

FEC
FORM 1

STATEMENT OF ORGANIZATION

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SECRETARY OF THE SENATE
PUBLIC RECORDS

16 DEC -9 AM 10:37

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

Tim Scott for Senate

ADDRESS (number and street) 1405 Ashley River Rd

(Check if address is changed)

Charleston

CITY ▲

SC

STATE ▲

29407-5305

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

stacy@sewcpa.com

Optional Second E-Mail Address

brian@votetimscott.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

WWW.VOTETIMSCOTT.COM

2. DATE

12 / 17 / 2012

3. FEC IDENTIFICATION NUMBER ▶

C C00540302

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Wiggins, Stacy, E.,

Signature of Treasurer Wiggins, Stacy, E.,

Date

12 / 06 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
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Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

201612120200765425

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Scott, Timothy, E., ,

Candidate Party Affiliation REP Office Sought: House Senate President State SC District 00

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate:
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C _____
2. _____ FEC ID number C _____
3. _____ FEC ID number C _____
4. _____ FEC ID number C _____

201612120200765426

Write or Type Committee Name

Tim Scott for Senate

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Tomorrow is Meaningful PAC (TIMPAC)

Mailing Address

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Wiggins, Stacy, E.,

Mailing Address

73 Monte Sano Dr

Hanahan

SC

29410-8616

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Wiggins, Stacy, E.,

Mailing Address

73 Monte Sano Dr

Hanahan

SC

29410-8616

Title or Position

Treasurer

CITY

STATE

ZIP CODE

Telephone number

201612120200765427

Full Name of Designated Agent: Wiggins, Stacy, E., ,
 Mailing Address: 73 Monte Sano Dr
 Hanahan SC 29410-8616
 CITY STATE ZIP CODE
 Title or Position: Custodian of Records
 Telephone number: - -

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of America
 Mailing Address: PO Box 25118
 Tampa FL 33622-5118
 CITY STATE ZIP CODE

Name of Bank, Depository, etc.

South State Bank
 Mailing Address: 855 Savannah Highway
 Charleston SC 29407
 CITY STATE ZIP CODE

201612120200765428

ORIGIN ID: CHSA (843) 556-5567
STACY WIGGINS
STACY E. WIGGINS, CPA, PC
1409 ASHLEY RIVER ROAD
CHARLESTON, SC 29407
UNITED STATES US

SHIP DATE: 06DEC16
ACTWGT: 1.00 LB
CAD: 3725348/INET3790
BILL SENDER

TO ATTN: SECRETARY OF THE SENATE
SENATE OFFICE OF PUBLIC RECORDS
232 HART SENATE OFFICE BUILDING

WASHINGTON DC 20510

(202) 224-0322 REF.
INV.
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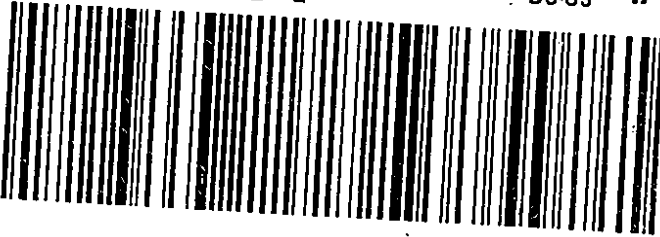
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DEC 07 2016

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OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	12/16/16	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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Date of Receipt

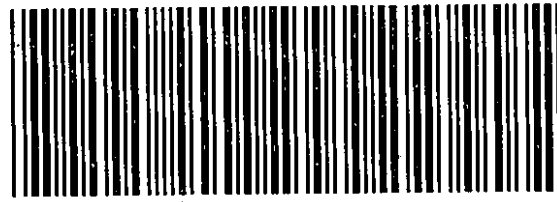
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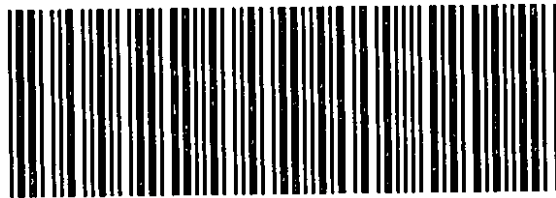
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 12-9-16

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