FEC FORM 3

Only

1. NAME OF

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

TYPE OR PRINT ▼

RECEIVED

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Office Use Only

FEG MAIL CENTER

(Revised 02/2003)

Check if different than previously reported. (ACC) 2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE STATE DISTRICT AMENDED REPORT (N) OR CHECK IF different than previously reported. (ACC) REPORT (N) OR AMENDED		1.	NAME OF COMMITTEE (in full)	TYPE OR PRIN	π ▼	Example: If typir over the lines.	ng, type	12FE4M5	. я
ADDRESS (number and street) Check if different than previously reported. (ACC) Check if different than previously reported. (ACC) REPORT COO 5 O 9 9 1 3. IS THIS NEW AMENDED (N) OR A		TIMATHY MURPHY FOR CONGRESS							
Check if different shares shares than previously reported. (ACC) RELLITING FOR ID TO AND TO AND THE STATE TO S		1							
than previously reported. (ACC) RULTH ERREORICIDITION CITY STATE ZIP CODE STATE VIDSTRICT CODE STATE VIDSTRICT AMENDED (a) Quarterly Report (Choose One) (a) Quarterly Report (C1) July 15 Quarterly Report (C2) October 15 Quarterly Report (C2) October 15 Quarterly Report (C2) Termination Report (TER) Termination Report (TER) Termination Report (TER) CITY STATE STATE ZIP CODE STATE VIDSTRICT STATE VIDSTRICT CITY STATE OFFICE IDENTIFICATION NUMBER V STATE STATE OFFICE IDENTIFICATION NUMBER V STATE OFFICE IDENTIFICATION AMENDED WALL LC Convention Report for the: Primary (12P) Convention (12C) Special (12G) Runoff (12R) Convention (12C) Special (12S) State of State of State of State of Special (30G) Funoff (30R) Special (30S) Funoff (30R) Special (30S) Termination Report (TER) Financy Special (30S) Termination Report (TER) Termination Report (TER) Termination Report (TER) Date Office Date Office Date State of Date Office Date Office Date Office State of Date Office Date Office State of Date Office Date Office Date Office District State of District NUMBER AMENDED STATE OBSTRICT STATE District State of District NUMBER Tipe or Print Name of Treasurer Date Office Date Office District NUMBER Tipe or Print Name of Treasurer Date Office Date Office District NUMBER Tipe or Print Name of Tales, emoneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.	တ	ADDRESS (number and street)			ELM S	TIRIEIGIJI			
2. FEC IDENTIFICATION NUMBER V CONSIDERATE STATE DISTRICT 2. FEC IDENTIFICATION NUMBER V CONSIDERATE STATE	422	Abon provincely						81.3.91-	
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) (b) 12-Day PRE-Election Report for the: Primary (12P) Convention (12C) Special (12S) Election on State of State of General (30G) Runoff (30R) Special (30S) Termination Report (TER) Election on Termination Report (TER) Special (30S) Termination Report (TER) Type or Print Name of Treasurer Type or Print Name of Treasurer Date Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.	-	2.	FEC IDENTIFICATION N	UMBER ▼	CITY	A	<u>s</u>	STATE A	7
(a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) (c) 30-Day POST-Election Report for the: General (30G) Funoff (12F) Runoff (12F) Funoff (12F) Convention (12C) Special (12S) Election on State of State of Special (30F) Special (30S) Funoff (30F) Special (30S) Fermination Report (TER) Funoff (30F) Special (30S) Funoff (12F)	1 40		C005009	9 1					MA Ma
October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) General (30G) Termination Report (TER) Election on Election Report for the: General (30G) Runoff (30R) Special (30S) Termination Report (TER) Election on State of 1. Covering Period O'D'D'D'D'D'D'D'D'D'D'D'D'D'D'D'D'D'D'		4.	(a) Quarterly Reports:	·	(b) 12-Day	Primary (12P) ·		Runoff (12R)
General (30G) Runoff (30R) Special (30S) Termination Report (TER) Election on State of State of Covering Period Cover					Election	м м	/ D D /		··· = ·=
Termination Report (TER) Election on M. M. / D. D. / Y. Y. Y. Y. in the State of 5. Covering Period O / D / D / D / D / D / D / D / D / D /			January 31 Year-Er	nd Report (YE)	(c) 30-Day			Pupoff (30P)	Special (20S)
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Town OTHY R Muv phy Signature of Treasurer Date Date Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.			Termination Report	(TER)	Electio	M M			in the
Type or Print Name of Treasurer TMOTHY R Muv phy Signature of Treasurer Date									
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g. Office			-		THY		1	e, correct and co	mpiete.
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_	FEC Form 3 (Revised 02/2003)	of Receipts and Disbursements	Page 2
	, ,	For Congress	
R	eport Covering the Period: From:	10'01'2013 то:	12 / 31 / 2013
		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	1. (1. (1. (1. (1. (1. (1. (1. (1. (1. (, 2,165.14
	(b) Total Contribution Refunds (from Line 20(d))	,	# · · · · · · · · · · · · · · · · · · ·
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	, , . <i>O</i>	, 2,165.14
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	v i v v v v v v v v v v v v v v v v v v	, 4,144.75
	(b) Total Offsets to Operating Expenditures (from Line 14)		5 5 5
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	, , ,	, 4,149.75
8.	Cash on Hand at Close of Reporting Period (from Line 27)	, , 16.34	
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)	, 2,000.00	

For further information contact:

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

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

FEC Form 3 (Revised 12/2003)	DETAILED SUMMARY PAGE of Receipts	Page 3
Write or Type Committee Name Tinstly R Murp	ohy	
Report Covering the Period: From:	10'01'2013 To:	(2 3, 2013
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM	l:	
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		n de la companya de l
(iii) Uniternized	, , .00	, 2,165.14
(b) Political Party Committees (c) Other Political Committees (such as PACs)	, ,	, i i
(d) The Candidate	, , <i>O</i>	, 2165.14
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	4	
13. LOANS: (a) Made or Guaranteed by the Candidate	• • • • • • • • • • • • • • • • • • •	, 2,000.00
(b) All Other Loans(c) TOTAL LOANS (add Lines 13(a) and (b))	, ,	, 2,000.00
14. OFFSETS TO OPERATING EXPENDITURES (Polylogic Polylogic Sto.)		M

65.14

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)............

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DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	,,	, 41,43 .75
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	7 7	х
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed by the Candidate	9	y y 9
	(b) Of All Other Loans	9	5 N 7 N 7 N N N N N N N N N N N N N N N
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	9	9 y 9
	(b) Political Party Committees	9 9 °	9 4 9 °
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))		у п
21.	OTHER DISBURSEMENTS	, g	. 2 4) . a .
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	, ,	, 4,195.75
	III. CASH S	UMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	DRTING PERIOD	
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	, , , O
25.	SUBTOTAL (add Line 23 and Line 24)		, , 16.39
		om Line 22)	, , , ,
27. CASH ON HAND AT CLOSE OF REPORTIN (subtract Line 26 from Line 25)		NG PERIOD	, , 16.39
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SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summery Page

PAGE COF S
FOR LINE NUMBER: (check only one)

13a

	13b		
NAME OF COMMITTEE (In Full)			
Timethy Murphy For (LOAN SOURCE Full Name (Last, First, Middle Initial)	Congress		
	l ——		
Murphy, Timothy R	Primary General		
Mailing Address	Other (specify) ▼		
240 Elm Street			
City State ZIP C			
Rutherford for NC 2			
Original Amount of Loan Cumulative Payment 1	, , , , , , , , , , , , , , , , , , ,		
, 2,000.00	, .60 , 2,000.00		
TERMS Date Incurred Date Duc	e Interest Rate Secured:		
08 25 2011 05 30	2 6 (2 6.60 % (apr)		
List All Endorsers or Guarantors (if any) to Loan Source			
Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding: 5 7 x •		
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount ;		
City State ZIP Code	Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
	Amount		
City State ZIP Code	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 no Schedule D. carry forward to appropriate line of Summary.			

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RETU NC 2813A 240 Elm Street

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified 1/29/14 Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 2/3/14 me **PREPARER** DATE PREPARED

(8/2013)