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# FEC FORM 3

## REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

The Committee to Elect Robert Murray

ADDRESS (number and street) 16300 San Ramon

Check if different than previously reported. (ACC) Morgan Hill CA 95037 -

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
STATE ▼ DISTRICT

C 00516757

3. IS THIS REPORT  NEW (N) OR  AMENDED (A) CA 19

### 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)
  - Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on 11 / 06 / 2012 in the State of CA

(c) 30-Day POST-Election Report for the:

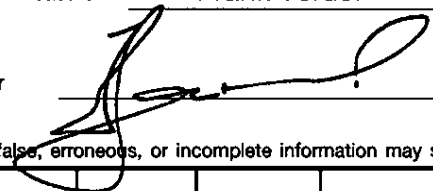
General (30G)  Runoff (30R)  Special (30S)

Election on M M / D D / Y Y Y Y Y in the State of

5. Covering Period 10 / 01 / 2012 through 10 / 17 / 2012

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 Frank Teruel

Signature of Treasurer  Date 01 / 10 / 2013

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 Use Only									
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FEC FORM 3  
(Revised 02/2003)

1 40 2 00 5 0 4 1 6

**SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

Page 2

Write or Type Committee Name

The Committee to Elect Robert Murray

Report Covering the Period: From:

10<sup>M</sup> / 01 / 2012

To:

10<sup>M</sup> / 17<sup>D</sup> / 2012

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	200.00	6,335.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	200.00	6,335.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	9.00	10,395.78
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	9.00	10,395.78
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	6,054.42	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>		
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>		

**For further information contact:**

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

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

1 502 00 50417

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Report Covering the Period: From:

10 / 01 / 2012

To:

10 / 17 / 2012

**I. RECEIPTS**

**COLUMN A**  
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).....

.....

.....

(ii) Unitemized.....

..... 200.00

..... 335.00

(iii) TOTAL of contributions from individuals ▶

..... 200.00

..... 6,335.00

(b) Political Party Committees.....

.....

.....

(c) Other Political Committees (such as PACs).....

.....

.....

(d) The Candidate.....

.....

.....

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

..... 200.00

..... 6335.00

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

.....

.....

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

.....

..... 10,115.20

(b) All Other Loans.....

.....

.....

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

.....

..... 10,115.20

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)..... ▶

..... 200.00

..... 16,450.20

13020053418

**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.....	9.00	10,395.78
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs) .....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....		
21. OTHER DISBURSEMENTS .....		
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	<b>9.00</b>	<b>10,395.78</b>

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5,863.42
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	200.00
25. SUBTOTAL (add Line 23 and Line 24).....	6,063.42
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	9.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6,054.42

13020050418

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 12	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**The Committee to Elect Robert Murray**

Full Name (Last, First, Middle Initial)		Date of Receipt
A. Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code		
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text"/> C <input type="text"/>		<input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
<input type="text"/>		

Full Name (Last, First, Middle Initial)		Date of Receipt
B. Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code		
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text"/> C <input type="text"/>		<input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
<input type="text"/>		

Full Name (Last, First, Middle Initial)		Date of Receipt
C. Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City State Zip Code		
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text"/> C <input type="text"/>		<input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
<input type="text"/>		

SUBTOTAL of Receipts This Page (optional).....	<input type="text"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

13020050420

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
---	------------------------------------	-------------------------------------	------------------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The Committee to Elect Robert Murray

Full Name (Last, First, Middle Initial)

**A. Piryx, Inc**

Mailing Address

144 2nd St. 1st Floor

City

San Francisco

State

CA

Zip Code

94105

Purpose of Disbursement

Transaction Fee

Candidate Name

Robert Murray

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: CA

District: 19

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

2.25

Full Name (Last, First, Middle Initial)

**B. Piryx, Inc**

Mailing Address

144 2nd St. 1st Floor

City

San Francisco

State

CA

Zip Code

94105

Purpose of Disbursement

Transaction Fee

Candidate Name

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: CA

District: 19

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

2.25

Full Name (Last, First, Middle Initial)

**C. Piryx, Inc**

Mailing Address

144 2nd St. 1st Floor

City

San Francisco

State

CA

Zip Code

94105

Purpose of Disbursement

Transaction Fee

Candidate Name

Robert Murray

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify)

State: CA

District: 19

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

4.50

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

9.00

9.00

13020050421

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full)  
**The Committee to Elect Robert Murray**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address	
City	State ZIP Code

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate	Secured:
	<input type="text"/>	<input type="text"/>	<input type="text"/> % (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text"/>
<b>TOTALS</b> This Period (last page in this line only).....	<input type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

1 30200250422

**SCHEDULE C-1 (FEC Form 3)**  
**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

Supplementary for  
 Information found on  
 Page \_\_\_\_ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full)  The Committee to Elect Robert Murray	FEC IDENTIFICATION NUMBER <b>C</b> 00516757
---	--

LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR) %
Mailing Address	Date Incurred or Established	
City State Zip Code	Date Due	

A. Has loan been restructured?  No  Yes If yes, date originally incurred

B. If line of credit, Amount of this Draw: Total Outstanding Balance:

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: What is the value of this collateral?  
 Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?  No  Yes If yes, specify: What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Location of account:  
 Address:  
 Date account established: City, State, Zip:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name: Frank Teruel Signature:	DATE
--	------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:  
 I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.  
 II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.  
 III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature	Title	DATE
--	-------	------

13020659423



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

<input type="checkbox"/>	9
<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)

The Committee to Elect Robert Murray

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional) .....	<input type="text"/>
2) TOTALS This Period (last page this line number only) .....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

12020050424

**FEC FORM 3Z (File with Form 3)**  
**CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS**  
 (To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) <b>The Committee to Elect Robert Murray</b>	Report Covering Period: From: <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">01</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>
	To: <span style="border: 1px solid black; padding: 2px;">MM</span> / <span style="border: 1px solid black; padding: 2px;">DD</span> / <span style="border: 1px solid black; padding: 2px;">YYYY</span> <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">17</span> / <span style="border: 1px solid black; padding: 2px;">2012</span>

	(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees
Committee Name		
<b>A</b> The Committee to Elect Robert Murray	<b>\$200.00</b>	
<b>B</b> Column Total Last Page Only.....	<b>\$6,335.00</b>	

	(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
<b>A</b>			<b>\$200.00</b>			
<b>B</b>			<b>\$6,335.00</b>		<b>\$10,115.20</b>	
	(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
<b>A</b>				<b>\$200.00</b>	<b>\$9.00</b>	
<b>B</b>	<b>\$10,115.20</b>			<b>\$16,450.20</b>	<b>\$10,395.78</b>	
	(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Can- didate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contribution Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
<b>A</b>						
<b>B</b>						
	(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
<b>A</b>			<b>\$9.00</b>			
<b>B</b>			<b>\$10,395.78</b>	<b>\$5,863.42</b>	<b>\$6,054.42</b>	
	(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
<b>A</b>	<b>\$10,115.20</b>	<b>\$200.00</b>	<b>\$9.00</b>			
<b>B</b>		<b>\$6,335.00</b>	<b>\$10,395.78</b>			

E30288 \$0425

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6 Special Handling and Delivery Signature Options  
 SATURDAY Delivery  
NOT available for FedEx Standard Overnight, FedEx 2D or A.M., or FedEx Express Saver.  
 NO Signature Required  
Signature of recipient or addressee is not required. Packages may be left without signature for delivery. Fee applies.  
 Direct Signature  
Signature of recipient or addressee is required. Fee applies.  
 Indirect Signature  
Signature of sender or shipper is required. Fee applies.

Does this shipment contain dangerous goods?  
 No  
 Yes  
One box must be checked. As per attached Shipper's Declaration not required. Dangerous goods including dry ice cannot be shipped in FedEx packaging unless a Shipper's Declaration is provided on a separate Shipper's Declaration form.

7 Payment Bill to:  
 Sender  
 Recipient  
 Third Party  
 Credit Card  
 Cash/Check  
 Obtain receipt  
 Acct. No.  
 Credit Card  
 Cash/Check  
 Credit Card Auth.

Total Packages Total Weight  
 644

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ORIGIN ID:RBKA  
 UNITED STATES US

SHIP DATE: 22 JAN 13  
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 BILL SENDER

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 232 HART SENATE OFFICE

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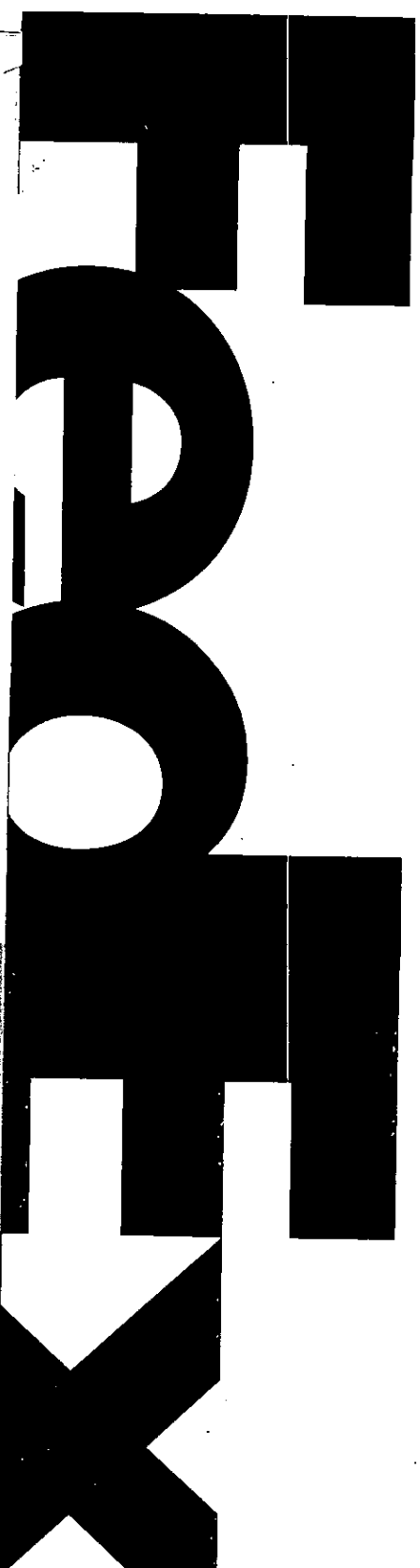
**XC YKNA**  
 20510  
 DC-US DCA

Barcode

3 To Recipient's Name  
 SECRETARY OF THE STATE  
 Company OFFICE PUBLIS RECORDS  
 Address 232 HART SENATE OFFICE  
 We cannot deliver to P.O. boxes or P.O. ZIP codes.  
 Address WASHINGTON  
 State DC ZIP 20510  
 City WASHINGTON

Barcode  
 8017 9107 8856

Post # 156297-435 RT 12/12  
 81788847 01/01/13 0622/0622/0622/0622



**FedEx** NEW Package Express US Airbill  
Tracking Number 8017 9107 8856

1 From Date 1/22/12

Sender's Name DANIEL HEWITSON Phone

Company Address 16300 SAN RAMON

City MORAGA HI CA ZIP 94503

2 Your Internal Billing Reference

3 To Recipient's Name SECRETARY OF THE STATE Phone

Company OFFICE PUBLIC RECORDS

Address 237 HART SENATE OFFICE

City WASHINGTON STATE ZIP 980510

Address Use this box for the HOLD location address or for combination of your shipping address



Form ID No 0200  
Recipients Copy

4 Express Package Service To meet deadlines. NOTE: Services order has changed. Please select carefully. Packages up to 150 lbs. For packages over 50 lbs, see the new FedEx Express Weight & Dimensions.

Next Business Day  
FedEx First Overnight  
FedEx Priority Overnight  
FedEx Standard Overnight  
Standard Delivery NOT available.

2 or 3 Business Days  
FedEx 2Day AM  
Second business morning\*  
Standard Delivery NOT available.

FedEx 2Day  
Second business afternoon\*  
FedEx Express Saver  
Third business day\*  
Standard Delivery NOT available.

5 Packaging \* Declared value limit \$50K  
FedEx Envelope\*  
FedEx Pak\*  
FedEx Box  
FedEx Tube  
Other

6 Special Handling and Delivery Signature Options  
SATURDAY Delivery  
NOT available for FedEx Standard Overnight, FedEx 2Day AM, or FedEx Express Saver.

NO Signature Required  
Direct Signature  
Indirect Signature  
Does this shipment contain dangerous goods?  
One box must be checked.  
YES: Shipper's Declaration  
NO: Shipper's Declaration  
Dry Ice  
Cargo Aircraft Only

7 Payment Bill to:  
Sender's Station  
Recipient  
Third Party  
Credit Card  
Cash/Check  
Total Packages  
Total Weight  
Obtain recip. Acct. No.  
Cash/Check

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INSPECTION United States Senate Post Office INSPECTION

# United States Senate

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USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark  
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	01-22-13	<input checked="" type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

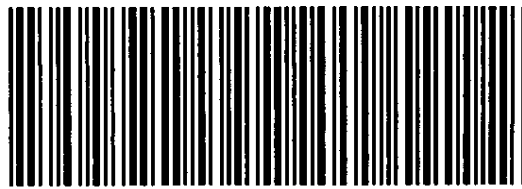
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER RA DATE PREPARED 01-25-13

15020050428



13020050428