

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL TIM SCOTT FOR SENATE			
ADDRESS (number and street) 1405 ASHLEY RIVER RD			
CITY CHARLESTON	STATE SC	ZIP CODE 29407-5305	
2. NAME OF CANDIDATE SCOTT, TIMOTHY, E., ,		3. OFFICE SOUGHT (State and District) Senate SC	
		4. FEC IDENTIFICATION NUMBER C00540302	
5. IS THIS AN AMENDMENT? <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME MAYES, JAMES, , ,			
Name of Employer RETIRED			
Date (month, day, year) 06/09/2022			
Amount 2500.00			
MAILING ADDRESS PO BOX 490			
Transaction ID : 6A19C390F91C649CE			
CITY MAYESVILLE	STATE SC	ZIP CODE 29104-0490	Occupation RETIRED
B. FULL NAME DONALDSON, DAVID, , ,			
Name of Employer RETIRED			
Date (month, day, year) 06/09/2022			
Amount 2500.00			
MAILING ADDRESS 3010 17TH ST SE			
Transaction ID : 61DD8D4A0FE6742A			
CITY AUBURN	STATE WA	ZIP CODE 98092-6454	Occupation RETIRED
C. FULL NAME			
Name of Employer			
Date (month, day, year)			
Amount			
MAILING ADDRESS			
CITY	STATE	ZIP CODE	Occupation
D. FULL NAME			
Name of Employer			
Date (month, day, year)			
Amount			
MAILING ADDRESS			
CITY	STATE	ZIP CODE	Occupation
E. FULL NAME			
Name of Employer			
Date (month, day, year)			
Amount			
MAILING ADDRESS			
CITY	STATE	ZIP CODE	Occupation
SIGNATURE (optional) WIGGINS, STACY, , ,		DATE 06/10/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
[Electronically Filed]			

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F6N

Transaction ID :

ACCORDING TO FEC REGULATIONS, THE THRESHOLD AMOUNT FOR FORM 6 IS \$1,000.00

Form/Schedule:

Transaction ID: