## 11030654139

**FEC** FORM 1

## STATEMENT OF **ORGANIZATION**

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2011 AUG 23 AM 8: 46

			Office Use Only: CENTED
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
Timothy Murphy	for Congress	1 1 1 1 1 1 1 1 1 1	
	1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1	
ADDRESS (number and street)	240 Elm Stree	<b>et</b>	
(Check if address		<u> </u>	
is changed)	Rutherfordton		NG 28139
		CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL ADDRES	SS (Please provide only one e	-mail address)	
_	mrcaffeine@l	ive.com, , , , ,	
(Check if address is changed)			
COMMITTEE'S WEB PAGE ADI			
(Check if address is changed)	www.timothyr	nurphyforcongr	ess.com
2. DATE 08	8 2011		
3. FEC IDENTIFICATION N			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined the	nis Statement and to the bes	t of my knowledge and belief	it is true, correct and complete.
Type or Print Name of Treasure	Timothy Rich	nard Murphy	
Signature of Treasurer	lemos and	Mulf	Date 08 15 2011
	-	may subject the person signing	rinis Statement to the penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530	

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TYPE OF C	MMITTEE
Candidate	Committee:
(a) X	This committee is a principal campaign committee. (Complete the candidate information below.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Name of Candidate	Timothy Richard Murphy
Candidate Party Affiliation	on DEM Office Sought: House Senate President District 10
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Com	
(d)	This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Party.
Political A	ction Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(I)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fund	raising Representative:
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a fodoral candidate.
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Com	mittees Participating in Joint Fundraisor
1.	FEC ID number C
2.	FEC ID number
3.	FEC ID number C
4.	
	Company and the second

ne	
for Congress	
Organization, Affiliated Committee, Joint Fundraisin	g Representative, or Leadership PAC Sponsor
	LJ LJ-LJ
CITY	STATE ZIP CODE
ed Organization Affiliated Committee Joint Fund	draising Representative Leadership PAC Sponsor
	<del>-</del>
entify by name, address (phone number optional) and	d position of the person in possession of committee
thy Richard Murphy	
240 Elm Street	
Rutherfordton	
CITY	STATE ZIP CODE
Telepho	ne number [828, ] - [980, ] - [2864, ]
Telepho	ne number [828, ] - [980, ] - [2864 , ]
Telepho  nd address (phone number optional) of the treasurer assistant treasurer).	
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nd address (phone number optional) of the treasurer assistant treasurer).	
thy Richard Murphy  240 Elm Street	r of the committee; and the name and address of
thy Richard Murphy  240 Elm Street  Rutherfordton	r of the committee; and the name and address of
thy Richard Murphy  240 Elm Street	r of the committee; and the name and address of
	for Congress  Organization, Affiliated Committee, Joint Fundraisin  CITY  d Organization Affiliated Committee Joint Fundraisin  Intify by name, address (phone number optional) and the Richard Murphy

FEC FOR	m 1 (Revised	0 2 /2009)		Page 4
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Full Name of Designated Agent				.1 .1 .1 .1 .1 .1 .1 .1 .1 .1 .1 .1 .1 .
Mailing Address		<u> </u>	11111	11111111
			1 1 1 1 1 1	11111111
		CITY	STATE	ZIP CODE
Title or Position				
		Teleph	none number	<u></u> -L
			··	
Banks or Other safety deposit b Name of Bank,	oxes or maint Depository, et	с.	committee deposits f	unds, holds accounts, rents
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