PAGE 1 / 4

## 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 stree	<sup>et)</sup> 1405 ASHLEY RIV	ER RD					
CITY STATE CHARLESTON SC				ZIP COD 2940	E 7-5305		
2. NAME OF CANDIDATE			3. OFFICE SOUGHT (State and District)		4. FEC IDENTIFICATION NUMBER		
SCOTT, TIMOTHY,	E., ,		Senate	:	SC	C00540302	
5. IS THIS AN AMENDMENT?	X NO, THIS IS A	NEW FILING	YES, IT AMEN	DS THE I	NOTICE FILED ON	//	,
A. FULL NAME TURNBULL, JOHN, , ,			Name of Employer ANILES PACIFIC INC		Date (month, day, year)	Amount	
MAILING ADDRESS PO BOX 407			Transaction ID : 6B1324D43C6F84D21			11/02/2022	1500.00
CITY	STATE	ZIP CODE	Occupation				
HUBBARD	OR	97032-0407	PRESIDENT				
B. FULL NAME WITGES, DEBRA, , ,			Name of Employer RETIRED		Date (month, day, year)	Amount	
MAILING ADDRESS	-		_			11/02/2022	1000.00
1315 WENTWORTH CT			Transaction ID : 6430792A3EE594C74				
CITY	STATE	ZIP CODE	Occupation				
HOUSTON	ТХ	77055-6874	RETIRED				
C. FULL NAME		11000 0014	Name of Emplo	Wer		Date (month,	Amount
ALLYN, WILLIAM, F., ,			RETIRED		day, year)		
MAILING ADDRESS 525 GULF SHORE BLVD N			Transaction ID : 641A038F22FE34599		11/02/2022	1000.00	
CITY	STATE	ZIP CODE	Occupation				
NAPLES	FL	34102-5550	RETIRED				
D. FULL NAME MERRITT, CYRUS, MARK, ,			Name of Employer RETIRED		Date (month, day, year)	Amount	
MAILING ADDRESS			_	-		11/02/2022	1000.00
MAILING ADDRESS 59 SEAGRASS LN			Transaction ID : 6A2E9212665454ED5				
CITY	STATE	ZIP CODE	Occupation				
ISLE OF PALMS	SC	29451-3856	RETIRED				
E. FULL NAME SERRANO, JOYCE, , ,			Name of Employer INFO REQUESTED		Date (month, day, year)	Amount	
MAILING ADDRESS 1161 WESTWAY DR					11/02/2022	1000.00	
CITY	STATE	ZIP CODE	Occupation				
SARASOTA	FL	34236-1118	INFO REQUESTED				
SIGNATURE (optional)	· <b>-</b>	0.200 1110			, DATE	En faith 1	
WIGGINS, STACY, , ,			DATE         For further information condition           11/04/2022         Federal Election Commission           [Electronically Filed]         999 E Street, NW, Washington, D           Toll Free 800-424-9530, Local 2020         Toll Free 800-424-9530, Local 2020		ection Commission /, Washington, DC 20463		

			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.	FEC	FORM 6 (Revised 03/2016)
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## :97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F6N Transaction ID :

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

Form/Schedule: Transaction ID:

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1. NAME OF COMMITTEE IN FULL TIM SCOTT FOR SENATE			]		
ADDRESS (number and street) 1405 ASHLEY RIVER RD			-		
CITY, STATE, and ZIP CODE					
CHARLESTON		SC 29407-5305	continuation page		
2. NAME OF CANDIDATE	:	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION NUMBER		
SCOTT, TIMOTHY, E., ,		Senate SC	C00540302		
5. IS THIS AN AMENDMENT?		YES, IT AMENDS THE NOTICE FILED ON	///		
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	N	lame of Employer	Date (month,	Amount	
MORGAN, JENNIFER, , ,	В	BLACKSTONE	day, year)		
7 BRIDLE LN			11/02/2022	2000.00	
	Tr	Transaction ID : 697ABDA9DDB26458F9C(			
NEWTOWN SQUARE PA 190	073-1138				
		SENIOR MANAGING DIRECTOR	Date (month,	Amount	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Jame of Employer	day, year)	Amount	
ZORE, DIANE, , ,	R	RETIRED			
2505 W DEAN RD			11/02/2022	1000.00	
	Tr	ransaction ID : 60EEB82E69176467	F9F8		
	217 2010	Decupation			
RIVER HILLS WI 532	217-2010 F	RETIRED			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	N	lame of Employer	Date (month,	Amount	
REINER, KEN, , ,	R	REINER COMMUNITIES	day, year)		
			11/02/2022	1000.00	
26392 DAPPLE GREY DR	-				
		ransaction ID : 6728C2199259C4E5	2969		
LAGUNA HILLS CA 926	CE0 E707	AFFORDABLE HOUSING			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	N	lame of Employer	Date (month,	Amount	
GAYLER, WILLIAM, L., ,	J	ESUS	day, year)		
			11/02/2022	1000.00	
10015 US HIGHWAY 441		ransaction ID : 62E346FCDF7D242			
		Decupation			
BOYNTON BEACH FL 334		FOOT SOLDIER			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	N	lame of Employer	Date (month,	Amount	
LICHTENBERGER, HORST, WILLIA	<b>\М,,</b>   R	RETIRED	day, year)		
			11/02/2022	2900.00	
508 NW WINTERS CREEK RD	<b>-</b>	ransaction ID + 6DB0044EDB24249	22419		
		Transaction ID : 6DB00A1FDB2134833A18 Occupation			
PALM CITY FL 34		RETIRED			



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1. NAME OF COMMITTEE IN FULL TIM SCOTT FOR SI	=NATF			
	D5 ASHLEY RIVER RD		-	
CITY, STATE, and ZIP CODE			-	
CHARLESTON		SC 29407-5305	continuation	page
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION N	NUMBER
SCOTT, TIMOTHY, E., ,		Senate SC	C00540302	
5. IS THIS AN AMENDMENT?	NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON	//	
A. FULL NAME, MAILING ADDRESS AND	ZIP CODE	Name of Employer	Date (month,	Amount
FINANCIAL SERVIC	ES FORUM PAC		day, year)	
601 13TH ST NW			11/02/2022	1000.00
STE 750		Transaction ID : 679A2018357BF4F	0FBC3	
WASHINGTON	DC 20005-3807	Occupation		
B. FULL NAME, MAILING ADDRESS AND	ZIP CODE	Name of Employer	Date (month,	Amount
LENDINGCLUB CORPORAT PAC)	TION PAC (LENDINGCLUB		day, year)	
,			11/02/2022	1000.00
595 MARKET ST		Transaction ID : 639808964A76547A	207F	
		Occupation		
SAN FRANCISCO	CA 94105-2802			
C. FULL NAME, MAILING ADDRESS AND	ZIP CODE	Name of Employer	Date (month,	Amount
TE CONNECTIVITY,	INC. PAC (TEPAC)		day, year)	2500.00
601 13TH ST NW			11/02/2022	2500.00
STE 850		Transaction ID : 640E4E84F9CF445	ADB7C	
WASHINGTON	DC 20005-3807	Occupation		
	-		Data (manth	Amount
D. FULL NAME, MAILING ADDRESS AND WESTERN ALLIANCE BANG (WABPAC)		Name of Employer	Date (month, day, year)	Amount
1 E WASHINGTON ST			11/02/2022	1000.00
STE 1400		Transaction ID : 6582230DCFA7140	0FA73	
		Occupation	_	
PHOENIX	AZ 85004-2559			
E. FULL NAME, MAILING ADDRESS AND	ZIP CODE	Name of Employer	Date (month, day, year)	Amount
		Occupation	_	

