

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

The Committee to Elect Justin Murphy 2024

ADDRESS (number and street)

20 WORRELL RD

Check if different
than previously
reported. (ACC)

TABERNACLE

NJ

08088

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C C00865808

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

NJ

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

01

D D / Y Y Y Y

01

Y Y Y Y

2026

through

M M / D D / Y Y Y Y

03

D D / Y Y Y Y

31

Y Y Y Y

2026

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 Clegg, Jennifer, , ,

Signature of Treasurer

Clegg, Jennifer, , ,

Date

M M / D D / Y Y Y Y

04

D D / Y Y Y Y

08

Y Y Y Y

2026

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 3**
(Revised 05/2016)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

The Committee to Elect Justin Murphy 2024

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	2792.07	13170.89
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	2792.07	13170.89
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6158.88	19791.04
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	600.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	6158.88	19191.04
8. Cash on Hand at Close of Reporting Period (from Line 27)	566.81	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	7966.96	

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

The Committee to Elect Justin Murphy 2024

Report Covering the Period:

From:

MM / DD / YYYY
01 / 01 / 2026

To:

MM / DD / YYYY
03 / 31 / 2026**I. RECEIPTS****COLUMN A**
Total This Period**COLUMN B**
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

1772.34

6822.34

(ii) Unitemized.....

1019.73

6348.55

(iii) TOTAL of contributions
from individuals ▶

2792.07

13170.89

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees
(such as PACs).....

0.00

0.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))..

2792.07

13170.89

12. TRANSFERS FROM OTHER
AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the
Candidate.....

3360.00

7966.96

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

3360.00

7966.96

14. OFFSETS TO OPERATING
EXPENDITURES
(Refunds, Rebates, etc.)

0.00

600.00

15. OTHER RECEIPTS
(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines
11(e), 12, 13(c), 14, and 15)
(Carry Total to Line 24, page 4)..... ▶

6152.07

21737.85

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6158.88	19791.04
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	1380.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6158.88	21171.04

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	573.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6152.07
25. SUBTOTAL (add Line 23 and Line 24).....	6725.69
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6158.88
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	566.81

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 5 OF 35

☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

Chipperson, Rita, , ,

A.

Mailing Address 11 Fawn Hill Dr

City

Morristown

State

NJ

Zip Code

07960

FEC ID number of contributing
federal political committee.

C

Name of Employer
SelfOccupation
Attorney

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
01		21		2026

Transaction ID : SA11AI.4485

Amount of Each Receipt this Period

250.00

☐ Memo Item
PayPal donation

Full Name (Last, First, Middle Initial)

Eames, William, , ,

B.

Mailing Address 6 Cove Lane Rd

City

Whippany

State

NJ

Zip Code

07981

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

257.94

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		09		2026

Transaction ID : SA11AI.4506

Amount of Each Receipt this Period

257.94

☐ Memo Item
PayPal donation

Full Name (Last, First, Middle Initial)

Eames, William, , ,

C.

Mailing Address 6 Cove Lane Rd

City

Whippany

State

NJ

Zip Code

07981

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

515.88

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		25		2026

Transaction ID : SA11AI.4512

Amount of Each Receipt this Period

257.94

☐ Memo Item
PayPal donation

765.88

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

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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☒ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

MARINELLI, BEVERLY, , ,

A.

Mailing Address 28 FLEMISH WAY

City

LUMBERTON

State

NJ

Zip Code

08048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

RETIRED

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		01		2026

Transaction ID : SA11AI.4486

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Raynor, Thomas, , ,

B.

Mailing Address 2 Hidden Acres Dr

City

Tabernacle

State

NJ

Zip Code

08088

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Electrician

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02		25		2026

Transaction ID : SA11AI.4501

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Willis, Frederick, , ,

C.

Mailing Address 600 Cedar Avenue

City

Haddonfield

State

NJ

Zip Code

08033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired Mechanical Engineer

Occupation

Retired Mechanical Engineer

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

206.46

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03		12		2026

Transaction ID : SA11AI.4508

Amount of Each Receipt this Period

206.46

☐ Memo Item

PayPal donation

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

1006.46

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

1772.34

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☐ 12	☒ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

MURPHY, JUSTIN, M, Mr.,

Mailing Address 20 WORRELL RD

City

TABERNACLE

State

NJ

Zip Code

08088

FEC ID number of contributing
federal political committee.

C S4NJ00532

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 10 2026

Transaction ID : SA13A.4477

Amount of Each Receipt this Period

10.00

☐ Memo Item
Candidate Loan

Full Name (Last, First, Middle Initial)

MURPHY, JUSTIN, M, Mr.,

Mailing Address 20 WORRELL RD

City

TABERNACLE

State

NJ

Zip Code

08088

FEC ID number of contributing
federal political committee.

C S4NJ00532

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 04 2026

Transaction ID : SA13A.4496

Amount of Each Receipt this Period

200.00

☐ Memo Item
Candidate Loan

Full Name (Last, First, Middle Initial)

MURPHY, JUSTIN, M, Mr.,

Mailing Address 20 WORRELL RD

City

TABERNACLE

State

NJ

Zip Code

08088

FEC ID number of contributing
federal political committee.

C S4NJ00532

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 09 2026

Transaction ID : SA13A.4497

Amount of Each Receipt this Period

100.00

☐ Memo Item
Candidate Loan

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

310.00

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

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☐ 12	☒ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

MURPHY, JUSTIN, M, Mr.,

Mailing Address 20 WORRELL RD

City

TABERNACLE

State

NJ

Zip Code

08088

FEC ID number of contributing
federal political committee.

C S4NJ00532

Name of Employer
SELF EMPLOYEDOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	20	/	2026

Transaction ID : SA13A.4498

Amount of Each Receipt this Period

700.00

☐ Memo Item
 Candidate Loan

Full Name (Last, First, Middle Initial)

MURPHY, JUSTIN, M, Mr.,

Mailing Address 20 WORRELL RD

City

TABERNACLE

State

NJ

Zip Code

08088

FEC ID number of contributing
federal political committee.

C S4NJ00532

Name of Employer
SELF EMPLOYEDOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	20	/	2026

Transaction ID : SA13A.4499

Amount of Each Receipt this Period

350.00

☐ Memo Item
 Candidate Loan

Full Name (Last, First, Middle Initial)

MURPHY, JUSTIN, M, Mr.,

Mailing Address 20 WORRELL RD

City

TABERNACLE

State

NJ

Zip Code

08088

FEC ID number of contributing
federal political committee.

C S4NJ00532

Name of Employer
SELF EMPLOYEDOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03	/	19	/	2026

Transaction ID : SA13A.4509

Amount of Each Receipt this Period

1100.00

☐ Memo Item
 Candidate Loan
SUBTOTAL of Receipts This Page (optional)..... ►

2150.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 11a	☐ 11b	☐ 11c	☐ 11d	☐ 15
☐ 12	☒ 13a	☐ 13b	☐ 14	☐ 15

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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

MURPHY, JUSTIN, M, Mr.,

Mailing Address 20 WORRELL RD

City

TABERNACLE

State

NJ

Zip Code

08088

FEC ID number of contributing
federal political committee.

C S4NJ00532

Name of Employer
SELF EMPLOYEDOccupation
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 30 2026

Transaction ID : SA13A.4513

Amount of Each Receipt this Period

900.00

☐ Memo Item
Candidate Loan

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

900.00

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

3360.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 35

☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

A. Enterprise Car Rental

Mailing Address 202 Medford - Mount Holly Rd

City
MedfordState
NJZip Code
08055Purpose of Disbursement
Car Rental for Campaign travel

002

Candidate Name
The Committee to Elect Justin Murphy 2024Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

377.40

Transaction ID : SB17.4542

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Enterprise Car Rental

Mailing Address 202 Medford - Mount Holly Rd

City
MedfordState
NJZip Code
08055Purpose of Disbursement
Car Rental for Campaign travel

002

Candidate Name
The Committee to Elect Justin Murphy 2024Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		12		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

78.27

Transaction ID : SB17.4543

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Enterprise Car Rental

Mailing Address 202 Medford - Mount Holly Rd

City
MedfordState
NJZip Code
08055Purpose of Disbursement
Car Rental for Campaign travel

002

Candidate Name
The Committee to Elect Justin Murphy 2024Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		23		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

816.52

Transaction ID : SB17.4547

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1272.19

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 17	☐ 18	☐ 19a	☐ 19b
☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

A. Enterprise Car Rental

Mailing Address 202 Medford - Mount Holly Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		03		2026

City
MedfordState
NJZip Code
08055

FEC Identification Number

C	C00865808
---	-----------

Purpose of Disbursement
Car Rental for Campaign travel

002

Amount of Each Disbursement this Period

46.13

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Transaction ID : SB17.4550

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Haddon Culinary

Mailing Address 9 Kings Highway

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		01		2026

City
HaddonfieldState
NJZip Code
08033

FEC Identification Number

C	C00865808
---	-----------

Purpose of Disbursement
02/01/26 Catering for Medford event

001

Amount of Each Disbursement this Period

600.17

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Transaction ID : SB17.4534

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. IONOS

Mailing Address 2 Logan Sq

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		20		2026

City
PhiladelphiaState
PAZip Code
19103

FEC Identification Number

C	C00865808
---	-----------

Purpose of Disbursement
Domain Renewal

001

Amount of Each Disbursement this Period

155.00

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Transaction ID : SB17.4525

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

801.30

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

A. IONOS

Mailing Address 2 Logan Sq

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	2	6

City
PhiladelphiaState
PAZip Code
19103

FEC Identification Number

C	C00865808
---	-----------

Purpose of Disbursement
WordPress Hosting

001

Amount of Each Disbursement this Period

161.00

Transaction ID : SB17.4540

☐ Memo Item

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Full Name (Last, First, Middle Initial)

B. IONOS

Mailing Address 2 Logan Sq

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	6

City
PhiladelphiaState
PAZip Code
19103

FEC Identification Number

C	C00865808
---	-----------

Purpose of Disbursement
Website Server Fee

001

Amount of Each Disbursement this Period

6.00

Transaction ID : SB17.4549

☐ Memo Item

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Full Name (Last, First, Middle Initial)

C. LAKES OFFICE SUPPLY

Mailing Address 737 STOKES ROAD

Date of Disbursement

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

City
MEDFORDState
NJZip Code
08055

FEC Identification Number

C	C00865808
---	-----------

Purpose of Disbursement
Stamps, Envelopes, event flyers

001

Amount of Each Disbursement this Period

333.36

Transaction ID : SB17.4524

☐ Memo Item

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

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

500.36

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

A. LAKES OFFICE SUPPLY

Mailing Address 737 STOKES ROAD

City
MEDFORDState
NJZip Code
08055Purpose of Disbursement
Labels purchased and printed

001

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		22		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

41.03

Transaction ID : SB17.4528

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LAKES OFFICE SUPPLY

Mailing Address 737 STOKES ROAD

City
MEDFORDState
NJZip Code
08055Purpose of Disbursement
Supplies

001

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

5.93

Transaction ID : SB17.4551

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LAKES OFFICE SUPPLY

Mailing Address 737 STOKES ROAD

City
MEDFORDState
NJZip Code
08055Purpose of Disbursement
Mailings

001

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

63.88

Transaction ID : SB17.4552

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

110.84

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

A. LAKES OFFICE SUPPLY

Mailing Address 737 STOKES ROAD

City
MEDFORDState
NJZip Code
08055Purpose of Disbursement
Supplies

001

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	2	6

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

161.12

Transaction ID : SB17.4557

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Main Line Aquatics

Mailing Address 27 Moore Ave

City
Cherry HillState
NJZip Code
08034Purpose of Disbursement
Marketing Services and Prints

004

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	2	6

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

1014.95

Transaction ID : SB17.4569

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MEDFORD BAGEL SHOP

Mailing Address 7 JACKSON RD

City
MEDFORDState
NJZip Code
08055Purpose of Disbursement
Medford event food

001

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

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

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

28.77

Transaction ID : SB17.4538

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1204.84

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

A. MEDFORD MEETINGHOUSE

Mailing Address 21 S MAIN STREET

City
MEDFORDState
NJZip Code
08055Purpose of Disbursement
Facility Rental Feb 1st Brunch

001

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		12		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

225.00

Transaction ID : SB17.4520

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MEDFORD MEETINGHOUSE

Mailing Address 21 S MAIN STREET

City
MEDFORDState
NJZip Code
08055Purpose of Disbursement
St Paddy's fundraiser space rental

003

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.4565

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MIDDLESEX COUNTY REPUBLICAN WOMENS CLUB

Mailing Address PO BOX 455

City
BELLE MEADState
NJZip Code
08502Purpose of Disbursement
Table for Women's brunch

003

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

700.00

Transaction ID : SB17.4553

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1175.00

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

A. MURPHYS MARKETPLACE

Mailing Address 666 STOKES RD

City
MEDFORDState
NJZip Code
08055Purpose of Disbursement
Food for St Paddy's fundraiser

003

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

347.11

Transaction ID : SB17.4563

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MURPHYS MARKETPLACE

Mailing Address 666 STOKES RD

City
MEDFORDState
NJZip Code
08055Purpose of Disbursement
Food for St Paddy's fundraiser

003

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

83.83

Transaction ID : SB17.4564

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MURPHYS MARKETPLACE

Mailing Address 666 STOKES RD

City
MEDFORDState
NJZip Code
08055Purpose of Disbursement
Supplies

001

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For:

☐ Primary	☐ General
☐ Other (specify) ▼	

State: NJ

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		23		2026

FEC Identification Number

C C00865808

Amount of Each Disbursement this Period

19.99

Transaction ID : SB17.4567

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

450.93

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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☐ 20a	☐ 20b	☐ 20c	☐ 21

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NAME OF COMMITTEE (In Full)

The Committee to Elect Justin Murphy 2024

Full Name (Last, First, Middle Initial)

A. TD BANK

Mailing Address 517 STOKES RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		30		2026

City
MEDFORDState
NJZip Code
08055

FEC Identification Number

C	C00865808
---	-----------

Purpose of Disbursement
Maintenance Fee

001

Amount of Each Disbursement this Period

10.00

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID : SB17.4532

☐ Memo Item

State: NJ

District:

Full Name (Last, First, Middle Initial)

B. TD BANK

Mailing Address 517 STOKES RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		27		2026

City
MEDFORDState
NJZip Code
08055

FEC Identification Number

C	C00865808
---	-----------

Purpose of Disbursement
Maintenance Fee

001

Amount of Each Disbursement this Period

10.00

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID : SB17.4548

☐ Memo Item

State: NJ

District:

Full Name (Last, First, Middle Initial)

C. TD BANK

Mailing Address 517 STOKES RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2026

City
MEDFORDState
NJZip Code
08055

FEC Identification Number

C	C00865808
---	-----------

Purpose of Disbursement
Maintenance Fee

001

Amount of Each Disbursement this Period

10.00

Candidate Name

The Committee to Elect Justin Murphy 2024

Category/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2026

☒ Primary	☐ General
☐ Other (specify) ▼	

Transaction ID : SB17.4572

☐ Memo Item

State: NJ

District:

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

30.00

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

5545.46

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 18 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4105

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☒ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 16 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 19 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4106

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☒ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 17 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 20 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4337

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

MURPHY, JUSTIN, M, Mr.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☐ Personal Funds of the Candidate

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
04 08 / 2024

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1000.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4346

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☐ Personal Funds of the Candidate

Original Amount of Loan

650.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

650.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
05 02 / 2024

M M / D D / Y Y Y Y

D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

650.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
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FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4347

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☐ Personal Funds of the Candidate

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M
05D D
03Y Y Y Y
2024

M M

D D

Y Y Y Y
NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

100.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 23 OF 35
FOR LINE NUMBER:
(check only one) ☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full) Transaction ID : SC/10.4349
The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial) ☐ Memo Item			Election: 2024
MURPHY, JUSTIN, M, Mr.,			☒ Primary
Mailing Address			☐ General
20 WORRELL RD			☐ Other (specify) ▼
City	State	ZIP Code	☐ Personal Funds of the Candidate
TABERNACLE	NJ	08088	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100.00	0.00	100.00

TERMS	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y	M M / D D / Y Y Y Y	0.00 % (apr)	☐ Yes ☒ No
	05 / 20 / 2024	/ / NONE		

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 0.00
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 0.00
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 0.00
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: 0.00

SUBTOTALS This Period This Page (optional).....▶	100.00
TOTALS This Period (last page in this line only).....▶	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 24 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4386

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☐ Personal Funds of the Candidate

Original Amount of Loan

200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 17 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

200.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 25 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4387

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☐ Personal Funds of the Candidate

Original Amount of Loan

200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 03 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

200.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 26 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4406

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☐ Personal Funds of the Candidate

Original Amount of Loan

40.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

40.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
08 21 / 2025M M / D D / Y Y Y Y
1/1/2026

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

40.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 27 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4407

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2024

MURPHY, JUSTIN, M, Mr.,

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☐ Personal Funds of the Candidate

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

Date Due

Interest Rate

(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
09 / 26 / 2025M M / D D / Y Y Y Y
/ 1/1/2026

0.00

% (apr)

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

100.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 28 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4457

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, , ,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☒ Personal Funds of the Candidate

Original Amount of Loan

216.96

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

216.96

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
11 19 / 2025

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

NONE

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

216.96

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 29 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4477

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☒ Personal Funds of the Candidate

Original Amount of Loan

10.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
01 10 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

10.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 30 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4496

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☒ Personal Funds of the Candidate

Original Amount of Loan

200.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 04 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

200.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 31 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4497

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☒ Personal Funds of the Candidate

Original Amount of Loan

100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 09 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

100.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 32 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4498

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☒ Personal Funds of the Candidate

Original Amount of Loan

700.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

700.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 20 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

700.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 33 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4499

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☒ Personal Funds of the Candidate

Original Amount of Loan

350.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

350.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
02 20 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

350.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 34 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4509

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☒ Personal Funds of the Candidate

Original Amount of Loan

1100.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1100.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 19 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

1100.00

TOTALS This Period (last page in this line only).....▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 35 OF 35

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4513

The Committee to Elect Justin Murphy 2024

LOAN SOURCE Full Name (Last, First, Middle Initial)☐ Memo Item

Election: 2026

☒ Primary☐ General☐ Other (specify) ▼

MURPHY, JUSTIN, M, Mr.,

Mailing Address

20 WORRELL RD

City

TABERNACLE

State

NJ

ZIP Code

08088

☒ Personal Funds of the Candidate

Original Amount of Loan

900.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

900.00

TERMS

Date Incurred

Date Due

Interest Rate
(If none, enter 0)

Secured:

M M / D D / Y Y Y Y
03 30 / 2026

M M / D D / Y Y Y Y

None

0.00 % (apr)

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

900.00

TOTALS This Period (last page in this line only).....▶

7966.96

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.