# 12030784011

FEC FORM 3

## REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED

2012 APR BOOK AM 11: 21

**FEC FORM 3** 

(Revised 02/2003)

| NAME OF COMMITTEE (In full)  | TYPE OR PRINT   |          | Example: If typinover the lines.     | g, type | 12FE4МБ  | EÇ MAÎL C                       | NTER         |
|--|---|----------|--------------------------------------|---------|--|---------------------------------|--------------|
| ADDRESS (number and street)  Check if different than previously reported. (ACC)  COOSOOG   | 1240 EL   | M S1T1   | R <sub>I</sub> E <sub>I</sub> ET ; ; |         |  | 21811391-1<br>ZIP CODE<br>STATE |              |
| 4. TYPE OF REPORT (Ch.  (a) Quarterly Reports:  April 15 Quarterly R  July 15 Quarterly R  October 15 Quarter  January 31 Year-En  | Report (Q1) Report (Q2) rly Report (Q3) and Report (YE) | Election | OST-Election Rep                     | 12C)    | General (1 Special (1) Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | in the State of                 | pecial (30S) |
| 5. Covering Period Office through Of |   |          |                                      |         |  |                                 |              |

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#### **SUMMARY PAGE** of Receipts and Disbursements FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Murphy For Congress imothy

Report Covering the Period:

|     |   | COLUMN A<br>This Period | COLUMN B Election Cycle-to-Date |
|-----|---|-------------------------|---------------------------------|
| 6.  | Net Contributions (other than loans)  |                         |                                 |
|     | (a) Total Contributions (other than loans) (from Line 11(e))                              | 27808                   | 20,1514                         |
|     | (b) Total Contribution Refunds<br>(from Line 20(d))                                       |                         |                                 |
|     | (c) Net Contributions (other than toans) (subtract Line 6(b) from Line 6(a))              | 278.07                  | 201514                          |
| 7.  | Net Operating Expenditures  |                         |                                 |
|     | (a) Total Operating Expenditures (from Line 17)   | 803.02                  | 389257                          |
|     | (b) Total Offsets to Operating Expenditures (from Line 14)                                |                         |                                 |
|     | (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))                        | \$03.62                 | 38.925)                         |
| 8.  | Cash on Hand at Close of Reporting Period (from Line 27)                                  | 12257                   |                                 |
| 9.  | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) |                         |                                 |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 2,0,0000                |                                 |

#### For further information contact:

**Federal Election Commission** 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

|      | <b>~~ 11</b> |     | ~! II        |           |    | PAGE |
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|      |              | -66 | UUI          | AI I AI'L |    |      |

of Receipts

Page 3

Write or Type Committee Name

FEC Form 3 (Revised 12/2003)

Timothy Murphy For Congress

Report Covering the Period:

From:



To:



|     | I. RECEIPTS  | COLUMN A<br>Total This Period | COLUMN B Election Cycle-to-Date |  |
|-----|--|-------------------------------|---------------------------------|--|
| 11. | CONTRIBUTIONS (other than loans) FROM:   |                               |                                 |  |
|     | (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)    |                               |                                 |  |
|     | (iii) Unitemized   | 27808                         | 2015,14                         |  |
|     | (b) Political Party Committees   |                               |                                 |  |
|     | (d) The Candidate  | 27808                         | 201514                          |  |
| 12. | TRANSFERS FROM OTHER AUTHORIZED COMMITTEES   |                               |                                 |  |
| 13. | LOANS:  (a) Made or Guaranteed by the Candidate  |                               | 2,000.00                        |  |
| 14. | OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)                               |                               |                                 |  |
| 15. | OTHER RECEIPTS (Dividends, Interest, etc.)   |                               |                                 |  |
| 16. | TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) | 278.08                        | L.,4,015,14                     |  |

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#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

**COLUMN A COLUMN B** II. DISBURSEMENTS **Total This Period Election Cycle-to-Date** 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..... 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate..... (b) Of All Other Loans ..... TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other Than Political Committees ..... (b) Political Party Committees..... Bereitsen der Stander Standbereitsen der Other Political Committees (such as PACs)..... (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... 21. OTHER DISBURSEMENTS ..... 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) III. CASH SUMMARY 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD ...... 24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... 25. SUBTOTAL (add Line 23 and Line 24)..... 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...... 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....

| SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS  | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE OF \ (check only one)  17 |  |  |
|--|---|---|--|--|
| Any information copied from such Reports and Statements m or for commercial purposes, other than using the name and a  |   |   |  |  |
| NAME OF COMMITTEE (In Full) .  |   |   |  |  |
| Full Name (Last, First, Middle Initial)  A. Cosan Daten Ecology/ LCC   |   | Date of Disbursement                            |  |  |
| Obsan Daton Ecology LCC  |   | - WY 1 / B 2 / B 2 Y 3                          |  |  |
| Mailing Address 16 D UDVE1 51  |   |   |  |  |
| City State  Cat chours MA  | Zip Code<br>O\Y20   | Amount of Each Disbursement this Period         |  |  |
| Purpose of Disbursement  Web Services  Candidate Name  | Category  | 19900   |  |  |
| Office Sought: House Disbursement For  | Туре  | _   |  |  |
| Senate Primary President State: District: Dist | General   |   |  |  |
| Full Name (Last, First, Middle Initial)  | <del></del>   |   |  |  |
| B. Data Ecology LLC  |   | Date of Disbursement                            |  |  |
| Mailing Address  |   | 2 2 2 20 2                                      |  |  |
| City State   | Zip Code<br>OU 120  | Amount of Each Disbursement this Period         |  |  |
| Purpose of Disbursement  | 09(20   | 7 4900  |  |  |
| Candidate Name   | Category  |   |  |  |
| Office Sought:    House   Disbursement For   | : General   |   |  |  |
| Full Name (Last, First, Middle Initial)  |   | Date of Disbursement                            |  |  |
| C. DOTA ECCLOST LIC  |   | Mark / San / RX VV V                            |  |  |
| Mailing Address  |   | 03 28 2012                                      |  |  |
|  | p Code<br>64 120  | Amount of Each Disbursement this Period         |  |  |
| Purpose of Disbursement  | 0-112   |   |  |  |
| Candidate Name   | Category,<br>Type   |   |  |  |
| Office Sought: House Disbursement For Senate Primary Other (s  | General   |   |  |  |
| SUBTOTAL of Disbursements This Page (optional)   |   |   |  |  |
| TOTAL This Period (last page this line number only)  | 14.700  |   |  |  |

| SCHEDULE C (FEC Form 3)   | Use separate schedule(s) FOR LINE NUMBER:                           |  |
|---|---|--|
| OANS  | for each category of the Detailed Summary Page (check only one) 13a |  |
| NAME OF COMMITTEE (In Full)   |   |  |
| Timothy Murphy For Congress LOAN SOURCE Full Name (Last, First, Middle Initial) | Election:   |  |
| Murphy Timothy R<br>Mailing Address   | Primary General Other (specify)                                     |  |
| 240 EIM ST  |   |  |
| City State ZIP Cod<br>Reflection NC 281   |   |  |
| Original Amount of Loan Cumulative Payment To                                   |   |  |
| 200000  | 200000  |  |
| Date Incurred Date Due  Date Due  Date Due                                      | Interest Rate Secured:  |  |
| List All Endorsers or Guarantors (if any) to Loan Source                        | Yes No  |  |
| Full Name (Last, First, Middle Initial)   | Name of Employer  |  |
| Malling Address   | Occupation  |  |
| City State ZIP Code   | Amount Guaranteed Outstanding:                                      |  |
| 2. Full Name (Last, First, Middle Initial)                                      | Name of Employer  |  |
| Mailing Address   | Occupation  |  |
| City State ZIP Code   | Amount Guaranteed Outstanding:                                      |  |
| 3. Full Name (Last, First, Middle Initial)                                      | Name of Employer  |  |
| Mailing Address   | Occupation  |  |
| City State ZIP Code   | Amount Guaranteed Outstanding:                                      |  |
| 4. Full Name (Last, First, Middle Initial)                                      | Name of Employer  |  |
| Mailing Address   | Occupation  |  |
| City State ZIP Code   | Amount Guaranteed Outstanding:                                      |  |
| SUBTOTALS This Period This Page (optional).                                     |   |  |
| TOTALS This Period (last page in this line only)                                |   |  |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If r       | o Schedule D, carry forward to appropriate line of Summary.         |  |

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