

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

Check if different than previously reported. (ACC) Washington DC 20003

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00459925

3. IS THIS REPORT NEW OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

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 02 / 17 / 2018

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**

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="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).....	51000.00	51000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	92400.00	92400.00
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)).....▶	92400.00	92400.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	92400.00	92400.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	92400.00	92400.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	92400.00	92400.00
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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA

Transaction ID :

Report is amended to correct beginning and ending cash on hand. Amended report filed on 1/26/2018 had incorrect beginning cash due to typographical error.

Form/Schedule:

Transaction ID:

**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 31
	<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 06039-2102  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 21 / 2017  
**Transaction ID : VTAAAN7DH5**  
 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 PO Box 1188  
 City Sharon State CT Zip Code 06069-1188  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 07 / 2017  
**Transaction ID : VTAAAN7NS4**  
 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  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 16 / 2017  
**Transaction ID : VTAAAN7N71**  
 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 8 OF 31
<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 : VTAAAAN7F87</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 E 50th St		<b>Transaction ID : VTAAAAN7KR2</b>
City New York	State NY	Zip Code 10022-6817
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 : VTAAAAN7KW4</b>
City Greenwich	State CT	Zip Code 06830-7018
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 9 OF 31
	<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 PO Box 3008  
 P.O. Box 3008  
 City Mashantucket State CT Zip Code 06338-3008  
 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 : VTAAAAN7EF9**  
 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 141 Belden St  
 City Falls Village State CT Zip Code 06031-1122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Not employed Self  
 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 : VTAAAAN7K78**  
 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 Rd  
 City Dallas State TX Zip Code 75220-6325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Woodbranch Investments Corp. 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 : VTAAAAN7GPO**  
 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 10 OF 31
	<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. Sasaki, Peter, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 166 E 61st St  
 Apt 14G  
 City New York State NY Zip Code 10065-8521  
 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 : VTAAAN7M61**  
 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 E 72nd St  
 Apt 5A  
 City New York State NY Zip Code 10021-4263  
 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 / 11 / 2017  
**Transaction ID : VTAAAN7KC7**  
 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 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 ▼ 3000.00

Date of Receipt 05 / 11 / 2017  
**Transaction ID : VTAAAN7KC7E**  
 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 11 OF 31
<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 220 Leigh Farm Rd  
220 Leigh Farm Rd

City Durham State NC Zip Code 27707-8110

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 : VTRAAAN7NV9**

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 Dr  
Ste 1100

City Reston State VA Zip Code 20190-5634

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 : VTRAAAN7MW5**

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 Ave NW  
Ste 750

City Washington State DC Zip Code 20004-2661

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 : VTRAAAN7QE0**

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 12 OF 31
<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  
Ste 100

City Falls Church State VA Zip Code 22042-4541

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  
MM / DD / YYYY  
03 / 30 / 2017

**Transaction ID : VTAAAN7SW7**

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  
Ste 900W

City Washington State DC Zip Code 20004-2407

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  
MM / DD / YYYY  
06 / 30 / 2017

**Transaction ID : VTAAAN7T81**

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  
MM / DD / YYYY  
03 / 07 / 2017

**Transaction ID : VTAAAN7R03**

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 13 OF 31
<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  
MM / DD / YYYY  
06 / 29 / 2017

**Transaction ID : VTRAAAN7M45**

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 20036-8254

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  
MM / DD / YYYY  
06 / 29 / 2017

**Transaction ID : VTRAAAN7SJ8**

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 St NW  
Ste 800

City Washington State DC Zip Code 20036-5045

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  
MM / DD / YYYY  
06 / 29 / 2017

**Transaction ID : VTRAAAN7HM5**

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 14 OF 31
<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 Cir

City Irving	State TX	Zip Code 75038-2522
----------------	-------------	------------------------

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 : VTAAAN7HF5**

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  
Rm 1109

City New York	State NY	Zip Code 10010-1603
------------------	-------------	------------------------

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 : VTAAAN7TH0**

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 St  
Fl 14

City Newark	State NJ	Zip Code 07102-2660
----------------	-------------	------------------------

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 : VTAAAN7JM8**

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 15 OF 31
<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 15th St NW  
Ste 430

City Washington State DC Zip Code 20005-2273

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

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

Receipt For:  
 Primary  General  
 Other (specify)  Convention

Aggregate Year-to-Date ▼  
2500.00

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

**Transaction ID : VTRAAAN7WN8**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B. WINE AND SPIRITS WHOLESALERS OF AMERICA INC. POLIT**

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

Mailing Address 805 15th St NW  
Ste 430

City Washington State DC Zip Code 20005-2273

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

**Transaction ID : VTRAAAN7W69**

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 M / D 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

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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 : VTQB29M3QI</b> Amount of Each Disbursement this Period 118.50
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>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 : VTQB29M3R2</b> Amount of Each Disbursement this Period 98.75
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fee	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>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 : VTQB29M3Q</b> Amount of Each Disbursement this Period 39.90
City Lakewood	State CO	
Zip Code 80215-3742	Purpose of Disbursement Merchant Fees	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2017

FEC Identification Number

C  
Transaction ID : VTQB29M3P  
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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 03 / 2017

FEC Identification Number

C  
Transaction ID : VTQB29M3T  
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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 03 / 2017

FEC Identification Number

C  
Transaction ID : VTQB29M3Q  
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) ▼

Date of Disbursement

MM / DD / YYYY  
05 / 12 / 2017

FEC Identification Number

C  
Transaction ID : VTQB29M3Q.  
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) ▼

Date of Disbursement

MM / DD / YYYY  
06 / 05 / 2017

FEC Identification Number

C  
Transaction ID : VTQB29M3Q/  
Amount of Each Disbursement this Period  
38.65

Memo Item

Full Name (Last, First, Middle Initial)

**C. Griner, Allison, Baker, ,**

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

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
01 / 03 / 2017

FEC Identification Number

C  
Transaction ID : VTQB29M3D  
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) <b>A. Griner, Allison, Baker, ,</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2017	
Mailing Address 4971 Allan Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQB29M3FF</b> Amount of Each Disbursement this Period [REDACTED] 2000.00	
City Bethesda	State MD	Zip Code 20816-2721	Category/ Type [REDACTED]
Purpose of Disbursement PAC Fundraising Consulting 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, ,</b>		Date of Disbursement MM / DD / YYYY 03 / 08 / 2017	
Mailing Address 4971 Allan Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQB29M3F9</b> Amount of Each Disbursement this Period [REDACTED] 2000.00	
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:			

Full Name (Last, First, Middle Initial) <b>C. Griner, Allison, Baker, ,</b>		Date of Disbursement MM / DD / YYYY 04 / 05 / 2017	
Mailing Address 4971 Allan Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQB29M3FI</b> Amount of Each Disbursement this Period [REDACTED] 2000.00	
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 6000.00
<b>TOTAL</b> 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) <b>A. Griner, Allison, Baker, ,</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2017	
Mailing Address 4971 Allan Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQB29M3Ff</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		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>B. Griner, Allison, Baker, ,</b>		Date of Disbursement MM / DD / YYYY 06 / 02 / 2017	
Mailing Address 4971 Allan Rd		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQB29M3EV</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		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>C. NGP Van, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2017	
Mailing Address PO Box 392264		FEC Identification Number C [REDACTED] <b>Transaction ID : VTQB29M3P</b> Amount of Each Disbursement this Period 750.00	
City Pittsburgh	State PA	Zip Code 15251-9264	Category/ Type
Purpose of Disbursement Software License Fee			
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4750.00
<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. NGP Van, Inc.**

Mailing Address PO Box 392264

City Pittsburgh State PA Zip Code 15251-9264

Purpose of Disbursement Software License Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
05 / 31 / 2017

FEC Identification Number: C

Transaction ID : VTQB29M3P

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
01 / 18 / 2017

FEC Identification Number: C

Transaction ID : VTQB29M3AF

Amount of Each Disbursement this Period: 430.11

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  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
03 / 16 / 2017

FEC Identification Number: C

Transaction ID : VTQB29M3B

Amount of Each Disbursement this Period: 334.95

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1515.06

**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. 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

MM / DD / YYYY  
05 / 30 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : VTQB29M3B/**  
Amount of Each Disbursement this Period

[REDACTED] 688.75

Memo Item

Full Name (Last, First, Middle Initial)

### B. Straus/Baker LLC

Mailing Address 79 Madison Ave  
FI 2

City  
New York

State  
NY

Zip Code  
10016-7805

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

MM / DD / YYYY  
04 / 19 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : VTQB29M3KE**  
Amount of Each Disbursement this Period

[REDACTED] 7500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Straus/Baker LLC

Mailing Address 79 Madison Ave  
FI 2

City  
New York

State  
NY

Zip Code  
10016-7805

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

MM / DD / YYYY  
05 / 05 / 2017

FEC Identification Number

C [REDACTED]

**Transaction ID : VTQB29M3K**  
Amount of Each Disbursement this Period

[REDACTED] 2500.00

Memo Item

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

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

[REDACTED] 10688.75

[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. Straus/Baker LLC**

Mailing Address 79 Madison Ave  
FI 2

City New York State NY Zip Code 10016-7805

Purpose of Disbursement  
PAC Fundraising Services

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 30 / 2017

FEC Identification Number

C  
Transaction ID : VTQB29M3K  
Amount of Each Disbursement this Period  
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Frost Group**

Mailing Address 3701 Porter St NW

City Washington State DC Zip Code 20016-3103

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

MM / DD / YYYY  
02 / 16 / 2017

FEC Identification Number

C  
Transaction ID : VTQB29M3JT  
Amount of Each Disbursement this Period  
1186.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. The Frost Group**

Mailing Address 3701 Porter St NW

City Washington State DC Zip Code 20016-3103

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

MM / DD / YYYY  
04 / 07 / 2017

FEC Identification Number

C  
Transaction ID : VTQB29M3JI  
Amount of Each Disbursement this Period  
6000.00

Memo Item

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

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

9686.00  
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**

**A. BILL NELSON FOR U S SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 972 W Whitmire Dr

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

City Melbourne State FL Zip Code 32935-6972

FEC Identification Number

Purpose of Disbursement Contribution

C	C00344051
---	-----------

Candidate Name NELSON, BILL, , ,

Transaction ID : VTQB29M3JC

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: FL District: 00

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/Type

2500.00
---------

Memo Item

**B. Bob Casey for Senate Inc.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 58746

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

City Philadelphia State PA Zip Code 19102-8746

FEC Identification Number

Purpose of Disbursement Contribution

C	C00431056
---	-----------

Candidate Name CASEY, ROBERT P JR, , ,

Transaction ID : VTQB29M3P0

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: PA District: 00

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/Type

2500.00
---------

Memo Item

**C. Bob Casey for Senate Inc.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 58746

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

City Philadelphia State PA Zip Code 19102-8746

FEC Identification Number

Purpose of Disbursement Contribution

C	C00431056
---	-----------

Candidate Name CASEY, ROBERT P JR, , ,

Transaction ID : VTQB29M3N

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: PA District: 00

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Category/Type

2500.00
---------

Memo Item

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

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

7500.00
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**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 20036-5592

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

/  /

FEC Identification Number

**C** C00393652

**Transaction ID : VTQB29M3N'**  
Amount of Each Disbursement this Period

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 20036-5592

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

/  /

FEC Identification Number

**C** C00393652

**Transaction ID : VTQB29M3N3**  
Amount of Each Disbursement this Period

Memo Item

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

Mailing Address 120 Maryland Ave NE

City Washington State DC Zip Code 20002-5610

Purpose of Disbursement  
Contribution

Candidate Name  
**DSCC**

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

State: District:

Date of Disbursement

/  /

FEC Identification Number

**C** C00042366

**Transaction ID : VTQB29M3F:**  
Amount of Each Disbursement this Period

Memo Item

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

**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. DSCC**

Full Name (Last, First, Middle Initial)  
Mailing Address 120 Maryland Ave NE

City Washington State DC Zip Code 20002-5610

Purpose of Disbursement Contribution

Candidate Name **DSCC**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 06 / 30 / 2017

FEC Identification Number: **C00042366**  
Transaction ID : **VTQB29M3G**  
Amount of Each Disbursement this Period: 10000.00

Memo Item

**B. FRIENDS OF ELIZABETH ESTY**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 61

City Cheshire State CT Zip Code 06410-0061

Purpose of Disbursement Contribution

Candidate Name **ESTY, ELIZABETH, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) Convention

State: CT District: 05

Date of Disbursement: 03 / 29 / 2017

FEC Identification Number: **C00494203**  
Transaction ID : **VTQB29M3Q**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. FRIENDS OF ELIZABETH ESTY**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 61

City Cheshire State CT Zip Code 06410-0061

Purpose of Disbursement Contribution

Candidate Name **ESTY, ELIZABETH, , ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) Convention

State: CT District: 05

Date of Disbursement: 06 / 30 / 2017

FEC Identification Number: **C00494203**  
Transaction ID : **VTQB29M3C**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15000.00

**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. Friends of Sherrod Brown**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 15293

City Washington State DC Zip Code 20003-0293

Purpose of Disbursement Contribution

Candidate Name **BROWN, SHERROD, , ,**

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

State: OH District: 00

Date of Disbursement: 03 / 29 / 2017

FEC Identification Number: C00264697  
Transaction ID : VTQB29M3H:  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. Friends of Sherrod Brown**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 15293

City Washington State DC Zip Code 20003-0293

Purpose of Disbursement Contribution

Candidate Name **BROWN, SHERROD, , ,**

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

State: OH District: 00

Date of Disbursement: 06 / 30 / 2017

FEC Identification Number: C00264697  
Transaction ID : VTQB29M3G:  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. Gillibrand for Senate**

Full Name (Last, First, Middle Initial)  
Mailing Address 126 C St NW FI 2

City Washington State DC Zip Code 20001-2132

Purpose of Disbursement Contribution

Candidate Name **GILLIBRAND, KIRSTEN ELIZABETH, , ,**

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

State: NY District: 00

Date of Disbursement: 03 / 29 / 2017

FEC Identification Number: C00413914  
Transaction ID : VTQB29M3J:  
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. HEIDI FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1577

City Bismarck State ND Zip Code 58502-1577

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: 06 / 30 / 2017

FEC Identification Number: C00505552  
Transaction ID : VTQB29M3NI  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. Kaine for Virignia**

Full Name (Last, First, Middle Initial)  
Mailing Address 1751 Potomac Greens Dr

City Alexandria State VA Zip Code 22314-6233

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: 03 / 29 / 2017

FEC Identification Number: C00495358  
Transaction ID : VTQB29M3Rc  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. KLOBUCHAR FOR MINNESOTA**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 4146

City Saint Paul State MN Zip Code 55104-0146

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: 06 / 30 / 2017

FEC Identification Number: C00431353  
Transaction ID : VTQB29M3K  
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)

Date of Disbursement

Mailing Address PO Box 5202

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

City Charleston State WV Zip Code 25361-0202

FEC Identification Number

Purpose of Disbursement Contribution

**C** C00486563

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

Category/Type

**Transaction ID : VTQB29M3R!**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: WV District: 00

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

2500.00

Memo Item

**B. Manchin for West Virginia**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO Box 5202

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

City Charleston State WV Zip Code 25361-0202

FEC Identification Number

Purpose of Disbursement Contribution

**C** C00486563

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

Category/Type

**Transaction ID : VTQB29M3R7**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: WV District: 00

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

2500.00

Memo Item

**C. MARTIN HEINRICH FOR SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 2118 Central Ave SE # 71

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

City Albuquerque State NM Zip Code 87106-4004

FEC Identification Number

Purpose of Disbursement Contribution

**C** C00434563

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

Category/Type

**Transaction ID : VTQB29M3G**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: NM District: 01

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

2500.00

Memo Item

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

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

7500.00

**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. McCaskill for Missouri</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017	
Mailing Address PO Box 300077		FEC Identification Number <b>C</b> C00431304 <b>Transaction ID : VTQB29M3G</b> Amount of Each Disbursement this Period 5000.00	
City Saint Louis	State MO	Zip Code 63130-0338	Category/ Type
Purpose of Disbursement Contribution		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name <b>MCCASKILL, CLAIRE, , ,</b>			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MO District: 00		

Full Name (Last, First, Middle Initial) <b>B. MENENDEZ FOR SENATE</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2017	
Mailing Address PO Box 32248		FEC Identification Number <b>C</b> C00264564 <b>Transaction ID : VTQB29M3G</b> Amount of Each Disbursement this Period 5000.00	
City Newark	State NJ	Zip Code 07102-0648	Category/ Type
Purpose of Disbursement Contribution		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name <b>MENENDEZ, ROBERT, , ,</b>			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 00		

Full Name (Last, First, Middle Initial) <b>C. Montanans for Tester</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017	
Mailing Address PO Box 1135		FEC Identification Number <b>C</b> C00412304 <b>Transaction ID : VTQB29M3JI</b> Amount of Each Disbursement this Period 2500.00	
City Helena	State MT	Zip Code 59624-1135	Category/ Type
Purpose of Disbursement Contribution		Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name <b>TESTER, JON, , ,</b>			Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MT District: 00		

**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 <b>C</b> C00412304 <b>Transaction ID : VTQB29M3JF</b> Amount of Each Disbursement this Period 2500.00
City Helena	State MT	
Zip Code 59624-1135		Memo Item <input type="checkbox"/>
Purpose of Disbursement Contribution		
Candidate Name <b>TESTER, JON, , ,</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input 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	

Full Name (Last, First, Middle Initial) <b>B. Stabenow for US Senate</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address PO Box 4945		FEC Identification Number <b>C</b> C00344473 <b>Transaction ID : VTQB29M3QI</b> Amount of Each Disbursement this Period 2500.00
City East Lansing	State MI	
Zip Code 48826-4945		Memo Item <input type="checkbox"/>
Purpose of Disbursement Contribution		
Candidate Name <b>STABENOW, DEBBIE, , ,</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input 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	

Full Name (Last, First, Middle Initial) <b>C. Tammy Baldwin for Senate</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2017
Mailing Address PO Box 696		FEC Identification Number <b>C</b> C00326801 <b>Transaction ID : VTQB29M3K</b> Amount of Each Disbursement this Period 2500.00
City Madison	State WI	
Zip Code 53701-0696		Memo Item <input type="checkbox"/>
Purpose of Disbursement Contribution		
Candidate Name <b>BALDWIN, TAMMY, , ,</b>		Category/Type
Office Sought: <input type="checkbox"/> House <input 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	

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

7500.00

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

75000.00