

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 LARSEN, RICHARD, , ,			
MAILING ADDRESS 267 W 4650 N		Name of Employer SELF	
CITY REXBURG	STATE ID	ZIP CODE 83440	Date (month, day, year) 10/20/2022
		Amount 1000.00	
		Transaction ID : 646FC3EBD35B94611	
		Occupation FARMER	
B. FULL NAME JIMENEZ, HUGO, , ,			
MAILING ADDRESS 7209 COQUINA WAY, APT. B		Name of Employer PERFORMANCE ADVISORY GROUP	
CITY ST PETE BEACH	STATE FL	ZIP CODE 33706	Date (month, day, year) 10/20/2022
		Amount 1000.00	
		Transaction ID : 602CC44A5EF3A4370	
		Occupation BUSINESS OWNER	
C. FULL NAME			
MAILING ADDRESS		Name of Employer	
CITY	STATE	ZIP CODE	Date (month, day, year)
		Amount	
		Occupation	
D. FULL NAME			
MAILING ADDRESS		Name of Employer	
CITY	STATE	ZIP CODE	Date (month, day, year)
		Amount	
		Occupation	
E. FULL NAME			
MAILING ADDRESS		Name of Employer	
CITY	STATE	ZIP CODE	Date (month, day, year)
		Amount	
		Occupation	
SIGNATURE (optional) WIGGINS, STACY, , ,		DATE 10/22/2022	
[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	

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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.

FEC FORM 6
(Revised 03/2016)

: 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: