

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Tim Murphy for Congress

ADDRESS (number and street)

PQ Box 24551

Check if different than previously reported. (ACC)

Pittsburgh

PA

15234

2. **FEC IDENTIFICATION NUMBER**

C00372201

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW OR AMENDED (A)

PA 18

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

In the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 11 23 2004 through 12 31 2004

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 Judith M. McVerry

Signature of Treasurer Electronically Filed by Judith M. McVerry Date 01 27 2005

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

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Tim Murphy for Congress

Report Covering the Period: From: M M D D Y Y Y Y To: M M D D Y Y Y Y
1 1 2 3 2 0 0 4 1 2 3 1 2 0 0 4

	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(a)).....	3984.03	3984.03
(b) Total Contribution Refunds (from Line 20(d)).....	500.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	3484.03	3484.03
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	33553.55	42920.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	1121.25	1121.25
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	32432.30	41799.56
8. Cash on Hand at Close of Reporting Period (from Line 27).....	156781.13	
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	

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 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

Tim Murphy for Congress

Report Covering the Period: From: M M D J Y ' ' ' ' 1 1 2 3 2 0 0 4

To: V V U J Y ' ' ' ' 1 2 3 1 2 0 0 4

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).....	750.00	
(ii) Unitemized.....	600.00	
(iii) TOTAL of contributions	1350.00	1350.00
from individuals..... ▶		
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	2634.03	2634.03
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	3984.03	3984.03
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	1121.25	1121.25
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	5105.28	5105.28

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.....	33553.55	42920.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(b) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
<hr/>		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	500.00	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 20(a), (b), and (c)).....	500.00	500.00
<hr/>		
21. OTHER DISBURSEMENTS.....	125.00	125.00
<hr/>		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) [>]	34178.55	43545.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	185854.40
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	5105.28
25. SUBTOTAL (add Line 23 and Line 24).....	190959.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	34178.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	156781.13

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 15

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		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)
Tim Murphy for Congress

Full Name (Last, First, Middle Initial) A. MR. Donald Craftcheck		Date of Receipt M / D / Y 11 / 24 / 2004
Mailing Address 312 Twin Hills Rd		Transaction ID: 50112.C4856
City Grindstone	State PA	Zip Code 15442-1148
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self employed	Occupation Tax Collector	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. MR. John Venture		Date of Receipt M / D / Y 11 / 24 / 2004
Mailing Address 3 Railroad St. PO Box 484		Transaction ID: 50112.C4860
City Roscoe	State PA	Zip Code 15477-0484
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation information requested	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 15

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
 Tim Murphy for Congress

Full Name (Last, First, Middle Initial) A. Service Employees International Union Mailing Address 1313 L St NW		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2004
City State Zip Code Washington DC 20005-4101		Transaction ID: 50112.C4864
FEC ID number of contributing federal political committee. C C00004036		Amount of Each Receipt this Period 2500.00
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 2500.00	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) B. COLE PAC Mailing Address 12176 Chancery Station Cir		Date of Receipt M M / D D / Y Y Y Y 12 / 24 / 2004
City State Zip Code Reston VA 20190-5803		Transaction ID: 50112.C4866
FEC ID number of contributing federal political committee. C C00404392		Amount of Each Receipt this Period 134.03
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 134.03	In-Kind Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) Dinner

SUBTOTAL of Receipts This Page (optional)	▶	2634.03
TOTAL This Period (last page this line number only)	▶	2634.03

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 15

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Tim Murphy for Congress	
Full Name (Last, First, Middle Initial) A. Venison Mailing Address 3011 Hungary Spring Rd Fl 4 City Richmond State VA Zip Code 23228-2429 FEC ID number of contributing federal political committee. C	Date of Receipt M / D / Y U / U / Y M / M / Y 12 / 21 / 2004 Transaction ID: 50112.C4862 Amount of Each Receipt this Period 1121.25 Offsets to Operating Expenditure Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1121.25

SUBTOTAL of Receipts This Page (optional)	▶	1121.25
TOTAL This Period (last page this line number only)	▶	1121.25

**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)

PAGE 8 / 15

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

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NAME OF COMMITTEE (In Full)
Tim Murphy for Congress

Full Name (Last, First, Middle Initial)

A. Capitol Hill Suites

Mailing Address 2000 C St., SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement
LODGING

Candidate Name

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

State: District

Category/
Type

Transaction ID: 50112.E1245

Date of Disbursement

12 / 22 / 2004

Amount of Each Disbursement this Period

108.77

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

LODGING

Full Name (Last, First, Middle Initial)

B. Postmaster

Mailing Address Castle Shannon Blvd.

City Pittsburgh State PA Zip Code 15234-

Purpose of Disbursement
POSTAGE

Candidate Name

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

State: District

Category/
Type

Transaction ID: 50112.E1243

Date of Disbursement

12 / 13 / 2004

Amount of Each Disbursement this Period

1480.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

C. Manica Douglas

Mailing Address 521 North Ave., Apt 1

City Elizabeth State PA Zip Code 15037-

Purpose of Disbursement
SALARY/BONUS

Candidate Name

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

State: District

Category/
Type

Transaction ID: 50112.E1247

Date of Disbursement

12 / 10 / 2004

Amount of Each Disbursement this Period

8608.44

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY/BONUS

SUBTOTAL of Disbursements This Page (optional) ▶

8198.21

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

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)

PAGE 9 / 15

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

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NAME OF COMMITTEE (In Full)
Tim Murphy for Congress

Full Name (Last, First, Middle Initial)
A. Linda Daniel

Mailing Address 128 N Columbus St

City Alexandria State VA Zip Code 22314-9038

Purpose of Disbursement
FUNDRAISING RETAINER

Candidate Name

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

State: District

Category/
Type

Transaction ID: 50112.E1244
Date of Disbursement

12 / 30 / 2004

Amount of Each Disbursement this Period

3250.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING RETAINER

Full Name (Last, First, Middle Initial)
B. John Goldschmidt

Mailing Address 828 White Oak Cir

City Pittsburgh State PA Zip Code 15228-1712

Purpose of Disbursement
SALARY/BONUS

Candidate Name

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

State: District

Category/
Type

Transaction ID: 50112.E1246
Date of Disbursement

12 / 10 / 2004

Amount of Each Disbursement this Period

806.90

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SALARY/BONUS

Full Name (Last, First, Middle Initial)
C. USAirways

Mailing Address PO Box 5

City Winston Salem State NC Zip Code 27102-0005

Purpose of Disbursement
BOOKING FEE

Candidate Name

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

State: District

Category/
Type

Transaction ID: 50112.E1248
Date of Disbursement

12 / 06 / 2004

Amount of Each Disbursement this Period

5.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BOOKING FEE

SUBTOTAL of Disbursements This Page (optional) ▶

4061.90

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

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)

PAGE 10 / 15

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

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NAME OF COMMITTEE (In Full)
 Tim Murphy for Congress

Full Name (Last, First, Middle Initial)
A. Postmaster

Mailing Address Castle Shannon Blvd.

City Pittsburgh State PA Zip Code 15234-

Purpose of Disbursement
 BOX FEE

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 50112.E1219
 Date of Disbursement
 12 / 02 / 2004

Amount of Each Disbursement this Period
 19.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

BOX FEE

Full Name (Last, First, Middle Initial)
B. Judith Moverry

Mailing Address 46 Ordale Blvd

City Pittsburgh State PA Zip Code 15228-1524

Purpose of Disbursement
 SALARY

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 50112.E1242
 Date of Disbursement
 12 / 30 / 2004

Amount of Each Disbursement this Period
 2894.86

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)
C. Linda Daniel

Mailing Address 128 N Columbus St

City Alexandria State VA Zip Code 22314-303B

Purpose of Disbursement
 FUNDRAISING RETAINER AND REINB PHON

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 50112.E1217
 Date of Disbursement
 11 / 30 / 2004

Amount of Each Disbursement this Period
 5807.28

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

FUNDRAISING RETAINER AND
 REINB PHON

SUBTOTAL of Disbursements This Page (optional) ► **8721.14**

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

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)

PAGE 11 / 15

<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (In Full)
 Tim Murphy for Congress

Full Name (Last, First, Middle Initial)
A. AT&T Wireless

Mailing Address PO Box 8220

City Aurora State IL Zip Code 60572-8220

Purpose of Disbursement
 CELLULAR PHONE

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 50112.E1214
 Date of Disbursement
 12 / 02 / 2004

Amount of Each Disbursement this Period
 267.44

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

CELLULAR PHONE

Full Name (Last, First, Middle Initial)
B. Judith Moverry

Mailing Address 46 Ordale Blvd

City Pittsburgh State PA Zip Code 15228-1524

Purpose of Disbursement
 SALARY

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 41129.E1199
 Date of Disbursement
 11 / 30 / 2004

Amount of Each Disbursement this Period
 2894.86

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)
C. USAirways

Mailing Address PO Box 5

City Winston Salem State NC Zip Code 27102-0005

Purpose of Disbursement
 TRAVEL

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: 50112.E1222
 Date of Disbursement
 12 / 02 / 2004

Amount of Each Disbursement this Period
 185.30

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

TRAVEL

SUBTOTAL of Disbursements This Page (optional) ▶ **3327.60**

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

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)

PAGE 12 / 15

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

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NAME OF COMMITTEE (In Full)
 Tim Murphy for Congress

Full Name (Last, First, Middle Initial)
 A. John Goldschmidt

Mailing Address 828 White Oak Cir

City Pittsburgh State PA Zip Code 15228-1712

Purpose of Disbursement
 PAYROLL

Candidate Name

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

State: District

Category/
 Type

Transaction ID: 41129.E1201
 Date of Disbursement

11 / 30 / 2004

Amount of Each Disbursement this Period

778.23

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)
 B. Palm Restaurant

Mailing Address 1225 19th St NW

City Washington State DC Zip Code 20036-2410

Purpose of Disbursement
 CATERING

Candidate Name

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

State: District

Category/
 Type

Transaction ID: 50112.E1241
 Date of Disbursement

12 / 22 / 2004

Amount of Each Disbursement this Period

2025.40

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

CATERING

Full Name (Last, First, Middle Initial)
 C. Tim Murphy

Mailing Address 221 Brookside Blvd

City Pittsburgh State PA Zip Code 15241-1511

Purpose of Disbursement
 REIMBURSE GIFT ITEMS

Candidate Name

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

State: District

Category/
 Type

Transaction ID: 50112.E1220
 Date of Disbursement

12 / 02 / 2004

Amount of Each Disbursement this Period

180.42

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

REIMBURSE GIFT ITEMS

SUBTOTAL of Disbursements This Page (optional) ▶

2964.05

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

**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)

PAGE 13 / 15

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

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NAME OF COMMITTEE (In Full)
Tim Murphy for Congress

Full Name (Last, First, Middle Initial)
A. Monica Douglas

Mailing Address 521 North Ave., Apt 1

City Elizabeth State PA Zip Code 15037-

Purpose of Disbursement
PAYROLL

Candidate Name

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

State: District

Category/
Type

Transaction ID: 41129.E1203
Date of Disbursement

11 / 30 / 2004

Amount of Each Disbursement this Period

2891.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)
B. PNC Bank

Mailing Address Lebanon Shops Branch

City Pittsburgh State PA Zip Code 15234-

Purpose of Disbursement
TAX PAYMENT

Candidate Name

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

State: District

Category/
Type

Transaction ID: 50112.E1213
Date of Disbursement

12 / 06 / 2004

Amount of Each Disbursement this Period

2487.63

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TAX PAYMENT

Full Name (Last, First, Middle Initial)
C. USAirways

Mailing Address PO Box 5

City Winston Salem State NC Zip Code 27102-0005

Purpose of Disbursement
TRAVEL

Candidate Name

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

State: District

Category/
Type

Transaction ID: 50112.E1224
Date of Disbursement

12 / 07 / 2004

Amount of Each Disbursement this Period

103.60

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TRAVEL

SUBTOTAL of Disbursements This Page (optional) ▶

5482.83

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

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)

PAGE 14 / 15

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		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)
 Tim Murphy for Congress

Full Name (Last, First, Middle Initial)

A. USAirways

Mailing Address PO Box 5

City Winston Salem State NC Zip Code 27102-0005

Purpose of Disbursement
 TRAVEL

Candidate Name

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

State: District

Category/
 Type

Transaction ID: 50112.E1223

Date of Disbursement

12 / 06 / 2004

Amount of Each Disbursement this Period

243.10

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

TRAVEL

SUBTOTAL of Disbursements This Page (optional) ▶

243.10

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

32998.83

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)

PAGE 15 / 15

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

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NAME OF COMMITTEE (In Full)
 Tim Murphy for Congress

Full Name (Last, First, Middle Initial)

A. Donald Croftcheck

Mailing Address 312 Twin Hills Rd

City Grindstone State PA Zip Code 15442-1148

Purpose of Disbursement
 Refund of Contribution refund request

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District

010
 Category/
 Type

Transaction ID: 50112.E1226

Date of Disbursement

12 / 31 / 2004

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 500.00

TOTAL This Period (last page this line number only) ▶ 500.00