

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

ThadViers.com

ADDRESS (number and street)

1452 Forestbrook Road

Check if different than previously reported. (ACC)

Myrtle Beach

SC

29579

2. FEC IDENTIFICATION NUMBER ▼

C C00502872

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

SC

07

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

11

06

2012

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

11

06

2012

in the State of

5. Covering Period

10

01

2011

through

12

31

2011

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 Thad Viers

Signature of Treasurer Thad Viers

[Electronically Filed]

Date

01

31

2012

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

ThadViers.com

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))....	22702.00	93978.83
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	22702.00	93978.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	65768.58	77081.74
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	65768.58	77081.74
8. Cash on Hand at Close of Reporting Period (from Line 27).....	27432.81	
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).....	10500.00	

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

ThadViers.com

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).....	20600.00	77511.00
(ii) Unitemized.....	-2898.00	647.12
(iii) TOTAL of contributions from individuals ▶	17702.00	78158.12
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) The Candidate.....	0.00	10820.71
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	22702.00	93978.83
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	2500.00	10500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	2500.00	10500.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	35.38	35.72
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	25237.38	104514.55

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	65768.58	77081.74
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	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) ►	65768.58	77081.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	67964.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	25237.38
25. SUBTOTAL (add Line 23 and Line 24).....	93201.39
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	65768.58
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	27432.81

**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 34
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
ThadViers.com

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

Mailing Address 1850 Arundel Rd

City Myrtle Beach State SC Zip Code 29577-5907

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2011

Transaction ID : 20109.C237

Amount of Each Receipt this Period
1500.00

Receipt

B. Full Name (Last, First, Middle Initial)
M. Bert Anderson

Mailing Address 1700 N Ocean Blvd

City Myrtle Beach State SC Zip Code 29577-3216

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2011

Transaction ID : 20105.C124

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address

City State Zip Code

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2011

Transaction ID : 20105.C53

Amount of Each Receipt this Period
250.00

Receipt

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 6 OF 34
	<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)
ThadViers.com

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

Mailing Address 4459 Richmond Hill Dr

City Murrells Inlet State SC Zip Code 29576-6816

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 28 / 2011

Transaction ID : 20105.C54

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Harold Branton

Mailing Address PO Box 1175

City Myrtle Beach State SC Zip Code 29578-1175

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 20105.C43

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Caregivers of South Carolina, LLC

Mailing Address 1926 Rolling Hills Dr

City Conway State SC Zip Code 29526-9113

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2011

Transaction ID : 20109.C239

Amount of Each Receipt this Period
500.00

Receipt

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 34
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
ThadViers.com

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

Mailing Address 821 Riverbirch Drive

City State Zip Code
Conway SC 29526

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

Name of Employer Occupation
Caregivers of South Carolina Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 30 / 2011

Transaction ID : 20124.C285

Amount of Each Receipt this Period
500.00

Memo
[MEMO ITEM]
Partnership->Caregivers of South Carolina, LLC PARTNERSHIP

B. Full Name (Last, First, Middle Initial)
Mark Dean

Mailing Address 719 Luttie Rd

City State Zip Code
Myrtle Beach SC 29588-6008

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 17 / 2011

Transaction ID : 20105.C119

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 719 Luttie Rd

City State Zip Code
Myrtle Beach SC 29588-6008

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 20 / 2011

Transaction ID : 20105.C40

Amount of Each Receipt this Period
150.00

Receipt

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

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

250.00

**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 34
	<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)
ThadViers.com

A. Full Name (Last, First, Middle Initial)
Joe Favre

Mailing Address 3817 Camden Drive

City State Zip Code
Myrtle Beach SC 29588

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 09 / 2011

Transaction ID : 20105.C220

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Joe Favre

Mailing Address 3817 Camden Drive

City State Zip Code
Myrtle Beach SC 29588

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 27 / 2011

Transaction ID : 20105.C225

Amount of Each Receipt this Period
50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Grand Strand Surgical Associates

Mailing Address PO Box 1419

City State Zip Code
Murrells Inlet SC 29576-1419

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

Name of Employer Information Requested Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 20 / 2011

Transaction ID : 20105.C42

Amount of Each Receipt this Period
300.00

Receipt

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

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

550.00

**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 34
	<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)
ThadViers.com

A. Full Name (Last, First, Middle Initial)
Jerome Guanciale

Mailing Address **PO Box 1419**

City **Murrells Inlet** State **SC** Zip Code **29576-1419**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		20		2011

Transaction ID : 20131.C287

Amount of Each Receipt this Period
300.00

Memo
**[MEMO ITEM]
Partnership->Grand Strand Surgical Associates
PARTNERSHIP**

B. Full Name (Last, First, Middle Initial)
Natasha Hanna

Mailing Address **874 Denali Dr**

City **Conway** State **SC** Zip Code **29526-8739**

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		20		2011

Transaction ID : 20105.C38

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
Benjy 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 Information Requested
Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		20		2011

Transaction ID : 20105.C31

Amount of Each Receipt this Period
1000.00

Receipt

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 34
	<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)
ThadViers.com

A. Nigel Horonzy
 Full Name (Last, First, Middle Initial)
 Mailing Address 7421 N. Kings Hwy
 City Myrtle Beach State SC Zip Code 29572
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Information Requested Occupation Information Requested
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 21 / 2011
Transaction ID : 20105.C224
 Amount of Each Receipt this Period
 Receipt 250.00

B. Alex Hyman
 Full Name (Last, First, Middle Initial)
 Mailing Address 1208 3rd Ave
 City Conway State SC Zip Code 29526-5106
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Information Requested Occupation Information Requested
 Self Employed Attorney
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : 20109.C236
 Amount of Each Receipt this Period
 Receipt 500.00

C. Isaac Properties
 Full Name (Last, First, Middle Initial)
 Mailing Address 1004 8th Ave N
 City Myrtle Beach State SC Zip Code 29577-3848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Information Requested Occupation Information Requested
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 30 / 2011
Transaction ID : 20109.C238
 Amount of Each Receipt this Period
 Receipt 500.00

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 34
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) Danny Isaac		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011
Mailing Address 1004 8th Ave N		Transaction ID : 20124.C283
City Myrtle Beach	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Isaac Properties	Occupation Owner	Memo [MEMO ITEM] Partnership->Isaac Properties PARTNERSHIP
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) Christophe Johnson		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 17 / 2011
Mailing Address 232 Shoreward Dr		Transaction ID : 20105.C116
City Myrtle Beach	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) William Mills		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2011
Mailing Address 850 Denali Drive		Transaction ID : 20105.C221
City Conway	State SC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Coastal Orthopedics	Occupation Sugeon	Receipt
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7000.00	

SUBTOTAL of Receipts This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
ThadViers.com

Full Name (Last, First, Middle Initial) A. William Mills		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 31 / 2011	
Mailing Address 850 Denali Drive		Transaction ID : 20109.C248	
City Conway	State SC	Zip Code 29526	Amount of Each Receipt this Period Receipt 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Coastal Orthopedics	Occupation Sugeon		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 8000.00		

Full Name (Last, First, Middle Initial) B. John Molnar		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 20 / 2011	
Mailing Address 23 S Gate Rd		Transaction ID : 20105.C45	
City Myrtle Beach	State SC	Zip Code 29572-5622	Amount of Each Receipt this Period Receipt 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. Carroll Padgett		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2011	
Mailing Address 410 Homestead Dr		Transaction ID : 20109.C242	
City Loris	State SC	Zip Code 29569-3234	Amount of Each Receipt this Period Receipt 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

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

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

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NAME OF COMMITTEE (In Full)
ThadViers.com

A. Full Name (Last, First, Middle Initial)
Adam Parness

Mailing Address 315 73rd Ave N

City Myrtle Beach State SC Zip Code 29572-3827

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 20105.C33

Amount of Each Receipt this Period
 Receipt 500.00

B. Full Name (Last, First, Middle Initial)
Howard Rich

Mailing Address 1420 Walnut St Ste 1011

City Philadelphia State PA Zip Code 19102-4010

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 20105.C34

Amount of Each Receipt this Period
 Receipt 2500.00

C. Full Name (Last, First, Middle Initial)
The Sleep Inn

Mailing Address 108 Waccamaw Pines Dr

City Myrtle Beach State SC Zip Code 29579-0918

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 20105.C47

Amount of Each Receipt this Period
 Receipt 2500.00

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

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

5500.00

**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 34
	<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)
ThadViers.com

A. Full Name (Last, First, Middle Initial)
Murrell Smith

Mailing Address 2755 Windmill Dr

City Sumter State SC Zip Code 29150-2261

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

Name of Employer Self Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : 20109.C243

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Stephanie Turbeville

Mailing Address 3452 Forestbrook Rd

City Myrtle Beach State SC Zip Code 29588-7931

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 20105.C39

Amount of Each Receipt this Period
300.00

Receipt

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

Mailing Address 930 Mt. Gilead Road

City Murrells Inlet State SC Zip Code 29576

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 29 / 2011

Transaction ID : 20105.C228

Amount of Each Receipt this Period
250.00

Receipt

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 34
	<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)
ThadViers.com

A. Full Name (Last, First, Middle Initial)
Robert Weisberg

Mailing Address 1050 W Lake St

City Hollywood State FL Zip Code 33019-4824

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2011

Transaction ID : 20105.C27

Amount of Each Receipt this Period
 Receipt 1000.00

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

Mailing Address 1314 2nd Ave

City Conway State SC Zip Code 29526-5210

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

Name of Employer Information Requested Occupation Information Requested
 Self Employed Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 20 / 2011

Transaction ID : 20105.C44

Amount of Each Receipt this Period
 Receipt 500.00

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

Mailing Address 1275 21st Ave N

City Myrtle Beach State SC Zip Code 29577-7514

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

Name of Employer Information Requested Occupation Information Requested
 Self Employed Physician

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2011

Transaction ID : 20105.C26

Amount of Each Receipt this Period
 Receipt 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: PAGE 16 OF 34
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
ThadViers.com

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

Mailing Address 1619 Pineview Rd.

City Charleston State SC Zip Code 29407

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2011

Transaction ID : 20105.C211

Amount of Each Receipt this Period
 Receipt 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

20600.00

**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 17 OF 34
	<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)
ThadViers.com

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

Mailing Address **Alpine Rd Interstate 20**

City **Columbia** State **SC** Zip Code **29219-0001**

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

Name of Employer _____ Occupation _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2011

Transaction ID : 20105.C122

Amount of Each Receipt this Period

5000.00

Receipt

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

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

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

Amount of Each Receipt this Period

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

Mailing Address _____

City _____ State _____ Zip Code _____

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____

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

Amount of Each Receipt this Period

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

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

_____ **5000.00**

_____ **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 18 OF 34
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ThadViers.com

A. Full Name (Last, First, Middle Initial)
Thad Viers

Mailing Address 1452 Forestbrook Rd

City Myrtle Beach State SC Zip Code 29579-7953

FEC ID number of contributing federal political committee. **C** C00502872

Name of Employer Self Employed Occupation Attorney

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date 21320.71

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2011

Transaction ID : 20105.C89

Amount of Each Receipt this Period
 2500.00

Loans Made/Guaranteed by Cand.

NOTE: Personal Funds

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2500.00

2500.00

**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 19 OF 34			
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Heather Bennett		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 2188 Brewster Dr Unit 615		Amount of Each Disbursement this Period 750.00
City Myrtle Beach	State SC	Zip Code 29577-1765
Purpose of Disbursement Salary	Category/Type SALARY	
Candidate Name	Transaction ID : 20124.E73	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Heather Bennett		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2011
Mailing Address 2188 Brewster Dr Unit 615		Amount of Each Disbursement this Period 924.01
City Myrtle Beach	State SC	Zip Code 29577-1765
Purpose of Disbursement Salary	Category/Type SALARY	
Candidate Name	Transaction ID : 20105.E20	
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. Heather Bennett		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2011
Mailing Address 2188 Brewster Dr Unit 615		Amount of Each Disbursement this Period 144.10
City Myrtle Beach	State SC	Zip Code 29577-1765
Purpose of Disbursement Office Supplies	Category/Type OFFICE SUPPLIES	
Candidate Name	Transaction ID : 20105.E6	
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).....	1818.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 34			
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Heather Bennett		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2011
Mailing Address 2188 Brewster Dr Unit 615		Amount of Each Disbursement this Period 915.00 Transaction ID : 20105.E23
City Myrtle Beach State SC Zip Code 29577-1765	Purpose of Disbursement Salary 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:	SALARY

Full Name (Last, First, Middle Initial) B. Heather Bennett		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2011
Mailing Address 2188 Brewster Dr Unit 615		Amount of Each Disbursement this Period 900.00 Transaction ID : 20105.E12
City Myrtle Beach State SC Zip Code 29577-1765	Purpose of Disbursement Salary 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:	SALARY

Full Name (Last, First, Middle Initial) C. Heather Bennett		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2011
Mailing Address 2188 Brewster Dr Unit 615		Amount of Each Disbursement this Period 900.00 Transaction ID : 20105.E41
City Myrtle Beach State SC Zip Code 29577-1765	Purpose of Disbursement Salary 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:	SALARY

SUBTOTAL of Disbursements This Page (optional).....	2715.00
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 21 OF 34			
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Heather Bennett		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2011
Mailing Address 2188 Brewster Dr Unit 615		Amount of Each Disbursement this Period 1800.00
City Myrtle Beach	State SC	Zip Code 29577-1765
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Transaction ID : 20105.E32	
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)	SALARY
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol City Club		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2011
Mailing Address 1201 Main St Ste 2500		Amount of Each Disbursement this Period 1184.93
City Columbia	State SC	Zip Code 29201-3296
Purpose of Disbursement Event Facility Rental	Category/Type	
Candidate Name	Transaction ID : 20105.E19	
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)	EVENT FACILITY RENTAL
State: District:		

Full Name (Last, First, Middle Initial) c. Carolina Catering Company		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2011
Mailing Address 925 Sumter St		Amount of Each Disbursement this Period 1386.00
City Columbia	State SC	Zip Code 29201-3961
Purpose of Disbursement Event Catering	Category/Type	
Candidate Name	Transaction ID : 20105.E30	
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)	EVENT CATERING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4370.93
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 22 OF 34	
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Donehue Direct		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2011
Mailing Address 1202 Main St Ste C		Amount of Each Disbursement this Period 9810.00
City Columbia State SC Zip Code 29201-6219	Purpose of Disbursement Direct Mail Production	Transaction ID : 20105.E25
Candidate Name	Category/Type	DIRECT MAIL PRODUCTION
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Elizabeth Donehue Fundraising		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2011
Mailing Address PO Box 7431		Amount of Each Disbursement this Period 3671.77
City Columbia State SC Zip Code 29202-7431	Purpose of Disbursement Fundraising Consulting	Transaction ID : 20105.E22
Candidate Name	Category/Type	FUNDRAISING CONSULTING
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. Russell Fry		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 7201 Enterprise Rd		Amount of Each Disbursement this Period 970.00
City Myrtle Beach State SC Zip Code 29588-6882	Purpose of Disbursement Salary	Transaction ID : 20105.E34
Candidate Name	Category/Type	SALARY
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).....	14451.77
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 34			
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Russell Fry		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2011
Mailing Address 7201 Enterprise Rd		Amount of Each Disbursement this Period 937.00
City Myrtle Beach	State SC	Zip Code 29588-6882
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Transaction ID : 20105.E35	
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:	SALARY	

Full Name (Last, First, Middle Initial) B. Horry Telephone		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2011
Mailing Address 2201 E Highway 501		Amount of Each Disbursement this Period 279.72
City Conway	State SC	Zip Code 29526-9506
Purpose of Disbursement Telephone Expense	Category/Type	
Candidate Name	Transaction ID : 20105.E21	
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:	TELEPHONE EXPENSE	

Full Name (Last, First, Middle Initial) c. Horry Telephone		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address 2201 E Highway 501		Amount of Each Disbursement this Period 775.23
City Conway	State SC	Zip Code 29526-9506
Purpose of Disbursement Telephone	Category/Type	
Candidate Name	Transaction ID : 20105.E66	
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:	TELEPHONE	

SUBTOTAL of Disbursements This Page (optional).....	1991.95
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 24 OF 34			
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Jamestown Associates			Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2011
Mailing Address 5 Mapleton Rd Ste 300			Amount of Each Disbursement this Period 1825.80
City Princeton	State NJ	Zip Code 08540-9646	Transaction ID : 20105.E1
Purpose of Disbursement Media Consulting		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	MEDIA CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Jamestown Associates			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address 5 Mapleton Rd Ste 300			Amount of Each Disbursement this Period 577.93
City Princeton	State NJ	Zip Code 08540-9646	Transaction ID : 20105.E31
Purpose of Disbursement Printing		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	PRINTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Kampeska Communications			Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2011
Mailing Address 2108 Broad St			Amount of Each Disbursement this Period 2025.00
City Camden	State SC	Zip Code 29020-2445	Transaction ID : 20105.E44
Purpose of Disbursement Signs		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	SIGNS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4428.73
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 25 OF 34			
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Jill Kelso		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 4434 Maypop Trl		Amount of Each Disbursement this Period 2200.00
City Murrells Inlet	State SC	
Zip Code 29576-6369	Purpose of Disbursement Salary	Transaction ID : 20124.E74
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)	SALARY
State: District:		

Full Name (Last, First, Middle Initial) B. Jill Kelso		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2011
Mailing Address 4434 Maypop Trl		Amount of Each Disbursement this Period 188.32
City Murrells Inlet	State SC	
Zip Code 29576-6369	Purpose of Disbursement Travel Reimbursement	Transaction ID : 20105.E3
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)	TRAVEL REIMBURSEMENT
State: District:		

Full Name (Last, First, Middle Initial) C. Jill Kelso		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2011
Mailing Address 4434 Maypop Trl		Amount of Each Disbursement this Period 1250.00
City Murrells Inlet	State SC	
Zip Code 29576-6369	Purpose of Disbursement Salary	Transaction ID : 20105.E5
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)	SALARY
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3638.32
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 26 OF 34	
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Jill Kelso		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2011
Mailing Address 4434 Maypop Trl		Amount of Each Disbursement this Period 1250.00 Transaction ID : 20105.E24
City Murrells Inlet State SC Zip Code 29576-6369	Purpose of Disbursement Salary 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:	SALARY

Full Name (Last, First, Middle Initial) B. Jill Kelso		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2011
Mailing Address 4434 Maypop Trl		Amount of Each Disbursement this Period 1250.00 Transaction ID : 20105.E13
City Murrells Inlet State SC Zip Code 29576-6369	Purpose of Disbursement Salary 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:	SALARY

Full Name (Last, First, Middle Initial) C. Jill Kelso		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2011
Mailing Address 4434 Maypop Trl		Amount of Each Disbursement this Period 704.75 Transaction ID : 20105.E43
City Murrells Inlet State SC Zip Code 29576-6369	Purpose of Disbursement Airfare/Office Supplies 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:	AIRFARE/OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional).....	3204.75
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 34			
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Jill Kelso		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2011
Mailing Address 4434 Maypop Trl		Amount of Each Disbursement this Period 1250.00 Transaction ID : 20105.E42
City Murrells Inlet State SC Zip Code 29576-6369	Purpose of Disbursement Salary	
Candidate Name	Category/Type	SALARY
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. Partisanalytics LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2011
Mailing Address		Amount of Each Disbursement this Period 9000.00 Transaction ID : 20105.E4
City State Zip Code	Purpose of Disbursement Web Services	
Candidate Name	Category/Type	WEB SERVICES
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. Piryx		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 144 2nd St Fl 1		Amount of Each Disbursement this Period 49.50 Transaction ID : 20105.E54
City San Francisco State CA Zip Code 94105-3718	Purpose of Disbursement Transaction Fees	
Candidate Name	Category/Type	TRANSACTION FEES
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).....	10299.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 34			
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address 144 2nd St Fl 1		Amount of Each Disbursement this Period 11.04
City San Francisco	State CA	Zip Code 94105-3718
Purpose of Disbursement Transaction Fees	Category/Type	
Candidate Name	Transaction ID : 20105.E57	
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)	TRANSACTION FEES
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address 144 2nd St Fl 1		Amount of Each Disbursement this Period 121.50
City San Francisco	State CA	Zip Code 94105-3718
Purpose of Disbursement Transaction Fees	Category/Type	
Candidate Name	Transaction ID : 20105.E60	
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)	TRANSACTION FEES
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011
Mailing Address 144 2nd St Fl 1		Amount of Each Disbursement this Period 11.80
City San Francisco	State CA	Zip Code 94105-3718
Purpose of Disbursement Transaction Fees	Category/Type	
Candidate Name	Transaction ID : 20120.E69	
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)	TRANSACTION FEES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	144.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 34			
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011
Mailing Address 144 2nd St Fl 1		Amount of Each Disbursement this Period 4.50
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement Transaction Fees	Transaction ID : 20120.E70
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)	TRANSACTION FEES
State: District:		

Full Name (Last, First, Middle Initial) B. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2011
Mailing Address 144 2nd St Fl 1		Amount of Each Disbursement this Period 20.25
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement Transaction Fees	Transaction ID : 20120.E71
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)	TRANSACTION FEES
State: District:		

Full Name (Last, First, Middle Initial) C. Piryx		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011
Mailing Address 144 2nd St Fl 1		Amount of Each Disbursement this Period 60.75
City San Francisco	State CA	
Zip Code 94105-3718	Purpose of Disbursement Transaction Fees	Transaction ID : 20109.E67
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)	TRANSACTION FEES
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	85.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 34			
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Signature Custom Signs		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 6294 Highway 707 Unit C		Amount of Each Disbursement this Period 216.00 Transaction ID : 20105.E64
City Myrtle Beach State SC Zip Code 29588-7376	Purpose of Disbursement Signs	
Candidate Name	Category/Type	SIGNS
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. The Cannon Group		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2011
Mailing Address 1622 16th Ave S		Amount of Each Disbursement this Period 1000.00 Transaction ID : 20105.E36
City Nashville State TN Zip Code 37212-2911	Purpose of Disbursement Strategy Consulting	
Candidate Name	Category/Type	STRATEGY CONSULTING
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. The Cannon Group		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 1622 16th Ave S		Amount of Each Disbursement this Period 1280.02 Transaction ID : 20105.E61
City Nashville State TN Zip Code 37212-2911	Purpose of Disbursement Strategy Consulting	
Candidate Name	Category/Type	STRATEGY CONSULTING
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).....	2496.02
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 31 OF 34		
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. USPS		<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>11</td> <td></td> <td>10</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		10		2011
M M	/	D D	/	Y Y Y Y								
11		10		2011								
Mailing Address 505 N Kings Hwy		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>29577-3978</td> </tr> </table>		City	State	Zip Code	Myrtle Beach	SC	29577-3978	<table border="1"> <tr> <td>44.00</td> </tr> </table>	44.00			
City	State	Zip Code										
Myrtle Beach	SC	29577-3978										
44.00												
Purpose of Disbursement Postage		Transaction ID : 20105.E28										
Candidate Name		Category/Type										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		POSTAGE										
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. USPS		<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>11</td> <td></td> <td>20</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		20		2011
M M	/	D D	/	Y Y Y Y								
11		20		2011								
Mailing Address 505 N Kings Hwy		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>29577-3978</td> </tr> </table>		City	State	Zip Code	Myrtle Beach	SC	29577-3978	<table border="1"> <tr> <td>176.00</td> </tr> </table>	176.00			
City	State	Zip Code										
Myrtle Beach	SC	29577-3978										
176.00												
Purpose of Disbursement Postage		Transaction ID : 20105.E38										
Candidate Name		Category/Type										
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		POSTAGE										
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
c. Brenda Viers		<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>10</td> <td></td> <td>06</td> <td></td> <td>2011</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		06		2011
M M	/	D D	/	Y Y Y Y								
10		06		2011								
Mailing Address 4912 Signature Dr Apt 102		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>29579-0972</td> </tr> </table>		City	State	Zip Code	Myrtle Beach	SC	29579-0972	<table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00			
City	State	Zip Code										
Myrtle Beach	SC	29579-0972										
2500.00												
Purpose of Disbursement		Transaction ID : 20105.E17										
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).....	2720.00
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 32 OF 34	
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial) A. Thad Viers		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 1452 Forestbrook Rd		Amount of Each Disbursement this Period 7000.00
City Myrtle Beach	State SC	Zip Code 29579-7953
Purpose of Disbursement Expense Reimbursement	Category/Type	
Candidate Name	EXPENSE REIMBURSEMENT	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Thad Viers		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2011
Mailing Address 1452 Forestbrook Rd		Amount of Each Disbursement this Period 2500.00
City Myrtle Beach	State SC	Zip Code 29579-7953
Purpose of Disbursement Expense Reimbursement	Category/Type	
Candidate Name	EXPENSE REIMBURSEMENT	
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. Walmart		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2011
Mailing Address Seaboard St.		Amount of Each Disbursement this Period 228.31
City Myrtle Beach	State SC	Zip Code 29577-
Purpose of Disbursement Office Supplies	Category/Type	
Candidate Name	OFFICE SUPPLIES	
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).....	9728.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 34			
	<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)
ThadViers.com

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. Win With Word Press		M M / D D / Y Y Y Y 10 / 06 / 2011	
Mailing Address 1202 Main St		Amount of Each Disbursement this Period	
City Columbia State SC Zip Code 29201-6219		2536.28	
Purpose of Disbursement Website Design		Transaction ID : 20105.E2	
Candidate Name		WEBSITE DESIGN	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: District:		Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B.		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	
State: District:		Other (specify)	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		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	
State: District:		Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	2536.28
TOTAL This Period (last page this line number only).....	64629.51

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)
ThadViers.com

Transaction ID : LS20105.C89

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

[PERSONAL FUNDS]

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
1452 Forestbrook Rd

City State ZIP Code
Myrtle Beach SC 29579-7953

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
10500.00 0.00 10500.00

TERMS

Date Incurred Date Due Interest Rate Secured:
09 / 29 / 2011 12 / 31 / 2012 0.00 % (apr) Yes No

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

1. Full Name (Last, First, Middle Initial) Thad Viers	Name of Employer Self Employed
Mailing Address 1452 Forestbrook Rd	Occupation Attorney
City State ZIP Code Myrtle Beach SC 29579-7953	Amount Guaranteed Outstanding: 0.00 Transaction ID : LB20105.C89
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)..... ▶ 10500.00
TOTALS This Period (last page in this line only)..... ▶ 10500.00

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