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## 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 FO TIM SCOTT FO					
ADDRESS (number and stree	t) 1405 ASHLEY RIV	'ER RD			
CITY STATE CHARLESTON SC		zip code 29407-5305			
2. NAME OF CANDIDATE SCOTT, TIMOTHY, E., ,			3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION NUMBER	
	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 ALETY, SAATHVIK, , ,			Name of Employer FEDERAL HALL POLICY ADVISORS	Date (month, day, year)	Amount
MAILING ADDRESS 1345 K ST SE UNIT 106			Transaction ID : 6C6791514E340427F	11/01/2022	1000.00
CITY	STATE	ZIP CODE	Occupation		
WASHINGTON	DC	20003-4543	PARTNER		
B. FULL NAME HUNTINGTON, LOUIS, H., , JR.			Name of Employer HUNTINGTON FARMS	Date (month, day, year)	Amount
MAILING ADDRESS 820 PARK ROW				11/01/2022	1000.00
# 501 CITY	STATE	ZIP CODE	Transaction ID : 6EA3CB9B33AE740A Occupation		
SALINAS	CA		FARMER		
C. FULL NAME	CA	93901-2406	Name of Employer	Date (month,	Amount
GARG, AVICHAL, , ,				day, year)	
MAILING ADDRESS 855 EL CAMINO REAL, #13A-112			Transaction ID : 60E357CEEBB0147C	11/01/2022	2000.00
CITY	STATE	ZIP CODE	Occupation		
PALO ALTO	CA	94301	INVESTOR		
D. FULL NAME	I		Name of Employer	Date (month, day, year)	Amount
MAILING ADDRESS			-		
СІТҮ	STATE	ZIP CODE	Occupation		
E. FULL NAME			Name of Employer	Date (month, day, year)	Amount
MAILING ADDRESS			-		
СІТҮ	STATE	ZIP CODE	Occupation		
SIGNATURE (optional) WIGGINS, STACY, , ,			[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	



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 @@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: