

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

David Thomas for Congress

ADDRESS (number and street) 23 Wade Hampton Blvd

Check if different than previously reported. (ACC)

Greenville SC 29609

2. **FEC IDENTIFICATION NUMBER** C00462705

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

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

SC 04

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

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on [] [] [] in the State of []

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

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

Election on [] [] [] in the State of []

5. Covering Period 10 01 2010 through 12 31 2010

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 Dell Baker

Signature of Treasurer Electronically Filed by Dell Baker Date 01 24 2011

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

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

2 / 21

Write or Type Committee Name

David Thomas for Congress

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	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)).....	4900.00	194829.00
(b) Total Contribution Refunds (from Line 20(d)).....	2400.00	2400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	2500.00	192429.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	2319.45	238510.96
(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)).....	2319.45	238510.96
8. Cash on Hand at Close of Reporting Period (from Line 27).....	4664.02	
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).....	48073.83	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

POST-ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

David Thomas for Congress

Report Covering the Period: From: To:

I. RECEIPTS

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> <input type="text" value="02"/> <input type="text" value="2010"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> <input type="text" value="03"/> <input type="text" value="2010"/> (date after general election) through <input type="text" value="12"/> <input type="text" value="31"/> <input type="text" value="2010"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other than Political Committees			
(i) Itemized (Use Schedule A)	<input type="text" value="2400.00"/>	<input type="text" value="147225.00"/>	<input type="text" value="2400.00"/>
(ii) Unitemized	<input type="text" value="0.00"/>	<input type="text" value="10530.00"/>	<input type="text" value="0.00"/>
(iii) Total of contributions from individuals	<input type="text" value="2400.00"/>	<input type="text" value="157755.00"/>	<input type="text" value="2400.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees	<input type="text" value="2500.00"/>	<input type="text" value="34200.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	2874.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
4900.00	194829.00	2400.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
2400.00	61810.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
2400.00	61810.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
1762.75	2391.60	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
9062.75	259030.60	2400.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Write or Type Committe Name

David Thomas for Congress

Report the covering period

From:

MM 10 DD 01 YYYY 2010

To:

MM 12 DD 31 YYYY 2010

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
2319.45	238510.96	1569.45
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	14286.17	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	14286.17	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
2400.00	2400.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST ELECTION DETAILED
SUMMARY PAGE**

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
(c) Other political committees (such as PACs)		
0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))		
2400.00	2400.00	0.00
21. OTHER DISBURSEMENTS		
0.00	0.00	0.00
22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)		
4719.45	255197.13	1569.45

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

2500.00	192429.00	2400.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

2319.45	238510.96	1569.45
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	320.72
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	9062.75
25. SUBTOTAL(add Line 23 and Line 24)	9383.47
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	4719.45
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	4664.02

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 21
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
David Thomas for Congress

A.

Full Name (Last, First, Middle Initial)
Paul Farago

Mailing Address PO Box 8907

City State Zip Code
Asheville NC 28814-8907

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

Name of Employer Self-employed Occupation
Acupunturist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.5815

Amount of Each Receipt this Period
2400.00

2400.00

SUBTOTAL of Receipts This Page (optional)	▶	2400.00
TOTAL This Period (last page this line number only)	▶	2400.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 21
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) David Thomas for Congress
--

A.

Full Name (Last, First, Middle Initial) DUKE ENERGY CORPORATION PAC		Date of Receipt																				
Mailing Address 400 South Tryon Street ST06F		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
1	1		0	1		2	0	1	0													
City	State	Zip Code																				
Charlotte	NC	28285																				
FEC ID number of contributing federal political committee.		Transaction ID: SA11C.5818																				
C C00083535		Amount of Each Receipt this Period																				
Name of Employer		2500.00																				
Occupation																						
Receipt For: 2010	Election Cycle-to-Date ▼																					
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		2500.00																				
<input type="checkbox"/> Other (specify) ▼																						

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
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 9 / 21
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
David Thomas for Congress

A.

Full Name (Last, First, Middle Initial) Sen. David Thomas		Date of Receipt
Mailing Address 23 Wade Hampton Blvd		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
City	State	Zip Code
Greenville	SC	29609
FEC ID number of contributing federal political committee.		Transaction ID: SA13A.5810
<input type="text" value="C"/> <input type="text" value="H0SC04182"/>		Amount of Each Receipt this Period
		<input type="text" value="2400.00"/>
Name of Employer Moore, Taylor, & Thomas/SC Sen	Occupation Candidate	
Receipt For: 2010	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	<input type="text" value="69759.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2400.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="2400.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 21
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
David Thomas for Congress

A.

Full Name (Last, First, Middle Initial) Michele Wilson et al		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 630 East Washington St		Transaction ID: SA15.5837
City Greenville	State SC	Zip Code 29606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Bradshaw, Gordon & Clinkscapes	Occupation CPA	In-kind - Exempt Acct Svc (Wages) 06/09-01/11
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

B.

Full Name (Last, First, Middle Initial) WYFF		Date of Receipt MM / DD / YYYY 10 / 04 / 2010
Mailing Address 505 Rutherford Street		Transaction ID: SA15.5808
City Greenville	State SC	Zip Code 29609
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1012.75
Name of Employer	Occupation	Refund
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1012.75	

SUBTOTAL of Receipts This Page (optional)	1762.75
TOTAL This Period (last page this line number only)	1762.75

**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 11 / 21

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

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NAME OF COMMITTEE (In Full)
David Thomas for Congress

A.

Full Name (Last, First, Middle Initial)
First Citizen's

Mailing Address 800 East North Street

City Greenville State SC Zip Code 29601

Purpose of Disbursement
Credit Card Expenses-No vendors exceeded \$200 for this credit card.

001

Candidate Name
David Thomas for Congress

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: SC District: 04

Transaction ID: SB17.5830

Date of Disbursement

11 / 29 / 2010

Amount of Each Disbursement this Period

1569.45

B.

Full Name (Last, First, Middle Initial)
Michele Wilson et al

Mailing Address 630 East Washington St

City Greenville State SC Zip Code 29606

Purpose of Disbursement
In-kind - Exempt Acct Svc (Wages) 06/09-01/11

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.5838

Date of Disbursement

10 / 14 / 2010

Amount of Each Disbursement this Period

750.00

SUBTOTAL of Disbursements This Page (optional)

2319.45

TOTAL This Period (last page this line number only)

2319.45

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 21

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

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NAME OF COMMITTEE (In Full)
David Thomas for Congress

A.

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

Mailing Address 1420 Walnut Street

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement

Candidate Name
David Thomas for Congress

Office Sought: House
 Senate
 President

State: SC District: 04

Disbursement For: 2010
 Primary General
 Other (specify) ▼

010
Category/
Type

Transaction ID: SB20A.5828

Date of Disbursement

10 / 25 / 2010

Amount of Each Disbursement this Period

2400.00

SUBTOTAL of Disbursements This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

2400.00

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
David Thomas for Congress

Transaction ID: SC/10.4142

LOAN SOURCE Full Name (Last, First, Middle Initial)
Sen. David Thomas

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 23 Wade Hampton Blvd

City Greenville State SC ZIP Code 29609

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	101.17	2898.83

TERMS

Date Incurred: Date Due: Interest Rate: % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="2898.83"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

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

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
David Thomas for Congress

Transaction ID: SC/10.4186

LOAN SOURCE Full Name (Last, First, Middle Initial)
Sen. David Thomas

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 23 Wade Hampton Blvd

City Greenville State SC ZIP Code 29609

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

TERMS

Date Incurred: MM 06 DD 02 YY 2009 Date Due: None Interest Rate: 0.0000 % (apr) Secured: Yes No

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

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

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

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

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER: (check only one) 13a 13b

LOANS

NAME OF COMMITTEE (In Full)
David Thomas for Congress

Transaction ID: SC/10.5288

LOAN SOURCE Full Name (Last, First, Middle Initial) Sen. David Thomas - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 23 Wade Hampton Blvd	
City Greenville State SC ZIP Code 29609	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	9185.00	30815.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 0 5 D D 1 4 Y Y Y Y 2 0 1 0	None	5.25 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="30815.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
David Thomas for Congress

Transaction ID: SC/10.5437

LOAN SOURCE Full Name (Last, First, Middle Initial)
Sen. David Thomas

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 23 Wade Hampton Blvd

City Greenville State SC ZIP Code 29609

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
7000.00	0.00	7000.00

TERMS

Date Incurred: MM DD YYYY Date Due: Interest Rate: % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)	<input type="text" value="7000.00"/>
TOTALS This Period (last page in this line only)	<input type="text"/>

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

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
David Thomas for Congress

Transaction ID: SC/10.5568

LOAN SOURCE Full Name (Last, First, Middle Initial)
Sen. David Thomas

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 23 Wade Hampton Blvd

City Greenville State SC ZIP Code 29609

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

TERMS

Date Incurred: M M 06 D D 14 Y Y Y Y 2010 Date Due: none Interest Rate: 0.0000 % (apr) Secured: Yes No

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

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

SUBTOTALS This Period This Page (optional)	▶	3000.00
TOTALS This Period (last page in this line only)	▶	

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

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
David Thomas for Congress

Transaction ID: SC/10.5750

LOAN SOURCE Full Name (Last, First, Middle Initial)
Sen. David Thomas

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 23 Wade Hampton Blvd

City Greenville State SC ZIP Code 29609

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
600.00	0.00	600.00

TERMS

Date Incurred: MM DD YY YY Date Due: Interest Rate: 0.0000 % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	▶	600.00
TOTALS This Period (last page in this line only)	▶	[]

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

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
David Thomas for Congress

Transaction ID: SC/10.5753

LOAN SOURCE Full Name (Last, First, Middle Initial)
Sen. David Thomas

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address 23 Wade Hampton Blvd

City Greenville State SC ZIP Code 29609

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
710.00	0.00	710.00

TERMS

Date Incurred: MM 07 DD 29 YY 2010 Date Due: Interest Rate: 0.0000 % (apr) Secured: Yes No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	710.00
TOTALS This Period (last page in this line only)	

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

SCHEDULE C (FEC Form 3)

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

LOANS

FOR LINE NUMBER:
(check only one) 13a
 13b

NAME OF COMMITTEE (In Full)
David Thomas for Congress

Transaction ID: SC/10.5810

LOAN SOURCE Full Name (Last, First, Middle Initial) Sen. David Thomas		Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 23 Wade Hampton Blvd		
City Greenville	State SC	ZIP Code 29609

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2400.00	0.00	2400.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 1 0 D D 2 2 Y Y Y Y 2 0 1 0	None	0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
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)	2400.00
TOTALS This Period (last page in this line only)	47523.83

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
David Thomas for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Moore, Taylor, and Thomas, Inc.			Nature of Debt (Purpose): Reimburse phone, fax, internet, copy machine, electric, gas
Mailing Address 23 Wade Hampton Blvd			
City Greenville	State SC	ZIP Code 29609	

Outstanding Balance Beginning This Period <input type="text" value="300.00"/>		Transaction ID: SD10.5255	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="300.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Moore, Taylor, and Thomas, Inc.			Nature of Debt (Purpose): Utilities
Mailing Address 23 Wade Hampton Blvd			
City Greenville	State SC	ZIP Code 29609	

Outstanding Balance Beginning This Period <input type="text" value="100.00"/>		Transaction ID: SD10.5372	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="100.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Moore, Taylor, and Thomas, Inc.			Nature of Debt (Purpose): Reimburse phone, fax, copy machine, electric, gas
Mailing Address 23 Wade Hampton Blvd			
City Greenville	State SC	ZIP Code 29609	

Outstanding Balance Beginning This Period <input type="text" value="150.00"/>		Transaction ID: SD10.5703	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="150.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="550.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="550.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="47523.83"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="48073.83"/>