

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 415 NEW JERSEY AVE SE, STE 1 WASHINGTON DC 20003

2. FEC IDENTIFICATION NUMBER C00459925 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 09/01/2018 through 09/30/2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Kyriacopoulos, Janica, , ,

Type or Print Name of Treasurer Signature of Treasurer Kyriacopoulos, Janica, , , [Electronically Filed] Date 10/19/2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MURPHPAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		23513.92
(b) Cash on Hand at Beginning of Reporting Period.....	24269.02	
(c) Total Receipts (from Line 19)	69700.00	224172.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	93969.02	247685.92
7. Total Disbursements (from Line 31).....	48291.35	202008.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	45677.67	45677.67
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MURPHPAC

Report Covering the Period: From: M M / D D / Y Y Y Y 09 / 01 / 2018 To: M M / D D / Y Y Y Y 09 / 30 / 2018

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	23200.00	90600.00
(ii) Unitemized	0.00	1572.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	23200.00	92172.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	37000.00	115500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	60200.00	207672.00
12. Transfers From Affiliated/Other Party Committees.....	9500.00	14000.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	69700.00	224172.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	69700.00	224172.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	18291.35	114508.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	18291.35	114508.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17500.00	74500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	500.00
29. Other Disbursements (Including Non-Federal Donations).....	12500.00	12500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	48291.35	202008.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48291.35	202008.25

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	60200.00	207672.00
34. Total Contribution Refunds (from Line 28(d))	0.00	500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	60200.00	207172.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	18291.35	114508.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	18291.35	114508.25

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
MURPHPAC

A. Durrant, Philippa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 134 W 78Th St
 Apt 2
 City New York State NY Zip Code 10024-6724
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The DMC Group, Inc. Occupation (for Individual) Owner Of International Event Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 05 / 2018
Transaction ID : VTAAFRQ0Y3
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 13200.00

Date of Receipt 09 / 13 / 2018
Transaction ID : VTAAFRQ0Y3E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Khalid, Naeem, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2138 Silas Deane Hwy
 City Rocky Hill State CT Zip Code 06067-2317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self Occupation (for Individual) Real Estate
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 20 / 2018
Transaction ID : VTAAAG4AZJ7
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....	5500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2018

Transaction ID : VTRAAG4AZJ7E

Amount of Each Receipt this Period
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Khalid, Nasim, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 91 Hicksville Rd

City Cromwell	State CT	Zip Code 06416-2473
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) CCO LLC	Occupation (for Individual) Manager
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2018

Transaction ID : VTRAAG4AZ88

Amount of Each Receipt this Period
5000.00

Memo Item

* Earmarked Contribution: See Below

C. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
13200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2018

Transaction ID : VTRAAG4AZ88E

Amount of Each Receipt this Period
5000.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. NASEER, SAQIB, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7 Braeburn

City Glastonbury	State CT	Zip Code 06033-1443
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NE CARDIOLOGY	Occupation (for Individual) PHYSICIAN
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2018

Transaction ID : VTRAAG4AZF3

Amount of Each Receipt this Period
2700.00

Memo Item

* Earmarked Contribution: See Below

B. ACTBLUE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 441146

City West Somerville	State MA	Zip Code 02144-0031
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FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer (for Individual)	Occupation (for Individual) Conduit total listed in Agg. field
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
13200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2018

Transaction ID : VTRAAG4AZF3E

Amount of Each Receipt this Period
2700.00

Memo Item

Note: Above Contribution earmarked through this organization.

C. O'Keefe, Dan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 21 Brooks Rd

City New Canaan	State CT	Zip Code 06840-6250
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Apax	Occupation (for Individual) Finance
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2018

Transaction ID : VTRAAGA3FC3

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
O'Keefe, Sarah, , ,

Mailing Address 21 Brooks Rd

City New Canaan	State CT	Zip Code 06840-6250
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Family	Occupation (for Individual) CEO
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 28 / 2018

Transaction ID : VTRAAGA3FE9

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	23200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 20
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION C

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1505 Prince St
Ste 300

City Alexandria State VA Zip Code 22314-2845

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 21 / 2018

Transaction ID : VTRAAG4N790

Amount of Each Receipt this Period
2500.00

Memo Item

B. AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 208 S Akard St
Ste 1812

City Dallas State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
09 / 28 / 2018

Transaction ID : VTRAAG4P139

Amount of Each Receipt this Period
2000.00

Memo Item

C. BECTON, DICKINSON AND COMPANY PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 6Th St NW
Ste 400

City Washington State DC Zip Code 20001-5536

FEC ID number of contributing federal political committee. **C** C00376582

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
09 / 26 / 2018

Transaction ID : VTRAAG4NC35

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 7000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 20
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2980 Fairview Park Dr

City Falls Church	State VA	Zip Code 22042-4511
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FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2018

Transaction ID : VTRAAG4N7J2

Amount of Each Receipt this Period
5000.00

Memo Item

B. MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITI

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1295 State St

City Springfield	State MA	Zip Code 01111-0001
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FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2018

Transaction ID : VTRAAG9KEV4

Amount of Each Receipt this Period
5000.00

Memo Item

C. MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMM

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1919 M St NW
FI 5

City Washington	State DC	Zip Code 20036-3572
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FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2018

Transaction ID : VTRAAG4N7P3

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	12500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 12 OF 20
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
NATIONAL ASSOCIATION OF LETTER CARRIERS OF U.S.A. POLITICAL FUND (LETTER CARRIER POLITICAL Fund)

Mailing Address 100 Indiana Ave NW
Ste 709

City Washington State DC Zip Code 20001-2196

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 28 / 2018

Transaction ID : VTRAAG4NZ51

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PRUDENTIAL FINANCIAL INC. POLITICAL ACTION COMMITT

Mailing Address 751 Broad St
FI 14

City Newark State NJ Zip Code 07102-2660

FEC ID number of contributing federal political committee. **C** C00127779

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 30 / 2018

Transaction ID : VTRAAG9KK00

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

Mailing Address 1155 F St NW
Ste 400

City Washington State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
09 / 30 / 2018

Transaction ID : VTRAAG9KJY4

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	15000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 13 OF 20	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. UNITED PARCEL SERVICE INC. POLITICAL ACTION COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 Glenlake Pkwy

City Atlanta	State GA	Zip Code 30328-3498
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2018

Transaction ID : VTRAAGDRM18

Amount of Each Receipt this Period
2500.00

Memo Item

B.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

C.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	37000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 OF 20
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. MURPHY VICTORY COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 65322
 City Washington State DC Zip Code 20035-5322
 FEC ID number of contributing federal political committee. **C** C00639823
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 14000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2018
Transaction ID : VTRAAGA1KX8
 Amount of Each Receipt this Period
 9500.00
 Memo Item

B. Armstrong, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Gunn Hill Rd
 City New Preston State CT Zip Code 06777-1317
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Not Employed Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2018
Transaction ID : VTRAAGA20B4
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Rizzolo, Carol, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 24 Long Hill Farm
 City Guilford State CT Zip Code 06437-1867
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Self Cultural Mythologist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2018
Transaction ID : VTRAAGCF699
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	9500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 20
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Shirley, Jon, A, ,

Mailing Address PO Box 685

City Medina	State WA	Zip Code 98039-0685
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Not Employed	Occupation (for Individual) Retired
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05	/	18	/	2018

Transaction ID : **VTRAAGA1Y87**

Amount of Each Receipt this Period
5000.00

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	9500.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MURPHPAC

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 13 / 2018
Mailing Address 14 Arrow St		FEC Identification Number C Transaction ID : VTQB29TBK. Amount of Each Disbursement this Period 19.75
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement MM / DD / YYYY 09 / 27 / 2018
Mailing Address 14 Arrow St		FEC Identification Number C Transaction ID : VTQB29TGHE Amount of Each Disbursement this Period 501.65
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Griner, Allison, Baker, ,		Date of Disbursement MM / DD / YYYY 09 / 06 / 2018
Mailing Address 4971 Allan Rd		FEC Identification Number C Transaction ID : VTQB29T94F Amount of Each Disbursement this Period 2000.00
City Bethesda	State MD	
Zip Code 20816-2721	Purpose of Disbursement PAC Fundraising Services	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

2521.40

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MURPHPAC

Full Name (Last, First, Middle Initial)

A. NGP Van, Inc.

Mailing Address PO Box 392264

City
Pittsburgh

State
PA

Zip Code
15251-9264

Purpose of Disbursement
Software License Fee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2018			

FEC Identification Number

C []
Transaction ID : VTQB29T8AE
Amount of Each Disbursement this Period
[] 750.00

Memo Item

Full Name (Last, First, Middle Initial)

B. The Frost Group

Mailing Address 3701 Porter St NW

City
Washington

State
DC

Zip Code
20016-3103

Purpose of Disbursement
PAC Fundraising Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			04			2018			

FEC Identification Number

C []
Transaction ID : VTQB29V0Y4
Amount of Each Disbursement this Period
[] 15000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []
Amount of Each Disbursement this Period
[]

Memo Item

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

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

15750.00
18271.40

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. HEIDI FOR SENATE

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 1577

City Bismarck State ND Zip Code 58502-1577

Purpose of Disbursement
Contribution

Candidate Name
HEITKAMP, HEIDI, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: ND District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	8

FEC Identification Number

C C00505552

Transaction ID : VTQB29TZGt

Amount of Each Disbursement this Period

2500.00

Memo Item

B. MARY FOR CT

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 8

City Simsbury State CT Zip Code 06070-0008

Purpose of Disbursement
2018 Primary debt retirement

Candidate Name
GLASSMAN, MARY, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify)

State: CT District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	8

FEC Identification Number

C C00675678

Transaction ID : VTQB29TCZ5

Amount of Each Disbursement this Period

5000.00

Memo Item

C. MENENDEZ FOR SENATE

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 32248

City Newark State NJ Zip Code 07102-0648

Purpose of Disbursement
Contribution

Candidate Name
MENENDEZ, ROBERT, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: NJ District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	1	8

FEC Identification Number

C C00264564

Transaction ID : VTQB29TZGt

Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

10000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. MIKE ESPY FOR SENATE CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)
MIKE ESPY FOR SENATE CAMPAIGN COMMITTEE

Date of Disbursement
MM / DD / YYYY
09 / 28 / 2018

Mailing Address 4450 Old Canton Rd
Ste 205

City Jackson State MS Zip Code 39211-5994

Purpose of Disbursement Contribution

Candidate Name
ESPY, ALPHONSO MICHAEL, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: MS District: 00

FEC Identification Number
C C00675884
Transaction ID : VTQB29TZG1
Amount of Each Disbursement this Period
5000.00

Memo Item

B. TINA SMITH FOR MINNESOTA

Full Name (Last, First, Middle Initial)
TINA SMITH FOR MINNESOTA

Date of Disbursement
MM / DD / YYYY
09 / 28 / 2018

Mailing Address PO Box 14362

City Saint Paul State MN Zip Code 55114-0362

Purpose of Disbursement Contribution

Candidate Name
SMITH, TINA FLINT, , ,

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼

State: MN District: 00

FEC Identification Number
C C00663781
Transaction ID : VTQB29TZHE
Amount of Each Disbursement this Period
2500.00

Memo Item

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	7500.00
TOTAL This Period (last page this line number only).....▶	17500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
MURPHPAC

Full Name (Last, First, Middle Initial) A. Florida Democratic Party		Date of Disbursement MM / DD / YYYY 09 / 28 / 2018
Mailing Address 214 S Bronough St		FEC Identification Number C [REDACTED] Transaction ID : VTQB29TZGf Amount of Each Disbursement this Period 5000.00
City Tallahassee	State FL	Zip Code 32301-1705
Purpose of Disbursement Contribution- nonfederal		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Montana Democratic Party		Date of Disbursement MM / DD / YYYY 09 / 28 / 2018
Mailing Address 303 N Ewing St		FEC Identification Number C [REDACTED] Transaction ID : VTQB29TZH5 Amount of Each Disbursement this Period 2500.00
City Helena	State MT	Zip Code 59601-4016
Purpose of Disbursement Contribution- nonfederal		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Pennsylvania Democratic Party		Date of Disbursement MM / DD / YYYY 09 / 28 / 2018
Mailing Address 229 State St		FEC Identification Number C [REDACTED] Transaction ID : VTQB29TZHf Amount of Each Disbursement this Period 5000.00
City Harrisburg	State PA	Zip Code 17101-1110
Purpose of Disbursement Contribution- nonfederal		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	12500.00
TOTAL This Period (last page this line number only).....▶	12500.00