

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Frankel Murphy Victory Fund

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

	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(e))....	3727.00	222568.51
(b) Total Contribution Refunds (from Line 20(d))	150.00	1200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	3577.00	221368.51
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	2003.86	18570.53
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	2003.86	18570.53
8. Cash on Hand at Close of Reporting Period (from Line 27).....	49.47	
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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Frankel Murphy Victory Fund

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

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="300.00"/>	<input type="text" value="167581.00"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="3427.00"/>	<input type="text" value="52487.51"/>	<input type="text" value="25.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="3727.00"/>	<input type="text" value="220068.51"/>	<input type="text" value="25.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="2500.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
3727.00	222568.51	25.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
3727.00	222568.51	25.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 17

Write or Type Committee Name

Frankel Murphy Victory Fund

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
2003.86	18570.53	1839.51
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
3294.00	200646.00	288.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
150.00	1200.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 17

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

150.00	1200.00	0.00
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21. OTHER DISBURSEMENTS

0.00	0.00	0.00
------	------	------

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

5447.86	220416.53	2127.51
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

3577.00	221368.51	25.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

2003.86	18570.53	1839.51
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1770.33
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	3727.00
25. SUBTOTAL (add Line 23 and Line 24).....	5497.33
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	5447.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	49.47

**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 7 OF 17
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Frankel Murphy Victory Fund

A. Full Name (Last, First, Middle Initial)
Arthur Heyman

Mailing Address 25 Rodeo Ave
Apt 34

City Sausalito State CA Zip Code 94965

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

Name of Employer San Francisco Public Util Comm Occupation Electrical Engineer

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : SA11AI.7829

Amount of Each Receipt this Period
250.00

Earmarked through ActBlue

B. Full Name (Last, First, Middle Initial)
Clay Steinman

Mailing Address 193 Sherman St

City Saint Paul State MN Zip Code 55102

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

Name of Employer Macalester College Occupation College teacher

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2012

Transaction ID : SA11AI.7947

Amount of Each Receipt this Period
50.00

Earmarked through ActBlue

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

300.00

300.00

**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 8 OF 17
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frankel Murphy Victory Fund

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 18 2012

Transaction ID : SA11C.7964

Amount of Each Receipt this Period
 978.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 19 2012

Transaction ID : SA11C.7962

Amount of Each Receipt this Period
 755.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 22 2012

Transaction ID : SA11C.7963

Amount of Each Receipt this Period
 340.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

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

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

0.00

**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 9 OF 17
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frankel Murphy Victory Fund

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2012

Transaction ID : SA11C.7960

Amount of Each Receipt this Period
 347.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : SA11C.7961

Amount of Each Receipt this Period
 572.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : SA11C.7958

Amount of Each Receipt this Period
 62.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

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

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

0.00

**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 10 OF 17
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Frankel Murphy Victory Fund

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 01 / 2012

Transaction ID : SA11C.7956

Amount of Each Receipt this Period
 340.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2012

Transaction ID : SA11C.7957

Amount of Each Receipt this Period
 5.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 05 / 2012

Transaction ID : SA11C.7959

Amount of Each Receipt this Period
 13.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

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

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

0.00

**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 11 OF 17
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Frankel Murphy Victory Fund

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2012

Transaction ID : SA11C.7955

Amount of Each Receipt this Period
 290.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 18 / 2012

Transaction ID : SA11C.7954

Amount of Each Receipt this Period
 25.00

Contributions earmarked through ActBlue; not a contribution
[MEMO ITEM]

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

0.00

0.00

**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 OF 17			
	<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)
Frankel Murphy Victory Fund

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 13.44 Transaction ID : SB17.7709
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Merchant Fees	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2012
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 13.24 Transaction ID : SB17.7710
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Merchant Fees	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 22.69 Transaction ID : SB17.7712
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Merchant Fees	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	49.37
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 OF 17			
	<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)
Frankel Murphy Victory Fund

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 14 Arrow St			Amount of Each Disbursement this Period 1.08 Transaction ID : SB17.7713
City Cambridge	State MA	Zip Code 02138	
Purpose of Disbursement Merchant Fees		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 M M / D D / Y Y Y Y 10 / 28 / 2012
Mailing Address 14 Arrow St			Amount of Each Disbursement this Period 1.40 Transaction ID : SB17.7714
City Cambridge	State MA	Zip Code 02138	
Purpose of Disbursement Merchant Fees		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. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 14 Arrow St			Amount of Each Disbursement this Period 13.51 Transaction ID : SB17.7715
City Cambridge	State MA	Zip Code 02138	
Purpose of Disbursement Merchant Fees		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).....	15.99
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 OF 17			
	<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)
Frankel Murphy Victory Fund

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 0.20 Transaction ID : SB17.7718
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Merchant Fees	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:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2012
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 0.92 Transaction ID : SB17.7717
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Merchant Fees	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:	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 11.53 Transaction ID : SB17.7716
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Merchant Fees	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:	

SUBTOTAL of Disbursements This Page (optional).....	12.65
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 15 OF 17	
	<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)
Frankel Murphy Victory Fund

Full Name (Last, First, Middle Initial) A. Capitol Compliance Associates		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address PO Box 15293		Amount of Each Disbursement this Period 86.34
City Washington State DC Zip Code 20003	Purpose of Disbursement Reimburse Shipping	
Candidate Name	Category/Type	Transaction ID : SB17.7711
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. Capitol Compliance Associates		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address PO Box 15293		Amount of Each Disbursement this Period 1838.52
City Washington State DC Zip Code 20003	Purpose of Disbursement Compliance Services	
Candidate Name	Category/Type	Transaction ID : SB17.7719
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
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).....	1924.86
TOTAL This Period (last page this line number only).....	2002.87

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

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NAME OF COMMITTEE (In Full)
Frankel Murphy Victory Fund

Full Name (Last, First, Middle Initial) A. FRIENDS OF PATRICK MURPHY		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 4521 PGA BLVD. #412		Amount of Each Disbursement this Period 1506.00 Transaction ID : SB18.7721
City PALM BEACH GARDENS State FL Zip Code 33418	Purpose of Disbursement Transfer	
Candidate Name PATRICK MURPHY		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 18		

Full Name (Last, First, Middle Initial) B. FRIENDS OF PATRICK MURPHY		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 4521 PGA BLVD. #412		Amount of Each Disbursement this Period 144.00 Transaction ID : SB18.7723
City PALM BEACH GARDENS State FL Zip Code 33418	Purpose of Disbursement Transfer - 2012 General Funds	
Candidate Name PATRICK MURPHY		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 18		

Full Name (Last, First, Middle Initial) C. LOIS FRANKEL FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address P.O. BOX 775		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB18.7722
City WEST PALM BEACH State FL Zip Code 33402	Purpose of Disbursement Transfer	
Candidate Name LOIS J FRANKEL		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 22		

SUBTOTAL of Disbursements This Page (optional).....	3150.00
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 17 OF 17	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Frankel Murphy Victory Fund

Full Name (Last, First, Middle Initial) A. LOIS FRANKEL FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address P.O. BOX 775		Amount of Each Disbursement this Period 144.00
City WEST PALM BEACH	State FL	
Zip Code 33402	Purpose of Disbursement Transfer - 2012 General Funds	Transaction ID : SB18.7724
Candidate Name LOIS J FRANKEL	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: FL District: 22		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
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).....	144.00
TOTAL This Period (last page this line number only).....	3294.00