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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Friends of Chris Murphy

ADDRESS (number and street) ▼ P.O. Box 127

☐ Check if different than previously reported. (ACC)

CITY ▲ Cheshire — STATE ▲ CT — ZIP CODE ▲ 06410 -

2. **FEC IDENTIFICATION NUMBER ▼** C C00492645

3. IS THIS REPORT ☒ NEW (N) **OR** ☐ AMENDED (A)

STATE ▼ CT — DISTRICT 05

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 MM / DD / YYYY in the State of

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

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

Election on MM 11 / DD 06 / YYYY 2012 in the State of CT

5. Covering Period MM 10 / DD 18 / YYYY 2012 through MM 11 / DD 26 / YYYY 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 Asst Janica Kyriacopoulos

Signature of Treasurer Asst *Janica Kyriacopoulos* Janica Kyriacopoulos Date MM 12 / DD 06 / YYYY 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3
(Revised 02/2003)

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