1203073013

FEC FORM 1

STATEMENT OF **ORGANIZATION**

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				Olice ose oray or it it it
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Tim Murray	for Congr	<i>ess</i>		لتبيييا
ADDRESS (number and street)	905 Lakec	rest Dr.		
(Check if address is changed)	Moore		0K	73170-
	(CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one e-	mail address)	.6	
(Check if address is changed)	Committee	toretimmu	rrayto	rcongress.or
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)				
2. DATE 0 1 2	7 2012			
3. FEC IDENTIFICATION N	JMBER C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined the	nis Statement and to the best	of my knowledge and belief	it is true, correct	and complete.
Type or Print Name of Treasure	John We	eks .	····	
Signature of Treasurer	show whole		Date 01	´ 27 ´ 2012
NOTE: Saubmission of false, errone	cous, or incomplete information of ANY CHANGE IN INFORMATION			the penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

		YPE OF COMMITTEE							
	(a)	X	This committee is a pri	ncipal campaig	n committee	e. (Complete t	he candida	te information below	N.)
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee information below.)					algn committee. (Co	tee. (Complete the candidate	
	Name of Candida		Timothy	1 Ray	Mur	ray		11111	
	Candida Party A		ion DEM	Office Sought:	X Hou	ISO :	Senate	President	State OK District O3
	(c)		This committee support	s/opposes only	one candid	late, and is N	OT an auth	norized committee.	
	Name o Candida			11111	1111			11111	
	Party	Con	nmittee:			_			
	(d)	X	This committee is a	SUB	(National, or subord	, State linate) commi	ttee of the	DEM	(Democratic, Republican, etc.) Party.
•	Politic	cal A	Action Committee (P/	AC):					
	(e)		This committee is a se	parate segrega	ted fund. (Id	entify connect	ed organiza	ation on line 6.) Its c	onnected organization is a:
			Corporation		:	Corporation	w/o Capital	Stock	Labor Organization
			Membership O	ganization		Trade Assoc	iation	: ;	Cooperative
			in addition	on, this committ	ee is a Lobt	yist/Registran	t PAC.		
	(f)	· ·	This committee support committee. (i.e., noncon			Federal cand	idate, and i	s NOT a separate	segregated fund or party
			In addition, this	committee is a l	.obbyist/Reg	gistrar# PAC.			
			In addition, this	committee is a l	.eadership F	PAC. (Identify	sponsor an	line 6.)	
,	Joint F	Fund	iraising Representat	ive:				•	
((g)		This committee collects committees/arganization						
(h)		This committee collects committees/organization						two or more political
	,	Com	mittees Participating in	Jaint Fundra	niser				
		1.					FEC ID	number C	
	,	2.					FEC ID	number C	
		3.			_ 		FEC ID	number C	
	,	4.					FEC ID	number C	

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Write or Type Committee N	rray for Congress	
	d Organization, Affiliated Committee, Joint Fundralsing Representative, o	or Leadership PAC Sponsor
	<u> </u>	
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee JJJoint Fundraising Representati	ive Leadership PAC Sponsor
7. Custodian of Records: books and records.	dentify by name, address (phone number optional) and position of the per	rson in possession of committee
Full Name	nothy Ray Murray	1.
Mailing Address	905 Lakecrest Dr.	
	Moore	73,1,7,9-
Title or Position	CITY STATE	ZIP CODE
<u>Candidat</u>	C Telephone number)5 ₁₋₁ 588 ₁₋₁₂₃₆ 3
8. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; and assistant treasurer). Tim Murray For Congr	
Full Name of Treasurer	hn Ross Weeks	
Mailing Address	P.O. Box 7.127	
-	Moore OK STATE	7,3,1,53] - [1,1,2,7] ZIP CODE
Title or Position Treassure	Telephone number	

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

CITY

STATE

ZIP CODE

2030730134

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