

# 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  
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00459925 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

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)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 01 / 01 / 2017 through 06 / 30 / 2017

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 07 / 27 / 2017

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**

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Page 2

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="2017"/>		<input type="text" value="35506.98"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="35506.98"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="92400.00"/>	<input type="text" value="92400.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="127906.98"/>	<input type="text" value="127906.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="110096.46"/>	<input type="text" value="110096.46"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="17810.52"/>	<input type="text" value="17810.52"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

Write or Type Committee Name

**MurphPAC**

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

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).....	41400.00	41400.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	41400.00	41400.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	48500.00	48500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	89900.00	89900.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2500.00	2500.00
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)).....▶	92400.00	92400.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	92400.00	92400.00

**DETAILED SUMMARY PAGE**

of Disbursements

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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 .....	35096.46	35096.46
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	35096.46	35096.46
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	75000.00	75000.00
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	0.00
(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	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
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)) ..	110096.46	110096.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	110096.46	110096.46

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	89900.00	89900.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	89900.00	89900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	35096.46	35096.46
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	35096.46	35096.46

**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 30
<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. Baer, Martha, L., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 165 Interlaken Rd.  
 City Lakeville State CT Zip Code 06039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Christie's Occupation (for Individual) art specialist  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt **02 / 21 / 2017**  
**Transaction ID : C9834953**  
 Amount of Each Receipt this Period 800.00  
 Memo Item

**B. Johnson, Keith, R., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 1188  
 City Sharon State CT Zip Code 06069  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) none Occupation (for Individual) none  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **02 / 07 / 2017**  
**Transaction ID : C9815707**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Koch, Sidney, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 455 E 86th St  
 City New York State NY Zip Code 10028-6400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) None Occupation (for Individual) Retired  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 16 / 2017**  
**Transaction ID : C9848202**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6300.00
<b>TOTAL</b> 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 30
<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Lanier, Richard, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2017
Mailing Address PO Box 398 18 Brewster Road		<b>Transaction ID : C9929815</b>
City Falls Village	State CT	Zip Code 06031-0398
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer (for Individual) None	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Manocherian, Jed, , ,</b>		Date of Receipt MM / DD / YYYY 02 / 06 / 2017
Mailing Address 18 East 50th Street		<b>Transaction ID : C9825477</b>
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer (for Individual) Woodbranch Investments Corp.	Occupation (for Individual) Real Estate Investor	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Mark, Reuben, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 26 / 2017
Mailing Address 74 Harbor Dr		<b>Transaction ID : C9927711</b>
City Greenwich	State CT	Zip Code 06830
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4600.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 4600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12100.00
<b>TOTAL</b> 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 30
<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. Mashantucket Pequot Tribal Nation**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address c/o Rodney Butler  
P.O. Box 3008

City Mashantucket	State CT	Zip Code 06338-3008
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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 ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	11	/	2017

**Transaction ID : C9899241**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. McDonald, Dale, A., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 81

City Falls Village	State CT	Zip Code 06031-0081
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) None	Occupation (for Individual) Homemaker
---	--

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
03	/	30	/	2017

**Transaction ID : C9865860**

Amount of Each Receipt this Period  
5000.00

Memo Item

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

Mailing Address 3931 Williamsburg Road

City Dallas	State TX	Zip Code 75220
----------------	-------------	-------------------

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

Name of Employer (for Individual) Woodbranch Investments Corp.	Occupation (for Individual) Real Estate Developer
---	--

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
02	/	21	/	2017

**Transaction ID : C9834954**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> 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 30
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**MurphPAC**

**A. Sasaki, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 166 East 61st Street Apt. 14G  
 City New York State NY Zip Code 10065  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CGS Associates Occupation (for Individual) Finance  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 28 / 2017**  
**Transaction ID : C9929243**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Smyth, Matthew, Patrick, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 115 East 72nd Street Apt. 5a  
 City New York State NY Zip Code 10021  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Occupation (for Individual) Interior Designer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt **05 / 04 / 2017**  
**Transaction ID : C9907033A**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item  
 \* Earmarked Contribution: See Below

**C. ACTBLUE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 382110  
 City Cambridge State MA Zip Code 02238  
 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 ▼ 3000.00

Date of Receipt **05 / 11 / 2017**  
**Transaction ID : C9907033AB**  
 Amount of Each Receipt this Period 3000.00  
 Memo Item  
 Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<b>TOTAL</b> This Period (last page this line number only).....	41400.00

**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 30
<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 INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address Palladian 1  
220 Leigh Farm Rd

City Durham State NC Zip Code 27707

FEC ID number of contributing federal political committee. **C** C00077321

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2017

**Transaction ID : C9929811**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. ASSOCIATION FOR ADVANCED LIFE UNDERWRITING PAC (AALU PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 11921 FREEDOM DRIVE  
SUITE 1100

City RESTON State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00447565

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 02 / 2017

**Transaction ID : C9915128**

Amount of Each Receipt this Period  
1000.00

Memo Item

**C. COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL AC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 701 Pennsylvania Avenue NW  
Suite 750

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2017

**Transaction ID : C9929814**

Amount of Each Receipt this Period  
2500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> 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 30
<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. GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2941 FAIRVIEW PARK DR.  
 SUITE 100  
 City FALLS CHURCH State VA Zip Code 22042  
 FEC ID number of contributing federal political committee. **C** C00078451  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 30 / 2017**  
**Transaction ID : C9865861**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1299 Pennsylvania Ave NW  
 Suite 900W  
 City Washington State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00024869  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 30 / 2017**  
**Transaction ID : C9932326**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. HARTFORD FINANCIAL SERVICES GROUP INC ADVOCATES FU**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 Hartford Plz  
 HO-1-11  
 City Hartford State CT Zip Code 06155-0001  
 FEC ID number of contributing federal political committee. **C** C00168864  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **03 / 07 / 2017**  
**Transaction ID : C9843854**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> 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 30
<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. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMM**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1401 H St NW  
 Ste 1200  
 City Washington State DC Zip Code 20005-2110  
 FEC ID number of contributing federal political committee. **C** C00105981  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 29 / 2017**  
**Transaction ID : C9929813**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. KPMG PARTNERS/PRINCIPALS & EMPLOYEES POLITICAL ACT**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 18254  
 City WASHINGTON State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C** C00280222  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **06 / 29 / 2017**  
**Transaction ID : C9929808**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**C. LEAGUE OF CONSERVATION VOTERS ACTION FUND**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1920 L Street NW Suite 800  
 City Washington State DC Zip Code 20036  
 FEC ID number of contributing federal political committee. **C** C00252940  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt **06 / 29 / 2017**  
**Transaction ID : C9929812**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> 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 13 OF 30
<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. NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE**

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

Mailing Address 1125 Executive Circle

City Irving	State TX	Zip Code 75038
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00140061

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
03		30		2017

**Transaction ID : C9865863**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B. NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION C**

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

Mailing Address 51 Madison Ave.  
Room 1109

City New York	State NY	Zip Code 10010
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00158881

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
03		29		2017

**Transaction ID : C9865859**

Amount of Each Receipt this Period  
5000.00

Memo Item

**C. PRUDENTIAL FINANCIAL INC. POLITICAL ACTION COMMITT**

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

Mailing Address 751 Broad Street  
14th Floor

City Newark	State NJ	Zip Code 07102
----------------	-------------	-------------------

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  

M M M	/	D D D	/	Y Y Y Y Y Y
06		29		2017

**Transaction ID : C9929810**

Amount of Each Receipt this Period  
5000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<b>TOTAL</b> 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 14 OF 30
<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. WINE AND SPIRITS WHOLESALERS OF AMERICA INC. POLIT**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00147173

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

Receipt For: 2018  
 Primary  General  
 Other (specify) **Convention**

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 03 / 2017

**Transaction ID : C9865641**

Amount of Each Receipt this Period  
2500.00

Memo Item

Convention account

**B. WINE AND SPIRITS WHOLESALERS OF AMERICA INC. POLIT**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 805 FIFTEENTH ST NW SUITE 430

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00147173

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 / D D / Y Y Y Y Y Y  
 06 / 29 / 2017

**Transaction ID : C9929809**

Amount of Each Receipt this Period  
2500.00

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 Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	51000.00

**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

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**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 05 / 11 / 2017	
Mailing Address 14 Arrow St		FEC Identification Number C [ ] <b>Transaction ID : D645320</b> Amount of Each Disbursement this Period [ ] 118.50	
City Cambridge	State MA	Zip Code 02138	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fee		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>B. ActBlue Technical Services</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address 14 Arrow St		FEC Identification Number C [ ] <b>Transaction ID : D646375</b> Amount of Each Disbursement this Period [ ] 98.75	
City Cambridge	State MA	Zip Code 02138	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing Fee		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>C. FirstBank</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2017	
Mailing Address 12345 W Colfax Ave		FEC Identification Number C [ ] <b>Transaction ID : D648055</b> Amount of Each Disbursement this Period [ ] 39.90	
City Lakewood	State CO	Zip Code 80215-3742	Category/ Type [ ]
Purpose of Disbursement Merchant Fees		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		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 257.15
<b>TOTAL</b> 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. FirstBank**

Mailing Address 12345 W Colfax Ave

City Lakewood State CO Zip Code 80215-3742

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2017

FEC Identification Number

C

Transaction ID : D648056

Amount of Each Disbursement this Period

41.15

Memo Item

Full Name (Last, First, Middle Initial)

**B. FirstBank**

Mailing Address 12345 W Colfax Ave

City Lakewood State CO Zip Code 80215-3742

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 03 / 2017

FEC Identification Number

C

Transaction ID : D648057

Amount of Each Disbursement this Period

41.15

Memo Item

Full Name (Last, First, Middle Initial)

**C. FirstBank**

Mailing Address 12345 W Colfax Ave

City Lakewood State CO Zip Code 80215-3742

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2017

FEC Identification Number

C

Transaction ID : D648058

Amount of Each Disbursement this Period

41.15

Memo Item

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

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

123.45



# 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. FirstBank

Mailing Address 12345 W Colfax Ave

City Lakewood State CO Zip Code 80215-3742

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2017

FEC Identification Number

C

Transaction ID : D648059

Amount of Each Disbursement this Period

37.40

Memo Item

Full Name (Last, First, Middle Initial)

### B. FirstBank

Mailing Address 12345 W Colfax Ave

City Lakewood State CO Zip Code 80215-3742

Purpose of Disbursement  
Merchant Fees

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2017

FEC Identification Number

C

Transaction ID : D648060

Amount of Each Disbursement this Period

38.65

Memo Item

Full Name (Last, First, Middle Initial)

### C. Griner, Allison, Baker, Mrs.,

Mailing Address 4971 Allan Rd

City Bethesda State MD Zip Code 20816-2721

Purpose of Disbursement  
PAC Fundraising Services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 08 / 2017

FEC Identification Number

C

Transaction ID : D643687

Amount of Each Disbursement this Period

2000.00

Memo Item

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

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

2076.05

**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. Griner, Allison, Baker, Mrs.,**

Date of Disbursement  
MM / DD / YYYY  
06 / 02 / 2017

Mailing Address 4971 Allan Rd

City Bethesda State MD Zip Code 20816-2721

Purpose of Disbursement  
PAC Fundraising Services

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : **D646030**  
Amount of Each Disbursement this Period  
2000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Griner, Allison, Baker, Mrs.,**

Date of Disbursement  
MM / DD / YYYY  
01 / 03 / 2017

Mailing Address 4971 Allan Rd

City Bethesda State MD Zip Code 20816-2721

Purpose of Disbursement  
PAC Fundraising Consulting Services

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : **D641142**  
Amount of Each Disbursement this Period  
2000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. Griner, Allison, Baker, Mrs.,**

Date of Disbursement  
MM / DD / YYYY  
02 / 03 / 2017

Mailing Address 4971 Allan Rd

City Bethesda State MD Zip Code 20816-2721

Purpose of Disbursement  
PAC Fundraising Consulting Services

Candidate Name

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

State: District:

FEC Identification Number  
**C**  
Transaction ID : **D643228**  
Amount of Each Disbursement this Period  
2000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6000.00

**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) <b>A. Griner, Allison, Baker, Mrs.,</b>		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017	
Mailing Address 4971 Allan Rd		FEC Identification Number C [ ] <b>Transaction ID : D645084</b> Amount of Each Disbursement this Period [ ] 2000.00	
City Bethesda	State MD	Zip Code 20816-2721	Category/ Type [ ]
Purpose of Disbursement PAC Fundraising Services		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Griner, Allison, Baker, Mrs.,</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2017	
Mailing Address 4971 Allan Rd		FEC Identification Number C [ ] <b>Transaction ID : D645085</b> Amount of Each Disbursement this Period [ ] 2000.00	
City Bethesda	State MD	Zip Code 20816-2721	Category/ Type [ ]
Purpose of Disbursement PAC Fundraising Services		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. NGP Van, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address PO Box 392264		FEC Identification Number C [ ] <b>Transaction ID : D643637</b> Amount of Each Disbursement this Period [ ] 750.00	
City Pittsburgh	State PA	Zip Code 15251	Category/ Type [ ]
Purpose of Disbursement Software License Fee		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

4750.00

**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

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
0	5		3	1		2	0	1	7

FEC Identification Number

C [ ]

**Transaction ID : D646027**

Amount of Each Disbursement this Period

[ ] 750.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PCMS, LLC**

Mailing Address 1050 17th St NW  
Ste 590

City  
Washington

State  
DC

Zip Code  
20036-5592

Purpose of Disbursement  
PAC Accounting 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
0	3		1	6		2	0	1	7

FEC Identification Number

C [ ]

**Transaction ID : D643976**

Amount of Each Disbursement this Period

[ ] 334.95

Memo Item

Full Name (Last, First, Middle Initial)

**C. PCMS, LLC**

Mailing Address 1050 17th St NW  
Ste 590

City  
Washington

State  
DC

Zip Code  
20036-5592

Purpose of Disbursement  
PAC Accounting 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
0	5		3	0		2	0	1	7

FEC Identification Number

C [ ]

**Transaction ID : D646029**

Amount of Each Disbursement this Period

[ ] 688.75

Memo Item

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

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

[ ] 1773.70

[ ]

**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. PCMS, LLC**

Mailing Address 1050 17th St NW  
Ste 590

City  
Washington

State  
DC

Zip Code  
20036-5592

Purpose of Disbursement  
PAC Accounting Services

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 18 / 2017

FEC Identification Number

C

**Transaction ID : D641925**

Amount of Each Disbursement this Period

430.11

Memo Item

Full Name (Last, First, Middle Initial)

**B. Straus/Baker LLC**

Mailing Address 79 Madison Avenue  
2nd Floor

City  
New York

State  
NY

Zip Code  
10016

Purpose of Disbursement  
PAC Fundraising Consulting Services

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
04 / 19 / 2017

FEC Identification Number

C

**Transaction ID : D645095**

Amount of Each Disbursement this Period

7500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Straus/Baker LLC**

Mailing Address 79 Madison Avenue  
2nd Floor

City  
New York

State  
NY

Zip Code  
10016

Purpose of Disbursement  
PAC Fundraising Consulting Services

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
05 / 05 / 2017

FEC Identification Number

C

**Transaction ID : D645117**

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)..... ▶

10430.11

**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. Straus/Baker LLC**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			3	0			2	0	1	7		

Mailing Address 79 Madison Avenue  
2nd Floor

City New York State NY Zip Code 10016

Purpose of Disbursement  
PAC Fundraising Services

FEC Identification Number

**C** [ ]

**Transaction ID : D646028**

Amount of Each Disbursement this Period

[ ] 2500.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. The Frost Group**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4			0	7			2	0	1	7		

Mailing Address 3701 Porter St NW

City Washington State DC Zip Code 20016

Purpose of Disbursement  
PAC Fundraising Consulting Services

FEC Identification Number

**C** [ ]

**Transaction ID : D644914**

Amount of Each Disbursement this Period

[ ] 6000.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. The Frost Group**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	6			2	0	1	7		

Mailing Address 3701 Porter St NW

City Washington State DC Zip Code 20016

Purpose of Disbursement  
PAC Fundraising Consulting Services

FEC Identification Number

**C** [ ]

**Transaction ID : D643494**

Amount of Each Disbursement this Period

[ ] 1186.00

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Memo Item

State: District:

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

[ ] 9686.00

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

[ ] 35096.46

**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**

Full Name (Last, First, Middle Initial) <b>A. BILL NELSON FOR U S SENATE</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address 972 W WHITMIRE DRIVE		FEC Identification Number C00344051 <b>Transaction ID : D648043</b>
City MELBOURNE	State FL	Zip Code 32935
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>NELSON, BILL, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL	District: 00	

Full Name (Last, First, Middle Initial) <b>B. Bob Casey for Senate Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address PO BOX 58746		FEC Identification Number C00431056 <b>Transaction ID : D646064</b>
City PHILADELPHIA	State PA	Zip Code 19102
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>CASEY, ROBERT P JR, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 00	

Full Name (Last, First, Middle Initial) <b>C. Bob Casey for Senate Inc.</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address PO BOX 58746		FEC Identification Number C00431056 <b>Transaction ID : D648036</b>
City PHILADELPHIA	State PA	Zip Code 19102
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>CASEY, ROBERT P JR, , ,</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA	District: 00	

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

7500.00

**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 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**

Full Name (Last, First, Middle Initial)

**A. DONNELLY FOR INDIANA**

Mailing Address 1050 17TH ST NW STE 590

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Contribution

Candidate Name

**DONNELLY, JOSEPH S, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

State: IN

District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 30 / 2017

FEC Identification Number

**C** C00393652

**Transaction ID : D648037**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. DONNELLY FOR INDIANA**

Mailing Address 1050 17TH ST NW STE 590

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Contribution

Candidate Name

**DONNELLY, JOSEPH S, , ,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify)

State: IN

District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2017

FEC Identification Number

**C** C00393652

**Transaction ID : D646065**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. DSCC**

Mailing Address 120 Maryland Ave NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
03 / 29 / 2017

FEC Identification Number

**C** C00042366

**Transaction ID : D646055**

Amount of Each Disbursement this Period

5000.00

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**

Full Name (Last, First, Middle Initial)

**A. DSCC**

Mailing Address 120 Maryland Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2017

FEC Identification Number

C C00042366

**Transaction ID : D648044**

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF ELIZABETH ESTY**

Mailing Address PO BOX 61

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement Contribution

Candidate Name

**ESTY, ELIZABETH, , ,**

Office Sought:  House  Senate  President  
State: CT District: 05

Disbursement For: 2018  Primary  General  Other (specify) Convention

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2017

FEC Identification Number

C C00494203

**Transaction ID : D646056**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF ELIZABETH ESTY**

Mailing Address PO BOX 61

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement Contribution

Candidate Name

**ESTY, ELIZABETH, , ,**

Office Sought:  House  Senate  President  
State: CT District: 05

Disbursement For: 2018  Primary  General  Other (specify) Convention

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2017

FEC Identification Number

C C00494203

**Transaction ID : D648038**

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)..... ▶

15000.00

**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**

Full Name (Last, First, Middle Initial) <b>A. Friends of Sherrod Brown</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017
Mailing Address PO Box 15293		FEC Identification Number C 000264697 <b>Transaction ID : D648035</b> Amount of Each Disbursement this Period 2500.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>BROWN, SHERROD, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 00	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. Friends of Sherrod Brown</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address PO Box 15293		FEC Identification Number C 000264697 <b>Transaction ID : D646063</b> Amount of Each Disbursement this Period 2500.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>BROWN, SHERROD, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH	District: 00	
<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. Gillibrand for Senate</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address 126 C STREET NW 2ND FLOOR		FEC Identification Number C 000413914 <b>Transaction ID : D646057</b> Amount of Each Disbursement this Period 2500.00
City WASHINGTON	State DC	Zip Code 20001
Purpose of Disbursement Contribution		Category/ Type
Candidate Name <b>GILLIBRAND, KIRSTEN ELIZABETH, , ,</b>		
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 00	
<input type="checkbox"/> Memo Item		

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

7500.00

**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 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**

Full Name (Last, First, Middle Initial)

**A. HEIDI FOR SENATE**

Mailing Address PO BOX 1577

City BISMARCK State ND Zip Code 58502

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

MM / DD / YYYY  
06 / 30 / 2017

FEC Identification Number

C C00505552

Transaction ID : D648039

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Kaine for Virginia**

Mailing Address 1751 POTOMAC GREENS DRIVE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement Contribution

Candidate Name KAINE, TIMOTHY MICHAEL, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: VA District: 00

Date of Disbursement

MM / DD / YYYY  
03 / 29 / 2017

FEC Identification Number

C C00495358

Transaction ID : D646059

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. KLOBUCHAR FOR MINNESOTA**

Mailing Address PO BOX 4146

City ST PAUL State MN Zip Code 55104

Purpose of Disbursement Contribution

Candidate Name KLOBUCHAR, AMY, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2018  Primary  General  Other (specify) ▼  
State: MN District: 00

Date of Disbursement

MM / DD / YYYY  
06 / 30 / 2017

FEC Identification Number

C C00431353

Transaction ID : D648040

Amount of Each Disbursement this Period

2500.00

Memo Item

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

7500.00

**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 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. Manchin for West Virginia**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 5202

City CHARLESTON State WV Zip Code 25361

Purpose of Disbursement Contribution

Candidate Name  
**MANCHIN III, JOE, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: WV District: 00

Date of Disbursement: 06 / 30 / 2017

FEC Identification Number: C00486563  
Transaction ID : D648041  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. Manchin for West Virginia**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 5202

City CHARLESTON State WV Zip Code 25361

Purpose of Disbursement Contribution

Candidate Name  
**MANCHIN III, JOE, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: WV District: 00

Date of Disbursement: 03 / 29 / 2017

FEC Identification Number: C00486563  
Transaction ID : D646060  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. MARTIN HEINRICH FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address 2118 CENTRAL AVENUE SE #71

City Albuquerque State NM Zip Code 87106

Purpose of Disbursement Contribution

Candidate Name  
**Heinrich, Martin, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NM District: 01

Date of Disbursement: 03 / 29 / 2017

FEC Identification Number: C00434563  
Transaction ID : D646058  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7500.00

**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 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. McCaskill for Missouri**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 300077

City ST LOUIS State MO Zip Code 63130

Purpose of Disbursement Contribution

Candidate Name **MCCASKILL, CLAIRE, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MO District: 00

Date of Disbursement: 03 / 29 / 2017

FEC Identification Number: **C00431304**  
Transaction ID : **D646052**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. MENENDEZ FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 32248

City NEWARK State NJ Zip Code 07102

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: 06 / 30 / 2017

FEC Identification Number: **C00264564**  
Transaction ID : **D648042**  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. Montanans for Tester**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1135

City HELENA State MT Zip Code 59624

Purpose of Disbursement Contribution

Candidate Name **TESTER, JON, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: MT District: 00

Date of Disbursement: 03 / 29 / 2017

FEC Identification Number: **C00412304**  
Transaction ID : **D646054**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

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

12500.00

**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 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**

Full Name (Last, First, Middle Initial) <b>A. Montanans for Tester</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2017
Mailing Address PO BOX 1135		FEC Identification Number C C00412304 <b>Transaction ID : D648061</b>
City HELENA	State MT	Zip Code 59624
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>TESTER, JON, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MT	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. Stabenow for US Senate</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address P.O. BOX 4945		FEC Identification Number C C00344473 <b>Transaction ID : D646053</b>
City EAST LANSING	State MI	Zip Code 48826
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>STABENOW, DEBBIE, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. Tammy Baldwin for Senate</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address POBOX 696		FEC Identification Number C C00326801 <b>Transaction ID : D646062</b>
City MADISON	State WI	Zip Code 53701
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2500.00
Candidate Name <b>BALDWIN, TAMMY, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI	District: 00	<input type="checkbox"/> Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	75000.00