

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 BURGESS, LEE ANN, , ,		Name of Employer RETIRED	Date (month, day, year) 10/23/2022
MAILING ADDRESS 1313 BROOKSIDE DR		Transaction ID : 69FB18F0C59714895	Amount 2900.00
CITY NORMAN	STATE OK	ZIP CODE 73072-6348	Occupation RETIRED
B. FULL NAME BURGESS, LEE ANN, , ,		Name of Employer RETIRED	Date (month, day, year) 10/23/2022
MAILING ADDRESS 1313 BROOKSIDE DR		Transaction ID : 645A9925F010E4E40	Amount 2900.00
CITY NORMAN	STATE OK	ZIP CODE 73072-6348	Occupation RETIRED
C. FULL NAME		Name of Employer	Date (month, day, year)
MAILING ADDRESS			Amount
CITY	STATE	ZIP CODE	Occupation
D. FULL NAME		Name of Employer	Date (month, day, year)
MAILING ADDRESS			Amount
CITY	STATE	ZIP CODE	Occupation
E. FULL NAME		Name of Employer	Date (month, day, year)
MAILING ADDRESS			Amount
CITY	STATE	ZIP CODE	Occupation
SIGNATURE (optional) WIGGINS, STACY, , ,		DATE 10/25/2022	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100
<i>[Electronically Filed]</i>			

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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 `F9DCFHZG7 <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: