 8 Laurel St		Other (specify) ▼
City	State	ZIP Code  Personal Funds of the Candidate
Conway	SC	29526-5154 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1000.00		0.00
TERMS Date Incurred	Г	Date Due Interest Rate Secured: (If none, enter 0)
M12M / D31D / Y Ž01Ž Y	M M / D D	/ Y ňoně Y none % (apr) Yes X No
List All Endorsers or Guarantors (if ar	ny) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	e ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	e ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	e ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount
City	e ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Device (ontice	I\	
SUBTOTALS This Period This Page (option	ıaı)	1000.00
TOTALS This Period (last page in this line	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

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OF

		100		
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	ess	Transaction ID : VNW1ECAQFY7L		
I OAN SOURCE Full Name (Last First N	Middle Initial)	Memo Item Election: 2012		
Tinubu, Gloria, Bromell, ,	LOAN SOURCE Full Name (Last, First, Middle Initial)			
Mailing Address 8 Laurel St		<b>x</b> General Other (specify) ▼		
City	State	ZIP Code  Responsibility Personal Funds of the Candidate		
Conway	SC	29526-5154 Tersonal Funds of the Candidate		
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period		
1000.00		0.00 1000.00		
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)		
M06 <sup>M</sup> / D03 <sup>D</sup> / Y Ž013 Y	M M / D D	/ Y ňoně Y none % (apr) Yes X No		
List All Endorsers or Guarantors (if any	) to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount Guaranteed		
City	ZIP Code	Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount Guaranteed		
City	ZIP Code	Outstanding:		
4. Full Name (Last, First, Middle Initial)	•	Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional	il)	1000.00		
TOTALS This Period (last page in this line of	nly)	······································		
Carry outstanding balance only to LINE 3, 5	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.		

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

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	ne of committee (in full) oria Bromell Tinubu for Co	ngres	S		Transac	ction ID : VNW1ECAQG28L
	LOAN SOURCE Full Name (Last, First, Middle Initial)				Election: 2012 Primary  General	
8	Mailing Address 8 Laurel St					Other (specify) ▼
	City Conway		State SC	ZIP Co 29526		Personal Funds of the Candidate
	Original Amount of Loan Cumulative Payment To			/ment To	Date Bala	ance Outstanding at Close of This Period
	500.00			0.00	500.00	
ī	TERMS Date Incurred Date Due			ate Due	Interest Rate (If none, ente	
	M06M / D28D / Y Ž01Š Y M M / D D / Yo			/ Ync	<u> </u>	00 % (apr) Yes X No
L	List All Endorsers or Guarantors	(if any) t	o Loan Source			
-	1. Full Name (Last, First, Middle In	nitial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	9 9
2	2. Full Name (Last, First, Middle Initial)			Name of Employer		
	Mailing Address			Occupation		
-	City State ZIP Code				Amount Guaranteed	
	Oity	Otate	Zii Gode		Outstanding:	9 9 9
3	3. Full Name (Last, First, Middle In	itial)			Name of Employer	
	Mailing Address			Occupation		
<u> </u>		I _	T		Amount Guaranteed	
	City	State	ZIP Code		Outstanding:	9 9
4	4. Full Name (Last, First, Middle Initial)			Name of Employer		
	Mailing Address			Occupation		
				Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9 9 9
SUI	SUBTOTALS This Period This Page (optional)					
то	TOTALS This Period (last page in this line only)					
Ca	rry outstanding balance only to LIM	NE 3. Sch	nedule D. for this	s line. If	no Schedule D. carry for	ward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full)  Gloria Bromell Tinubu for Congre	ess	Transaction ID: VNW1ECAQG93L
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2012
Tinubu, Gloria, Bromell, ,	Memo Item  Primary  General	
Mailing Address 8 Laurel St		Other (specify)
City	State	ZIP Code  Responsibility Personal Funds of the Candidate
Conway	SC	29526-5154 Tersonal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
200.00	,	0.00 200.00
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M07M / D01D / Y Ž01Š Y	M M / D D	/ Yno due date none % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C. This Desired TV. D / . V		
SUBTOTALS This Period This Page (optional	11)	200.00
TOTALS This Period (last page in this line of	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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	13b

						130		
AME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Co	ongres	S			Transa	ction ID : VNW1ECAQGG9L		
LOAN SOURCE Full Name (Last, Tinubu, Gloria, Bromell, ,	First, Mid	ddle Initial)			Memo Item	Election: 2012 Primary General		
Mailing Address 8 Laurel St						Other (specify)		
City	State	ZIP Code			▼ Personal Funds of the Candidate			
Conway	SC	29526-515	54		1 croonary and or the candidate			
Original Amount of Loan		Cumulative Pay	yment To Da	te	Bal	ance Outstanding at Close of This Period		
3500	0.00	7	,	0.00	)	3500.00		
TERMS Date Incurred		D	Date Due		Interest Rat (If none, ente			
M07 <sup>M</sup> / D09 <sup>D</sup> / Y Z013	Y	M M / D D	/ Y ňo	ne Y		one % (apr) Yes X No		
List All Endorsers or Guarantors	(if any) t	o Loan Source						
1. Full Name (Last, First, Middle I	nitial)		Na	ame of Em	ıployer			
Mailing Address				ccupation				
City	State	ZIP Code	Gı	nount uaranteed utstanding:		7		
2. Full Name (Last, First, Middle In	itial)		Na	Name of Employer				
Mailing Address			O	ccupation				
City	State	ZIP Code	Gi	nount uaranteed utstanding:		7		
3. Full Name (Last, First, Middle In	itial)		Na	Name of Employer				
Mailing Address			O	ccupation				
City	State	ZIP Code	Gı	nount uaranteed utstanding:		7		
4. Full Name (Last, First, Middle In	itial)		Na	Name of Employer				
Mailing Address			O	Occupation				
City	State	ZIP Code		nount uaranteed				
City	Otato	Zii Gode	O	utstanding:		7		
SUBTOTALS This Period This Page (	optional).				···· <b>&gt;</b>	3500.00		
FOTALS This Period (last page in this	s line only	y)				, ,		
Carry outstanding balance only to LI	NE 3, Scl	hedule D, for this	s line. If no	Schedule	D, carry for	ward to appropriate line of Summary.		

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

FOR LINE NUMBER: (check only one)

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				,		13b
NAME OF COMMITTEE (In Full)			Tra	nsaction I	D : VNW1ECAQGE3L	
Gloria Bromell Tinubu for Congress						
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		Memo	Item Elec	ction: 2012	
Tinubu, Gloria, Bromell, ,			Primary			
Mailing Address				x	General Other (specify) ▼	
8 Laurel St					oalei (specily) ▼	
City	State	ZIP Code	Y Personal Funds of the Candid			
Conway	SC	29526-51	154		1	
Original Amount of Loan	Cumulative Pay	yment To Da	ate	Balance (	Outstanding at Close of The	his Period
1500.00			0.00	<u></u>	1500	0.00
TERMS Date Incurred	D	ate Due	Interest (If none,	Rate enter 0)	Secured	:
M09 <sup>M</sup> / D30 <sup>D</sup> / Y Ž013 Y	M M / D D	/ Y ň	one Y	none	% (apr) Yes	x No
List All Endorsers or Guarantors (if any) t	o Loan Source					
1. Full Name (Last, First, Middle Initial)			lame of Employer			
Mailing Address			Occupation			
			Amount			
City State	ZIP Code		Guaranteed Outstanding:	7		
2. Full Name (Last, First, Middle Initial)		١	lame of Employer			
Mailing Address		(	Occupation			
		-	Amount			_
City	ZIP Code		Guaranteed Outstanding:	7	y	
3. Full Name (Last, First, Middle Initial)		1	lame of Employer			
Mailing Address		(	Occupation			
			Amount			
City	ZIP Code		Guaranteed Outstanding:	7		
4. Full Name (Last, First, Middle Initial)		1	lame of Employer			
Mailing Address		(	Occupation			
		1	Amount			_
City State	ZIP Code		Guaranteed Outstanding:	7		
SUBTOTALS This Period This Page (optional)					1500	00
TOTALS This Period (last page in this line only					1300	.50
Cown outstanding belongs substantible 0.00	andulo D. for #11	aline # ==	Cohodula D	, formers	to appropriate line of C	mane exe
Carry outstanding balance only to LINE 3. Sch	nedule D for this	s line. If no	Schedule D carn	/ torward i	to appropriate line of Su	mmarv

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

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OF

NAME OF COMMITTEE (I Gloria Bromell Tini	•	5	Trans	action ID : VNW1ECAQGN8L			
Tinubu, Gloria, E	•	ldle Initial)	☐ Memo Ite	m Election: 2012 Primary General			
Mailing Address 8 Laurel St	Mailing Address 8 Laurel St						
City		State	ZIP Code	Personal Funds of the Candidate			
Conway		SC	29526-5154	Feisorial Fullus of the Candidate			
Original Amount of Lo	oan	Cumulative Pay	yment To Date Ba	alance Outstanding at Close of This Period			
	700.00		0.00	700.00			
TERMS Date In	ncurred	D	rate Due Interest Ra				
M11M / D15D	/ ¥ Ž013 Y	M M / D D		0.00 % (apr) Yes No			
List All Endorsers or	Guarantors (if any) to	o Loan Source					
1. Full Name (Last, F	First, Middle Initial)		Name of Employer				
Mailing Address			Occupation				
011	Ta		Amount Guaranteed				
City	State	ZIP Code	Outstanding:	9 9 9			
2. Full Name (Last, Fi	rst, Middle Initial)	·	Name of Employer				
Mailing Address			Occupation				
0''	0	710 0 1	Amount Guaranteed				
City	State	ZIP Code	Outstanding:	y y			
3. Full Name (Last, Fi	rst, Middle Initial)		Name of Employer				
Mailing Address			Occupation				
			Amount Guaranteed				
City	State	ZIP Code	Outstanding:	9 9			
4. Full Name (Last, Fi	rst, Middle Initial)		Name of Employer				
Mailing Address			Occupation				
			Amount				
City	State	ZIP Code	Guaranteed Outstanding:	9			
CURTOTAL & This Davice	I This Page (entions)	·					
				700.00			
TOTALS This Period (las	t page in this line only	')	<b>•</b>	, ,			
Carry outstanding balan	ce only to LINE 3. Sch	edule D. for this	s line. If no Schedule D. carry fo	prward to appropriate line of Summary.			

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

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	13b

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Transaction ID: VNW1ECAQGH7L NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none <sup>D</sup>13<sup>D</sup> M 02M ž014 honr x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

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**X** 13a Detailed Summary Page 13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECAQGK2L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 1350.00 0.00 1350.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) none D09D M 05M ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1350.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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					Detailed Guillinary	i age			13b
	COMMITTEE (In Full)				Tra	nsaction	ID : VNW1ECB2ZK1L		
Gloria B	romell Tinubu for C	ongress	6						
LOAN S	SOURCE Full Name (Last	, First, Mic	ldle Initial)		☐ Memo I	Item Ele	ction: 2014		
Tinub	u, Gloria, Bromell, ,						Primary		
						×			
Mailing 8 Laurel	Address St						Other (specify) ▼		
City			State SC	ZIP Code	Code  ** Personal Funds of the Cano				
Conway			29526-5	154		1 craonar i unua or tric		luate	
Origina	al Amount of Loan		Cumulative Page	yment To D	Date	Balance	Outstanding at Close of	This F	eriod
	150	0.00			0.00	L	150	00.00	П
	, , , ,		9	7			7		
TERMS	Date Incurred			Date Due	Interest (If none,		Secure	∌d:	
<sup>M</sup> 07 <sup>N</sup>	<sup>1</sup> / □15□ / ¥ ž014	Υ	M M / D D	/ Y	ňone <sup>Ý</sup>	0.00	% (apr)	es x	No
List All	Endorsers or Guarantors	(if any) t	o Loan Source						
1. Full	Name (Last, First, Middle	Initial)			Name of Employer				
Mail	ing Address				Occupation				
					Amount				
City		State	ZIP Code		Guaranteed			П	
					Outstanding:	7	7		
2. Full N	Name (Last, First, Middle I	nitial)			Name of Employer				
Mailir	ng Address				Occupation				
					Amount			_	
City		State	ZIP Code		Guaranteed Outstanding:	7	7	Ш	
3. Full N	Name (Last, First, Middle I	nitial)			Name of Employer				
Mailir	ng Address				Occupation				
					·				
		T-	T		Amount Guaranteed			П	
City		State	ZIP Code		Outstanding:	7		_	
4. Full N	Name (Last, First, Middle I	nitial)	-		Name of Employer				
Mailir	ng Address				Occupation				
					Amount			_	
City		State	ZIP Code		Guaranteed Outstanding:	7	, , , , ,	Ш	
SUBTOTAL	LS This Period This Page	(optional)			······		150	00.00	П
TOTALS T	his Period (last page in th	is line only	·) ······		······•				Ī
Carry outs	standing balance only to L	INE 3, Sch	edule D, for this	s line. If n	Schedule D, carry	forward	to appropriate line of S	3umm	ary.

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

PAGE 43 OF FOR LINE NUMBER: (check only one)

**X** 13a 13b

		100
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congre	ess	Transaction ID : VNW1ECB2ZN7L
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Tinubu, Gloria, Bromell, ,	Memo Item Primary  General	
Mailing Address 8 Laurel St		Other (specify)
City	State	ZIP Code  Responsible to the Candidate   Personal Funds of the Candidate
Conway	SC	29526-5154
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1800.00		0.00 1800.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M07 <sup>M</sup> / D23 <sup>D</sup> / Y Ž014 Y	M M / D D	/ Y ňoně Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	<b>'</b>	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C. This Desired TV. D / . V		
SUBTOTALS This Period This Page (optional	ai)	1800.00
TOTALS This Period (last page in this line of	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

PAGE 44 OF FOR LINE NUMBER: **X** 13a (check only one)

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Detailed Summary Page 13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ECRDBQ2L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D 15D <sup>M</sup>80<sup>M</sup> ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 45 OF FOR LINE NUMBER: (check only one)

**X** 13a 13b

AME OF COMMITTEE (I Gloria Bromell Tini	ubu for Congress		Trans	action ID: VNW1ECZ6ZM2L
Tinubu, Gloria, E	•	Idle Initial)	☐ Memo Iter	m Election: 2014 Primary General
Mailing Address 8 Laurel St				Other (specify)
City		State	ZIP Code	N Demond Foods of the Oscillation
Conway		SC	29526-5154	Personal Funds of the Candidate
Original Amount of L	oan	Cumulative Pa	ment To Date Ba	alance Outstanding at Close of This Period
,	6500.00		4000.00	2500.00
TERMS Date In	ncurred	Г	ate Due Interest Ra	
M09M / D21D	/ ¥ ž014 ¥	M M / D D	/ Y ňoně Y	0.00 % (apr) Yes X No
List All Endorsers or	Guarantors (if any) to	o Loan Source		
1. Full Name (Last, F	First, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
		710.0	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	yy
2. Full Name (Last, Fi	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
0"	la	710.0.1	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9
3. Full Name (Last, Fi	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount Guaranteed	
City	State	ZIP Code	Outstanding:	, , , , , ,
4. Full Name (Last, Fi	rst, Middle Initial)	'	Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9
UBTOTALS This Period	I This Page (optional)			2500.00
				2500.00
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arry outstanding balan	ce only to LINE 3. Sch	edule D. for this	line. If no Schedule D. carry fo	rward to appropriate line of Summary.

Use separate schedule(s) for each category of the

PAGE 46 OF FOR LINE NUMBER:

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**X** 13a (check only one) Detailed Summary Page 13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ED3WER9L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>21 <sup>D</sup> M09M ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 500.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 47 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ED5M069L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10<sup>M</sup> none <sup>D</sup>16<sup>D</sup> ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 48 OF FOR LINE NUMBER: **X** 13a (check only one)

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1ED85ZM5L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 6000.00 0.00 6000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10<sup>M</sup> none <sup>D</sup>29<sup>D</sup> ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 6000.00 TOTALS This Period (last page in this line only) ...... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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	13b

		100
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congr	ess	Transaction ID : VNW1ED9S8Q8L
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Tinubu, Gloria, Bromell, ,	Memo Item Primary  General	
Mailing Address 8 Laurel St		Other (specify)
City	State	ZIP Code  Responsible to the Candidate   Personal Funds of the Candidate
Conway	SC	29526-5154 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1100.00		0.00 1100.00
TERMS Date Incurred	С	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D04D / Y Ž01Ă Y	M M / D D	/ Y ňoně Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if an	y) to Loan Source	
1. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
CULTUTAL & This Devied This Dags (senting		
SUBTOTALS This Period This Page (option	ai)	1100.00
TOTALS This Period (last page in this line	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

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OF

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for each category of the **X** 13a Detailed Summary Page 13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1EDAEJQ4L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 900.00 0.00 900.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 11M none D04D ž014 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 900.00 TOTALS This Period (last page in this line only) ......

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

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

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FOR LINE NUMBER:
(check only one)

**X** 13a 13b

IAME OF COMMITTEE (In Gloria Bromell Tinu	bu for Congress			saction ID : VNW1EDAEJT7L
Tinubu, Gloria, B	•	Idle Initial)	☐ Memo Ite	em Election: 2014 Primary  General
Mailing Address 8 Laurel St				Other (specify)
City		State	ZIP Code	Developed Finally of the Condidate
Conway		SC	29526-5154	Personal Funds of the Candidate
Original Amount of Lo	an	Cumulative Page	yment To Date E	Balance Outstanding at Close of This Period
, , , , , ,	1200.00		0.00	1200.00
TERMS Date Inc	curred	С	Date Due Interest F	
M11M / D14D /	<sup>Y</sup> Ž014 <sup>Y</sup>	M M / D D	/ Y ňoně Y	none % (apr) Yes No
List All Endorsers or	Guarantors (if any) to	o Loan Source		
1. Full Name (Last, Fin	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	Ctata	ZID Code	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	9 9
2. Full Name (Last, First	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	7ID Codo	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7 7
3. Full Name (Last, First	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
	la		Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7 7 7
4. Full Name (Last, First	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	9 9
OUDTOTAL C. T.L. T.	TI. D. (			
SUBTUTALS This Period	inis Page (optional)		<u> </u>	1200.00
<b>OTALS</b> This Period (last	page in this line only	')	······	9 9
Carry outstanding halanc	e only to LINE 3 Sch	edule D for this	s line If no Schedule D. carry f	forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

13a

				,	13b		
NAME OF COMMITTEE (In Full) Gloria Bromell Tinubu for Congres			Tra	ansaction	D : VNW1EDKFXC7L		
,							
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo	Item Ele	ction: 2014		
Tinubu, Gloria, Bromell, ,					Primary		
Mailing Address				×	General Other (specify) —		
8 Laurel St					Other (specify) ▼		
City	State	ZIP Code	Y Personal Funds of the Cand				
Conway		29526-5					
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance	Outstanding at Close of This Perio		
501.33			0.00		501.33		
TERMS Date Incurred	D	ate Due	Interes (If none	t Rate , enter 0)	Secured:		
M12M / D30D / Y Ž01Ă Y	M M / D D	/ Y ň	one <sup>Y</sup>	none	% (apr) Yes X		
List All Endorsers or Guarantors (if any) t	o Loan Source						
1. Full Name (Last, First, Middle Initial)		1	lame of Employer				
Mailing Address		(	Occupation				
		<i>A</i>	Amount				
City	ZIP Code		Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)		1	lame of Employer				
Mailing Address		(	Occupation				
		A	Amount				
City	ZIP Code		Guaranteed Outstanding:	7			
3. Full Name (Last, First, Middle Initial)	-	1	Name of Employer				
Mailing Address		(	Occupation				
		A	Amount				
City	ZIP Code		Guaranteed Outstanding:	7			
4. Full Name (Last, First, Middle Initial)	- 1	1	Name of Employer				
Mailing Address		(	Occupation				
			Amount				
City	ZIP Code	(	Guaranteed Outstanding:	7	7		
	·						
SUBTOTALS This Period This Page (optional)			<u>^</u>	<del> </del>	501.33		
TOTALS This Period (last page in this line only	/) ······		······································	<u> </u>	7		
Carry outstanding balance only to LINE 3. Sci	nedule D. for this	s line. If no	Schedule D. carr	v forward	to appropriate line of Summary		

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

PAGE 53 OF FOR LINE NUMBER: **x** 13a (check only one)

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13b NAME OF COMMITTEE (In Full) Transaction ID: VNW1EE17QP0L Gloria Bromell Tinubu for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Tinubu, Gloria, Bromell, , General X Mailing Address 8 Laurel St Other (specify) City State ZIP Code X Personal Funds of the Candidate SC 29526-5154 Conway Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 600.00 0.00 600.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>13<sup>D</sup> M 07M Ž015 ňone x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 600.00 TOTALS This Period (last page in this line only) ..... 363351.33 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

oans

(Use separate schedule(s) for each numbered line) PAGE 54 OF
FOR LINE NUMBER:
(check only one)

9 **x** 10

NAME OF COMMITTEE (In Full)  Gloria Bromell Tinub	u for (	Congress	
A. Full Name (Last, First, Middle Initial) of Lake Research Partners Inc	Nature of Debt (Purpose): polling and survey services		
Mailing Address 1726 M St NW Ste 1100			
City Washington	State DC	Zip Code 20036-4528	
Outstanding Balance Beginning This Period	od		Transaction ID : VNS3P9H64F1
6500.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	6500.00
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Poplus, Reginald, , ,			Nature of Debt (Purpose): Consulting Services - management
Mailing Address 2475 Enon Rd SW			
City Atlanta	State	Zip Code 30331-7843	
Outstanding Balance Beginning This Period  4191.66  Amount Incurred This Period  0.00	od	Payment This Period 0.00	Transaction ID: VNS3P9H64P7  Outstanding Balance at Close of This Period  4191.66
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Smith, James, E., , Jr., Esq.  Mailing Address 1718 Hollywood Dr			Nature of Debt (Purpose): legal services
City	State	Zip Code	
Columbia	SC	29205-3216	
Outstanding Balance Beginning This Period  600.00  Amount Incurred This Period	od	Payment This Period	Transaction ID: VNS3P9H6589  Outstanding Balance at Close of This Period
0.00		0.00	600.00
SUBTOTALS This Period This Page (optional)			11291.66
) TOTALS This Period (last page this line number only)			► 11291.66
TOTAL OUTSTANDING LOANS from Schedule C (last page only)			363351.33
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)			374642.99