

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.

ADDRESS (number and street)

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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 / / in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on / / in the State of

5. Covering Period / / through / /

01 / 01 / 2021 through 06 / 30 / 2021

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

Type or Print Name of Treasurer

Signature of Treasurer [Electronically Filed] Date / /

07 / 30 / 2021

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

Office Use Only **FEC FORM 3X**
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

MURPHPAC

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2021"/> | <input type="text" value="1634.24"/> | <input type="text" value="1634.24"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="1634.24"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="19900.00"/> | <input type="text" value="19900.00"/> |
| (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="21534.24"/> | <input type="text" value="21534.24"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="17614.75"/> | <input type="text" value="17614.75"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="3919.49"/> | <input type="text" value="3919.49"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY 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)..... | 19900.00 | 19900.00 |
| (ii) Unitemized | 0.00 | 0.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 19900.00 | 19900.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 19900.00 | 19900.00 |
| 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.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (add 18(a) and 18(b)).. | 0.00 | 0.00 |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶ | 19900.00 | 19900.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 19900.00 | 19900.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 5114.75 | 5114.75 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 5114.75 | 5114.75 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 12500.00 | 12500.00 |
| 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)) .. | 17614.75 | 17614.75 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 17614.75 | 17614.75 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 19900.00 | 19900.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 19900.00 | 19900.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 5114.75 | 5114.75 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 5114.75 | 5114.75 |

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

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

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. Blandford, John, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5716 N Kings Hwy

| | | |
|--------------------|-------------|------------------------|
| City Alexandria | State VA | Zip Code 22303-1414 |
|--------------------|-------------|------------------------|

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

| | |
|--|--|
| Name of Employer (for Individual) Blandford Group | Occupation (for Individual) Public Affairs Consultant |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 23 | / | 2021 |

Transaction ID : VTAAZEZH8

Amount of Each Receipt this Period
2000.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

| | | |
|-------------------------|-------------|------------------------|
| City West Somerville | State MA | Zip Code 02144-0031 |
|-------------------------|-------------|------------------------|

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

| | |
|-----------------------------------|---|
| Name of Employer (for Individual) | Occupation (for Individual) Conduit total listed in Agg. field |
|-----------------------------------|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
19900.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 28 | / | 2021 |

Transaction ID : VTAAZEZH8E

Amount of Each Receipt this Period
2000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 2001 16Th St NW
Apt 704

| | | |
|--------------------|-------------|------------------------|
| City Washington | State DC | Zip Code 20009-3416 |
|--------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) BGR Group | Occupation (for Individual) Vice President |
|--|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 07 | / | 2021 |

Transaction ID : VTAAZCBH41

Amount of Each Receipt this Period
2000.00

Memo Item

* Earmarked Contribution: See Below

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 4000.00 |
| TOTAL This Period (last page this line number only)..... | |

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

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

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NAME OF COMMITTEE (In Full)
MURPHPAC

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

| | | |
|-------------------------|-------------|------------------------|
| City West Somerville | State MA | Zip Code 02144-0031 |
|-------------------------|-------------|------------------------|

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

Name of Employer (for Individual) Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
19900.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2021
Transaction ID : VTAAZCBH41E

Amount of Each Receipt this Period
2000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Daschle, Nathan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3306 Porter St NW

| | | |
|--------------------|-------------|------------------------|
| City Washington | State DC | Zip Code 20008-3213 |
|--------------------|-------------|------------------------|

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

Name of Employer (for Individual) Occupation (for Individual)
The Daschle Group President & COO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2900.00

Date of Receipt
MM / DD / YYYY
06 / 09 / 2021
Transaction ID : VTAAZCBH33

Amount of Each Receipt this Period
2900.00

Memo Item

* Earmarked Contribution: See Below

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

| | | |
|-------------------------|-------------|------------------------|
| City West Somerville | State MA | Zip Code 02144-0031 |
|-------------------------|-------------|------------------------|

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 ▼
19900.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2021
Transaction ID : VTAAZCBH33E

Amount of Each Receipt this Period
2900.00

Memo Item

Note: Above Contribution earmarked through this organization.

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 2900.00 |
| TOTAL This Period (last page this line number only)..... | |

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

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

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. DiNino, Paul, E, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9216 Levelle Dr
 City Chevy Chase State MD Zip Code 20815-5604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) DiNino Associates, LLC Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 30 / 2021
Transaction ID : VTAAAZEZHR0
 Amount of Each Receipt this Period 500.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 19900.00

Date of Receipt 06 / 30 / 2021
Transaction ID : VTAAAZEZHR0E
 Amount of Each Receipt this Period 500.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Mahmood, Rafat, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4290 Neitzey PI
 City Alexandria State VA Zip Code 22309-3069
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mahmood Investment Corporation Occupation (for Individual) Real Estate Developer
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 22 / 2021
Transaction ID : VTAAAZEZHP4
 Amount of Each Receipt this Period 2000.00
 Memo Item
 * Earmarked Contribution: See Below

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

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 20 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 | |
| | <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
MURPHPAC

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

| | | |
|-------------------------|-------------|------------------------|
| City West Somerville | State MA | Zip Code 02144-0031 |
|-------------------------|-------------|------------------------|

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 ▼
19900.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2021
Transaction ID : VTAAZEZHP4E

Amount of Each Receipt this Period
2000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Poersch, Jennifer, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 608 Woodland Ter

| | | |
|--------------------|-------------|------------------------|
| City Alexandria | State VA | Zip Code 22302-3319 |
|--------------------|-------------|------------------------|

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

Name of Employer (for Individual) Occupation (for Individual)
HLP&R Advocacy Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
06 / 23 / 2021
Transaction ID : VTAAZEZH6

Amount of Each Receipt this Period
500.00

Memo Item

* Earmarked Contribution: See Below

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

| | | |
|-------------------------|-------------|------------------------|
| City West Somerville | State MA | Zip Code 02144-0031 |
|-------------------------|-------------|------------------------|

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 ▼
19900.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2021
Transaction ID : VTAAZEZH6E

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 500.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. Pollock, Veronica, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 K St NW

| | | |
|--------------------|-------------|------------------------|
| City Washington | State DC | Zip Code 20001-4211 |
|--------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) The Daschle Group | Occupation (for Individual) Vice President |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 19 | / | 2021 |

Transaction ID : VTAAZEZHKO

Amount of Each Receipt this Period
1000.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address PO Box 441146

| | | |
|-------------------------|-------------|------------------------|
| City West Somerville | State MA | Zip Code 02144-0031 |
|-------------------------|-------------|------------------------|

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

| | |
|-----------------------------------|---|
| Name of Employer (for Individual) | Occupation (for Individual) Conduit total listed in Agg. field |
|-----------------------------------|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
19900.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 29 | / | 2021 |

Transaction ID : VTAAZEZHKO

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 5612 Bent Branch Rd

| | | |
|------------------|-------------|------------------------|
| City Bethesda | State MD | Zip Code 20816-1048 |
|------------------|-------------|------------------------|

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

| | |
|---|---|
| Name of Employer (for Individual) Cornerstone Government Affairs | Occupation (for Individual) Government Relations |
|---|---|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 28 | / | 2021 |

Transaction ID : VTAAZB3KC4

Amount of Each Receipt this Period
1000.00

Memo Item

* Earmarked Contribution: See Below

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 2000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. ACTBLUE

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

Mailing Address PO Box 441146

| | | |
|-------------------------|-------------|------------------------|
| City West Somerville | State MA | Zip Code 02144-0031 |
|-------------------------|-------------|------------------------|

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 ▼
 19900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2021

Transaction ID : VTAAZB3KC4E

Amount of Each Receipt this Period
 1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Shields-West, Eileen, , ,

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

Mailing Address 1524 28Th St NW

| | | |
|--------------------|-------------|------------------------|
| City Washington | State DC | Zip Code 20007-3058 |
|--------------------|-------------|------------------------|

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2021

Transaction ID : VTAAZEZHQ2

Amount of Each Receipt this Period
 1000.00

Memo Item

* Earmarked Contribution: See Below

C. ACTBLUE

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

Mailing Address PO Box 441146

| | | |
|-------------------------|-------------|------------------------|
| City West Somerville | State MA | Zip Code 02144-0031 |
|-------------------------|-------------|------------------------|

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 ▼
 19900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2021

Transaction ID : VTAAZEZHQ2E

Amount of Each Receipt this Period
 1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

| | | |
|---|---|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 OF 20 |
| | <input 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. Smith, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3513 Bradley Ln
 City Chevy Chase State MD Zip Code 20815-3259
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cornerstone Government Affairs Occupation (for Individual) Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 28 / 2021
Transaction ID : VTRAAZB3KD2
 Amount of Each Receipt this Period 5000.00
 Memo Item
 * Earmarked Contribution: See Below

B. ACTBLUE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 441146
 City West Somerville State MA Zip Code 02144-0031
 FEC ID number of contributing federal political committee. **C** C00401224
 Name of Employer (for Individual) Occupation (for Individual) Conduit total listed in Agg. field
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 19900.00

Date of Receipt 06 / 10 / 2021
Transaction ID : VTRAAZB3KD2E
 Amount of Each Receipt this Period 5000.00
 Memo Item
 Note: Above Contribution earmarked through this organization.

C. Smith, Pamela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1212 New York Ave NW
 City Washington State DC Zip Code 20005-3987
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Tarplin, Downs And Young LLC Occupation (for Individual) Partner
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 28 / 2021
Transaction ID : VTRAAZB3KB6
 Amount of Each Receipt this Period 1000.00
 Memo Item
 * Earmarked Contribution: See Below

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 6000.00 |
| TOTAL This Period (last page this line number only).....▶ | |

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

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

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NAME OF COMMITTEE (In Full)
MURPHPAC

A. ACTBLUE

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

Mailing Address PO Box 441146

| | | |
|-------------------------|-------------|------------------------|
| City West Somerville | State MA | Zip Code 02144-0031 |
|-------------------------|-------------|------------------------|

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 ▼
19900.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 10 | / | 2021 |

Transaction ID : VTAAZB3KB6E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Webster, Peter, , ,

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

Mailing Address 8503 Crown PI

| | | |
|--------------------|-------------|------------------------|
| City Alexandria | State VA | Zip Code 22308-1827 |
|--------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) CGA | Occupation (for Individual) Consultant |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05 | / | 28 | / | 2021 |

Transaction ID : VTAAZB3KA9

Amount of Each Receipt this Period
1000.00

Memo Item

* Earmarked Contribution: See Below

C. ACTBLUE

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

Mailing Address PO Box 441146

| | | |
|-------------------------|-------------|------------------------|
| City West Somerville | State MA | Zip Code 02144-0031 |
|-------------------------|-------------|------------------------|

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 ▼
19900.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 10 | / | 2021 |

Transaction ID : VTAAZB3KA9E

Amount of Each Receipt this Period
1000.00

Memo Item

Note: Above Contribution earmarked through this organization.

| | |
|---|----------|
| SUBTOTAL of Receipts This Page (optional)..... | 1000.00 |
| TOTAL This Period (last page this line number only)..... | 19900.00 |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MURPHPAC

| | | | |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) A. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 06 / 10 / 2021 | |
| Mailing Address 14 Arrow St | | FEC Identification Number C [REDACTED] Transaction ID : VTQB29ZPH Amount of Each Disbursement this Period [REDACTED] 316.00 | |
| City Cambridge | State MA | Zip Code 02138-5106 | Category/ Type [REDACTED] |
| 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) ▼ | | Memo Item <input type="checkbox"/> |
| State: District: | | | |

| | | | |
|---|--|---|---------------------------------------|
| Full Name (Last, First, Middle Initial) B. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 06 / 22 / 2021 | |
| Mailing Address 14 Arrow St | | FEC Identification Number C [REDACTED] Transaction ID : VTQB29ZPPE Amount of Each Disbursement this Period [REDACTED] 193.55 | |
| City Cambridge | State MA | Zip Code 02138-5106 | Category/ Type [REDACTED] |
| 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) ▼ | | Memo Item <input type="checkbox"/> |
| State: District: | | | |

| | | | |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) C. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 06 / 28 / 2021 | |
| Mailing Address 14 Arrow St | | FEC Identification Number C [REDACTED] Transaction ID : VTQB29ZQK Amount of Each Disbursement this Period [REDACTED] 217.25 | |
| City Cambridge | State MA | Zip Code 02138-5106 | Category/ Type [REDACTED] |
| 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) ▼ | | Memo Item <input type="checkbox"/> |
| State: District: | | | |

| | |
|--|-------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 726.80 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
MURPHPAC

| | | | |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) A. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 06 / 29 / 2021 | |
| Mailing Address 14 Arrow St | | FEC Identification Number C [REDACTED] Transaction ID : VTQB29ZQK9 Amount of Each Disbursement this Period [REDACTED] 39.50 | |
| City Cambridge | State MA | Zip Code 02138-5106 | Category/ Type [REDACTED] |
| 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) ▼ | | Memo Item <input type="checkbox"/> |
| State: District: | | | |

| | | | |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) B. ActBlue Technical Services | | Date of Disbursement MM / DD / YYYY 06 / 30 / 2021 | |
| Mailing Address 14 Arrow St | | FEC Identification Number C [REDACTED] Transaction ID : VTQB29ZQK9 Amount of Each Disbursement this Period [REDACTED] 19.75 | |
| City Cambridge | State MA | Zip Code 02138-5106 | Category/ Type [REDACTED] |
| 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) ▼ | | Memo Item <input type="checkbox"/> |
| State: District: | | | |

| | | | |
|---|--|--|---------------------------------------|
| Full Name (Last, First, Middle Initial) C. Allison Griner | | Date of Disbursement MM / DD / YYYY 01 / 04 / 2021 | |
| Mailing Address 4971 Allan Rd | | FEC Identification Number C [REDACTED] Transaction ID : VTQB29ZJ7J Amount of Each Disbursement this Period [REDACTED] 1000.00 | |
| City Bethesda | State MD | Zip Code 20816-2721 | Category/ Type [REDACTED] |
| 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: | | | |

| | |
|--|--------------------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | [REDACTED] 1059.25 |
| TOTAL This Period (last page this line number only).....▶ | [REDACTED] |

**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. Allison Griner | | Date of Disbursement MM / DD / YYYY 06 / 22 / 2021 | |
| Mailing Address 4971 Allan Rd | | FEC Identification Number C [REDACTED] Transaction ID : VTQB29ZPPF Amount of Each Disbursement this Period 3000.00 | |
| City Bethesda | State MD | Zip Code 20816-2721 | Category/ Type |
| Purpose of Disbursement PAC Fundraising Services | | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | |
| 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. FirstBank | | Date of Disbursement MM / DD / YYYY 01 / 04 / 2021 | |
| Mailing Address 12345 W Colfax Ave | | FEC Identification Number C [REDACTED] Transaction ID : VTQB29ZJ7M Amount of Each Disbursement this Period 138.95 | |
| City Lakewood | State CO | Zip Code 80215-3742 | Category/ Type |
| Purpose of Disbursement Merchant Fees | | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | |
| 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. FirstBank | | Date of Disbursement MM / DD / YYYY 02 / 03 / 2021 | |
| Mailing Address 12345 W Colfax Ave | | FEC Identification Number C [REDACTED] Transaction ID : VTQB29ZQK Amount of Each Disbursement this Period 19.95 | |
| City Lakewood | State CO | Zip Code 80215-3742 | Category/ Type |
| Purpose of Disbursement Merchant Fees | | | |
| Candidate Name | | Memo Item <input type="checkbox"/> | |
| 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).....▶ | 3158.90 |
| 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. 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 / 2021

FEC Identification Number

C
Transaction ID : VTQB29ZQK.
Amount of Each Disbursement this Period
19.95

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
04 / 03 / 2021

FEC Identification Number

C
Transaction ID : VTQB29ZQK
Amount of Each Disbursement this Period
19.95

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
05 / 03 / 2021

FEC Identification Number

C
Transaction ID : VTQB29ZQK
Amount of Each Disbursement this Period
19.95

Memo Item

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

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

59.85

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

A. FirstBank

Full Name (Last, First, Middle Initial)

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

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
06 / 03 / 2021

FEC Identification Number: C

Transaction ID : VTQB29ZQKI

Amount of Each Disbursement this Period: 19.95

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 19.95 |
| TOTAL This Period (last page this line number only).....▶ | 5024.75 |

**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. ALEX PADILLA FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 777 S Figueroa St
Ste 4050

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 29 | | 2021 |

City Los Angeles State CA Zip Code 90017-5864

FEC Identification Number

Purpose of Disbursement
Contribution

| | |
|---|-----------|
| C | C00765164 |
|---|-----------|

Candidate Name
PADILLA, ALEX, , ,

Category/
Type

Transaction ID : VTQB29ZQKI

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: CA District: 00

| |
|---------|
| 2500.00 |
|---------|

Memo Item

B. MAGGIE FOR NH

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 298

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 29 | | 2021 |

City Concord State NH Zip Code 03302-0298

FEC Identification Number

Purpose of Disbursement
Contribution

| | |
|---|-----------|
| C | C00588772 |
|---|-----------|

Candidate Name
HASSAN, MARGARET WOOD, , ,

Category/
Type

Transaction ID : VTQB29ZQKF

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: NH District: 00

| |
|---------|
| 2500.00 |
|---------|

Memo Item

C. MARK KELLY FOR SENATE

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 27202

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 06 | | 29 | | 2021 |

City Tucson State AZ Zip Code 85726-7202

FEC Identification Number

Purpose of Disbursement
Contribution

| | |
|---|-----------|
| C | C00696526 |
|---|-----------|

Candidate Name
KELLY, MARK, , ,

Category/
Type

Transaction ID : VTQB29ZQK

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: AZ District: 00

| |
|---------|
| 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. TAMMY FOR ILLINOIS

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 10793

City Chicago State IL Zip Code 60610-0793

Purpose of Disbursement Contribution

Candidate Name **DUCKWORTH, L TAMMY, , ,**

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: IL District: 00

Date of Disbursement: 06 / 29 / 2021

FEC Identification Number: **C** C00574889
Transaction ID : **VTQB29ZQKI**
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. TIM RYAN FOR OHIO

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 189

City Niles State OH Zip Code 44446-0189

Purpose of Disbursement Contribution

Candidate Name **RYAN, TIMOTHY, , ,**

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: OH District: 00

Date of Disbursement: 06 / 29 / 2021

FEC Identification Number: **C** C00777771
Transaction ID : **VTQB29ZQKS**
Amount of Each Disbursement this Period: 2500.00

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement Contribution

Candidate Name

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

State: District:

Date of Disbursement:

FEC Identification Number: **C**

Amount of Each Disbursement this Period:

Memo Item

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 5000.00 |
| TOTAL This Period (last page this line number only).....▶ | 12500.00 |