11/01/2018 18 : 45

Image# 201811019133576299 PAGE 1 / 1

## 48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Friends of Chris Murphy					]	
ADDRESS (number and street) PC	BOX 127				1	
CITY STATE CHESHIRE CT			CODE 6410	_		
2. NAME OF CANDIDATE			3. OFFICE SOUGHT (State and District)		4. FEC IDENTIFICATION NUMBER	
Murphy, Christopher, S, ,			Senate CT		C00492645	
5. ISTHIS AN AMENDMENT? X NO, THIS IS A NEW FILING			YES, IT AMENDS T	HE NOTICE FILED ON	//////	
A. FULL NAME American College Of Physicians Services PAC			Name of Employer		Date (month, day, year)	Amount
MAILING ADDRESS 25 Massachusetts Ave NW Ste 700			Transaction ID : VTRAAH3NNS5		10/30/2018	1000.00
CITY	STATE	ZIP CODE	Occupation			
Washington	DC	20001-7401				
B. FULL NAME AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMM			Name of Employer		Date (month, day, year)	Amount
MAILING ADDRESS 25 Massachusetts Ave NW Ste 600			Transaction ID : VTRAAH3NNM6		10/30/2018	5000.00
CITY	STATE	ZIP CODE	Occupation			
Washington	DC	20001-7400				
C. FULL NAME Butler, Timothy, , ,			Name of Employer TKB Law		Date (month, day, year)	Amount
MAILING ADDRESS 99 Blackwood Ln			Transaction ID : VTRAAH1EGX4		10/30/2018	1000.00
CITY	STATE	ZIP CODE	Occupation			
Stamford	СТ	06903-4723	Attorney			
D. FULL NAME			Name of Employer		Date (month,	Amount
Humes, Willem, , ,			Greylock Capital		day, year)	
MAILING ADDRESS 1 Grand Army Plz			-		10/30/2018	2700.00
1 Grand Army Piz			Transaction ID : VTRAAH1EVG5			
CITY	STATE	ZIP CODE	Occupation			
Brooklyn	NY	11238-5611	Finance			
E. FULL NAME			Name of Employer		Date (month, day, year)	Amount
MAILING ADDRESS						
СІТҮ	STATE	ZIP CODE	Occupation			
SIGNATURE (optional) Altobello, Kathy, , ,			[Electronically Filed	DATE 11/01/2018	For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	

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