

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 94
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

Any information copied from such Reports and Statements 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.

NAME OF COMMITTEE (In Full)  
TIM SCOTT FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) DANIEL P. BLUMENSTOCK		Date of Receipt		
	Mailing Address 461 BLUE DRAGONFLY DRIVE		M M / D D / Y Y Y Y 05 / 19 / 2010		
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.6822	
	CHARLESTON	SC	29414	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		C	250.00	
	Name of Employer SELF		Occupation HOTELIER		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼			
		250.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) WILLIAM BRYANS		Date of Receipt		
	Mailing Address 100 W. WALKER DRIVE		M M / D D / Y Y Y Y 05 / 19 / 2010		
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.6805	
	SUMMERVILLE	SC	29483	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		C	500.00	
	Name of Employer TRIDENT ANESTHESIA GROUP		Occupation PHYSICIAN		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼			
		500.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) JAMES R. BUELL		Date of Receipt		
	Mailing Address 4790 CAUGHLIN PARKWAY		M M / D D / Y Y Y Y 05 / 10 / 2010		
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.5288	
	RENO	NV	89519	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		C	1000.00	
	Name of Employer SELF		Occupation FARMER		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼			
		1000.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	