06/12/2023 18:08

Image# 202306129582127665 PAGE 1/2

## 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.

NAME OF COMMITTEE IN FULL     TIM SCOTT FOF	R SENATE						
ADDRESS (number and street) 14	405 ASHLEY RIVER RI	D					
CITY		STATE		ZIP COI	DE		
CHARLESTON SC				29407-5305			
2. NAME OF CANDIDATE			3. OFFICE SO	3. OFFICE SOUGHT (State and District)		4. FEC IDENTIFICATION	ON NUMBER
SCOTT, TIMOTHY, E.,	,		Senate		SC	C00540302	
5. IS THIS AN AMENDMENT?	NO, THIS IS A NEW F	ILING	X YES, IT AME	YES, IT AMENDS THE NOTICE FILED ON		10 / 22	
LARSEN, RICHARD, , ,			Name of Emp	Name of Employer SELF			Amount
MAILING ADDRESS 267 W 4650 N							1000.00
CITY	STATE	ZIP CODE		Transaction ID : 646FC3EBD35B9461I			
CITY	SIAIE	ZIP CODE		Occupation			
REXBURG	ID	83440	FARMER	FARMER		Date (month,	
B. FULL NAME JIMENEZ, HUGO, , ,				Name of Employer PERFORMANCE ADVISORY			Amount
MAILING ADDRESS 7209 COQUINA WAY, APT. B			CROO!	GROOT			1000.00
7209 COQUINA WAT, AFT.	В		Transaction	ID : 60	2CC44A5EF3A437(		
CITY	STATE	ZIP CODE	Occupation	Occupation			
ST PETE BEACH	FL	33706	BUSINESS	BUSINESS OWNER			
C. FULL NAME ANDREASEN, ROBERT, L, ,				Name of Employer INFORMATION REQUESTED			Amount
MAILING ADDRESS 8 NORLIN DR			Transaction	Transaction ID : 6874103995B424D0D			1000.00
CITY	STATE	ZIP CODE	Occupation	. 00	741039936424606		
GREENVILLE				INFORMATION REQUESTED			
D. FULL NAME	SC	29607-6614			QUESTED	Date (month,	Amount
CAUSLEY, JAMES, , ,			RETIRED	Name of Employer RETIRED			Amount
							2900.00
MAILING ADDRESS 37910 SEAWAY CT			Transaction	ID : 67	BCA7D8753CF440(	10/20/2022	
CITY	STATE	ZIP CODE	Occupation	ID . 07	BOAT BOT 3301 4401		
HARRISON TOWNSHIP	MI	48045-6201	RETIRED				
E. FULL NAME MCCONNELL, SAMUEL, W., , JR.			Name of Emp RETIRED	Name of Employer RETIRED			Amount
MAILING ADDRESS 27 BAINBRIDGE DR			Transaction	Transaction ID : 630856125C94546A6			1500.00
CITY	STATE	ZIP CODE	Occupation				
	SC	29407-4240					
CHARLESTON SIGNATURE (optional)	30	234U1-424U	RETIRED		DATE		
WIGGINS, STACY, , ,			[Electronically	[Electronically Filed]		For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	
						1011  -166 000-424	+-3300, LUCAI 202-034-1100

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.



Image# 202306129582127666 PAGE 2 / 2

## 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			
1.007.01.121.1.11			
CITY, STATE, and ZIP CODE			
CHARLESTON	SC 29407-5305	continuation	on page
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION NUMBER C00540302	
SCOTT, TIMOTHY, E., ,	Senate SC		
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
STEELE, MCDOWELL, , ,	RETIRED	day, year)	
104 N HILLDALE RD		10/20/2022	2000.00
104 N HILLDALE RD	Transaction ID: 650E5A5C2927E4D6	 68 <b>F</b> 5	
	Occupation	3020	
SALINA KS 67401-3535	RETIRED		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
		aay, you.,	
	Occupation	1	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
		auj, you./	
	Occupation		
		Data (manth	Amount
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
E. OLE HAMLE MAILING ADDIESO AND AIF CODE	rvanie oi Employei	day, year)	
	Occupation	-	
	Occupation		