

**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

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

ADDRESS (number and street)

PO BOX 1131

Check if different  
than previously  
reported. (ACC)

GREENVILLE

NC

27835-1131

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C C00697649

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

NC

03

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  
04 / 01 / 2025

through

M M / D D / Y Y Y Y  
06 / 30 / 2025*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 MARTIN, STEVEN, , ,

Signature of Treasurer

MARTIN, STEVEN, , ,

Date

M M / D D / Y Y Y Y  
07 / 15 / 2025

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

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2025

To:

MM / DD / YYYY  
06 / 30 / 2025

	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)) ....	500288.07	715616.63
(b) Total Contribution Refunds (from Line 20(d)) .....	30.00	3890.03
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	500258.07	711726.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	123337.36	266119.06
(b) Total Offsets to Operating Expenditures (from Line 14) .....	213.87	2877.10
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	123123.49	263241.96
8. Cash on Hand at Close of Reporting Period (from Line 27) .....	2100304.68	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	46043.15	

For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Report Covering the Period:

From:

MM / DD / YYYY  
04 / 01 / 2025

To:

MM / DD / YYYY  
06 / 30 / 2025**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).....

300981.08

380219.43

(ii) Unitemized .....

6682.99

13773.20

(iii) TOTAL of contributions  
from individuals ▶

307664.07

393992.63

(b) Political Party Committees.....

0.00

0.00

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

192624.00

321624.00

(d) The Candidate .....

0.00

0.00

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

500288.07

715616.63

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES .....

61224.78

76425.86

## 13. LOANS:

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

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

0.00

0.00

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

213.87

2877.10

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

147.00

324.00

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

561873.72

795243.59

# **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.....	123337.36	266119.06
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 .....	30.00	1390.03
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	2500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	30.00	3890.03
21. OTHER DISBURSEMENTS .....	20000.00	57841.01
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	143367.36	327850.10

## **III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1681798.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	561873.72
25. SUBTOTAL (add Line 23 and Line 24).....	2243672.04
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	143367.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2100304.68

: 97 'A -G7 9 @ @ B9 CI G'H9 LH'F9 @ H98 'HC '5 'F9 DCFH ZG7 <98 I @ 'CF 'H9 A -N5 HCB

Form/Schedule: F3N

Transaction ID :

PLEASE NOTE: THE COMMITTEE HAS DEMONSTRATED THE NECESSARY STEPS TO ESTABLISH BEST EFFORTS TO OBTAIN AND DISCLOSE THE FULL IDENTIFICATION OF ALL INDIVIDUALS WHO CONTRIBUTE IN EXCESS OF \$200 IN AN ELECTION CYCLE. THESE EFFORTS INCLUDE A CLEAR REQUEST WITH THE ORIGINAL SOLICITATION, FOLLOWED BY A REQUEST FOR MISSING INFORMATION LETTER WITHIN 30 DAYS, WHICH CLEARLY ASKS FOR THE MISSING INFORMATION WITHOUT SOLICITING A CONTRIBUTION. THE LETTER READS: FEDERAL LAW REQUIRES US TO MAKE OUR BEST EFFORTS TO COLLECT AND REPORT THE NAME, MAILING ADDRESS, OCCUPATION AND NAME OF EMPLOYER OF ALL INDIVIDUALS WHO CONTRIBUTE IN EXCESS OF \$200 IN AN ELECTION CYCLE. WE THEN ENCLOSE A SELF ADDRESSED ENVELOPE AND INCLUDE A TELEPHONE NUMBER TO REACH THE COMMITTEE WITH ANY QUESTIONS. A SECOND REQUEST FOR MISSING INFORMATION LETTER IS SENT IF WE DO NOT RECEIVE THE INFORMATION IN A TIMELY MANNER. IN THE EVENT THAT WE RECEIVE ADDITIONAL INFORMATION FROM CONTRIBUTORS WHOSE INFORMATION WAS NOT ORIGINALLY DISCLOSED, WE WILL AMEND THE APPROPRIATE REPORT TO REFLECT THE ADDITIONAL DISCLOSURES PROPERLY.

Form/Schedule:

Transaction ID:

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

PAGE 6 OF 194

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

ABANDONATO, MARCEL, , ,

**A.**

Mailing Address 1693 HONORS CIR

City  
CORONAState  
CAZip Code  
92883-0757FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MJA & ASSOCIATES, INCOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 02 2025

Transaction ID : AE494BD36857A4D08AD6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ADKINS, LEAH, , , MD

**B.**

Mailing Address 1076 PINNACLE CLUB DR

City  
GROVE CITYState  
OHZip Code  
43123-7927FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AVINA WOMENS CAREOccupation  
PHYSICIAN

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  
04 25 2025

Transaction ID : A22AD2B9BE9A74E51861

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ARMSTRONG, SCOTT, , ,

**C.**

Mailing Address 9401 HINSHAW RD

City  
WAKE FORESTState  
NCZip Code  
27587-4403FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELECTEL COOPERATIVE FCUOccupation  
EXECUTIVE

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  
05 29 2025

Transaction ID : A4F635D89362649F89FB

Amount of Each Receipt this Period

250.00

☐ Memo Item

1750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

AUSBAND, FRANK, , ,

**A.** Mailing Address 177 CHICHAUK TRAIL

City

KITTY HAWK

State

NC

Zip Code

27949-3525

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2025

Transaction ID : A929B2CB3EA394C45984

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BAKSIM, SANJAY, , ,

**B.** Mailing Address 238 NEW GATE LOOP

City

LAKE MARY

State

FL

Zip Code

32746-4126

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PAC ASSOCIATES

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 23 / 2025

Transaction ID : A2B9F903E13BF4920949

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BARWICK, CURTIS, GREYLON, ,

**C.** Mailing Address 103 COUNTRY CLUB CIR

City

CLINTON

State

NC

Zip Code

28328

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

AGRIBUSINESS

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  
05 / 30 / 2025

Transaction ID : AF9484E9E06FD4583920

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

2500.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

BASNIGHT, ELIZABETH, S, ,

**A.** Mailing Address 177 SCUPPERNONG RDCity  
MANTEOState  
NCZip Code  
27954-9300FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

Transaction ID : A49D7F1950F254B2B9A6

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BAYLISS, JOHN, F, , JR.

**B.** Mailing Address PO BOX 300City  
WANCHESEState  
NCZip Code  
27981-0300FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BAYLISS BOAT WORKSOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	5

Transaction ID : A07E4F92B0A7C424FB1B

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BENYAMIN, RAMSIN, , ,

**C.** Mailing Address 5 WORTHINGTON CTCity  
BLOOMINGTONState  
ILZip Code  
61704-2794FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	5

Transaction ID : AE802FC4CBFE346DD92C

Amount of Each Receipt this Period

2000.00

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

5250.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

BERRY, GEORGE, H, ,

**A.**

Mailing Address 239 N DOGWOOD TRAIL

City

SOUTHERN SHORES

State

NC

Zip Code

27949-3138

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 ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

Transaction ID : A3BF5942183984532B44

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BGR GOVERNMENT AFFAIRS LLC

**B.**

Mailing Address PO BOX 14416

City

WASHINGTON

State

DC

Zip Code

20044-4416

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

Transaction ID : A91633E169E07417BAEB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

VERIFIED NON-CORPORATE SEE MEMO ITEMS

Full Name (Last, First, Middle Initial)

EARDENSOHN, TODD, , ,

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BGR GOVERNMENT AFFAIRS LLC

Occupation

CFO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

Transaction ID : A744F5037123548FA9A2

Amount of Each Receipt this Period

500.00

☒ Memo Item

PARTNERSHIP: BGR GOVERNMENT AFFAIRS LLC

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

1250.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

DEL MONTE, BRENT, , ,

**A.**

Mailing Address 2901 28TH STREET NORTHWEST

City

WASHINGTON

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BGR GROUPOccupation  
PRINCIPAL

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  
04 17 2025

Transaction ID : AF4C084453CED4BCE845

Amount of Each Receipt this Period

500.00

☒ Memo Item

PARTNERSHIP: BGR GOVERNMENT AFFAIRS LLC

**B.**

Full Name (Last, First, Middle Initial)

BILLY, BILLY, , ,

Mailing Address 2512 DUNCAN ST

City

COLUMBIA

State

SC

Zip Code

29205-3142

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CCULOccupation  
SVP

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 27 2025

Transaction ID : A46B85DA2B89849D0BD0

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

BLAKELY, JOHNETTA, , , MD

Mailing Address 308 WALNUT DR

City

NASHVILLE

State

TN

Zip Code

37205-2916

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TENNESSEE ONCOLOGYOccupation  
PHYSICIAN

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  
04 14 2025

Transaction ID : A687BA30BD74C41D8A42

Amount of Each Receipt this Period

500.00

☐ Memo Item

1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

BOYD, SAMUEL, G, ,

**A.**

Mailing Address 605 BRIDGES ST

City

MOREHEAD CITY

State

NC

Zip Code

28557

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOUTHERN SALT RESTAURANT

Occupation

OWNER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 02 / 2025

02

2025

Transaction ID : A0281D904F2AB4444AD0

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BRADY, LEIGH, , ,

**B.**

Mailing Address 1832 WYSONG CT

City

RALEIGH

State

NC

Zip Code

27612-6444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SECU

Occupation

CEO

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  
05 / 30 / 2025

30

2025

Transaction ID : A4FB187A79A7A4AA7ACA

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BRINDLEY, DOUGLAS, R, ,

**C.**

Mailing Address 103 OSPREY LN

City

SOUTHERN SHORES

State

NC

Zip Code

27949-3840

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BRENDLEY BEACH

Occupation

VACATION RENTALS

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  
06 / 30 / 2025

30

2025

Transaction ID : AC04C393A2B5643529FF

Amount of Each Receipt this Period

500.00

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

4500.00

**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

BROWN, CANDACE, P, ,

**A.**

Mailing Address 861 SANTEE DR

City

FLORENCE

State

SC

Zip Code

29501-5713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 15 2025

Transaction ID : A3972F0CF1C414241B4E

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BROWN, JAMES, , , JR.

**B.**

Mailing Address 861 SANTEE DR

City

FLORENCE

State

SC

Zip Code

29501-5713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SYNERGI PARTNERSOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 15 2025

Transaction ID : AD7B4A7D1F47F412FA57

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BROWN, WILLIAM, S, , III

**C.**

Mailing Address PO BOX 450

City

WANCHESE

State

NC

Zip Code

27981-0450

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

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  
06 20 2025

Transaction ID : A3917FE594E444E48BEC

Amount of Each Receipt this Period

500.00

☐ Memo Item

5500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

BRUNER, BRYAN, , , MD

**A.**

Mailing Address 701 FEGANS PATH

City

COLLEYVILLE

State

TX

Zip Code

76034-6674

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UROLOGY CLINICS OF NORTH TEXAS

Occupation

PHYSICIAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 14 2025

Transaction ID : A52E8152981C54370B20

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BURNS, MICHAEL J, , ,

**B.**

Mailing Address 7287 HORIZON DR

City

WEST PALM BEACH

State

FL

Zip Code

33412-3027

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 ▼

208.21

Date of Receipt

M M / D D / Y Y Y Y Y  
06 22 2025

Transaction ID : A4A1E248EDFA04C90A89

Amount of Each Receipt this Period

20.82

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M M / D D / Y Y Y Y Y  
06 22 2025

Transaction ID : AFB69C4477E97464FA90

Amount of Each Receipt this Period

20.82

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

3520.82

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

BURNS, MICHAEL J, , ,

**A.**

Mailing Address 7287 HORIZON DR

City

WEST PALM BEACH

State

FL

Zip Code

33412-3027

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 ▼

260.26

Date of Receipt

M M / D D / Y Y Y Y Y  
06 25 2025

Transaction ID : A8D7C292CBEAB4F43885

Amount of Each Receipt this Period

52.05

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M M / D D / Y Y Y Y Y  
06 25 2025

Transaction ID : A006EE4906565420B8F8

Amount of Each Receipt this Period

52.05

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

BURT, STEVEN, , ,

**C.**

Mailing Address 4238 W DEGRAY DR

City

SOUTH JORDAN

State

UT

Zip Code

84009-7731

FEC ID number of contributing  
federal political committee.

C

Name of Employer

POSIGEN, PBC

Occupation

CHIEF PUBLIC POLICY &amp; ENGAGEMENT OF

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  
05 21 2025

Transaction ID : A79482F35D0334CE5B5C

Amount of Each Receipt this Period

500.00

☐ Memo Item

552.05

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

BUTTAR, ALI, , ,

**A.**

Mailing Address 102 GRATTAN CT

City

MORRISVILLE

State

NC

Zip Code

27560-7048

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
8MSOLAROccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

Transaction ID : AC75A590743F543FC8CB

Amount of Each Receipt this Period

1650.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CARLISLE, TIM, , ,

**B.**

Mailing Address 94717 PARK STREET

City

MYRTLE BEACH

State

SC

Zip Code

29572

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAROLINA TRUST FCUOccupation  
PRESIDENT/CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AD78119A1A188494F80C

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CARRION, JOSE, , ,

**C.**Mailing Address 86 CALLE CERVANTES  
PH

City

SAN JUAN

State

PR

Zip Code

00907-1937

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OSAGE LLCOccupation  
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

Transaction ID : AACEA01FA157443B1B88

Amount of Each Receipt this Period

500.00

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

2400.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

CEFALU, CHRIS, , ,

**A.**

Mailing Address 7007 WESTCHESTER CT

City

MCKINNEY

State

TX

Zip Code

75072-5570

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UROLOGY CLINICS OF NORTH TEXAS

Occupation

MD

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : AE05159D137C34CDCBB8

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHEN, ROY, , , MD

**B.**

Mailing Address 7 PHEASANT RUN

City

SETAUKET

State

NY

Zip Code

11733-2220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AAE58D151FC0142C0812

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CHESTNUTT, MICHAEL, , ,

**C.**

Mailing Address PO BOX 1692

City

CLINTON

State

NC

Zip Code

28329-1692

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : ABABEEF890E334B8DB9E

Amount of Each Receipt this Period

500.00

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

5000.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

CHU, DAVID, , ,

**A.**

Mailing Address 175 GNARLED HOLLOW RD

City

EAST SETAUKET

State

NY

Zip Code

11733-1933

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

MD

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		10		2025

Transaction ID : AB10A9FD27B51450BADC

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CIRRONE MD, JOE, , ,

**B.**

Mailing Address 22 LEDGEWOOD CIR

City

EAST SETAUKET

State

NY

Zip Code

11733-1151

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW YORK CANCER BLOOD SPECIALISTS

Occupation

MD

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		10		2025

Transaction ID : AD850D9740AB74108A34

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CLARKE, CHRIS, T, ,

**C.**

Mailing Address 841 FARROW FORK RD

City

ENGELHARD

State

NC

Zip Code

27824-9583

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		20		2025

Transaction ID : A262FFF4061454546ADA

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

CLARK, JEFFREY, D, ,

**A.**

Mailing Address 202 ANNE ST

City

JACKSONVILLE

State

NC

Zip Code

28540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MARINE FEDERAL CREDIT UNION

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 20 / 2025

Transaction ID : A7DF782F97E474E03B72

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

CLARK, JOE, , ,

**B.**

Mailing Address 10224 BERKELEY POND DR

City

CHARLOTTE

State

NC

Zip Code

28277-8665

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SKYLA FCU

Occupation

GENERAL COUNSEL

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  
06 / 02 / 2025

Transaction ID : A80B872F50A6340B5822

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COHEN, BEN, , ,

**C.**

Mailing Address 172 COLUMBIA BLVD

City

WATERBURY

State

CT

Zip Code

06710-1707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AUGUST HEALTHCARE MANAGEMENT

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 22 / 2025

Transaction ID : AF00821DFD765462A804

Amount of Each Receipt this Period

3500.00

☐ Memo Item

4750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

CONE, STEPHEN, , MD

**A.**

Mailing Address 3614 NOTTINGHAM ST

City  
HOUSTONState  
TXZip Code  
77005-2221FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRIVIA HEALTHOccupation  
PHYSICIAN

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  
04 22 2025

Transaction ID : A5573D7DE06DD4391993

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

COOK, D.O., FASA ANESTHESIOLOG, CHRISTOPHER, , M.D.

**B.**

Mailing Address 11333 MARBELLA DR

City  
OKLAHOMA CITYState  
OKZip Code  
73173-8154FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
PHYSICIAN ANESTHESIOLOGIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 18 2025

Transaction ID : A35A4EACC700D45CAA2F

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DAUGHTRY, KELLY, , ,

**C.**

Mailing Address 299 VENTASSO DR

City  
CLAYTONState  
NCZip Code  
27527FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DAUGHTRY & STARLINGOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 30 2025

Transaction ID : AD26A608C3DC245658ED

Amount of Each Receipt this Period

2500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

DAUGHTRY, N, LEO, ,

**A.**

Mailing Address PO BOX 1264

City

SMITHFIELD

State

NC

Zip Code

27577

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DAUGHTRY, WOODARD, LAWRENCE &amp; STAF

Occupation

ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 30 2025

Transaction ID : A80802883636A4B7EAC1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DICKER, PAUL, , , MD

**B.**

Mailing Address 549 ALOSIO DR

City

RIVER VALE

State

NJ

Zip Code

07675-5584

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIFELINE MEDICAL ASSOCIATES

Occupation

PHYSICIAN

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  
04 23 2025

Transaction ID : A2A2960EDC3EA4B68AF8

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DIGUGLIELMO, THERESA, , ,

**C.**

Mailing Address 2 LEWIS DR

City

MAYS LANDING

State

NJ

Zip Code

08330-5701

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FRIER LEVITT

Occupation

ATTORNEY

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  
04 18 2025

Transaction ID : AC4AEB90E10A74524B76

Amount of Each Receipt this Period

500.00

☐ Memo Item

1750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

DOLISI, FRANK, , ,

**A.**

Mailing Address 85 SAGAMORE DR

City  
SYOSSETState  
NYZip Code  
11791-1613FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
OBYN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 21 2025

Transaction ID : A8304ED5A42A144E2999

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DONLEY, ROBERT, , ,

**B.**

Mailing Address 251 POTTERS RIDGE DR

City  
MOCKSVILLEState  
NCZip Code  
27028-6288FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MEMBERS CREDIT UNIONOccupation  
CREDIT UNION PRESIDENT& CEO

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  
05 27 2025

Transaction ID : A600BD0B4913F40658B4

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DONOGHUE, JOHN, , ,

**C.**

Mailing Address 311 SAINT ANNES MOOR

City  
WILMINGTONState  
NCZip Code  
28412-7366FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAPE FEAR SOLAR SYSTEMS, LLCOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 06 2025

Transaction ID : A675E01807792498BA68

Amount of Each Receipt this Period

3300.00

☐ Memo Item

4800.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

DUBOSE, CHARLES, , JR.

**A.**

Mailing Address 900 COHARIE DR

City  
CLINTONState  
NCZip Code  
28328-3024FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 30 2025

Transaction ID : AE5E9C8B2BEB54570AA1

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

DUBOSE, CHARLES, HOLDEN, , III

Mailing Address 305 ARROWHEAD DR W

City  
CLINTONState  
NCZip Code  
28328FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OWNEROccupation  
DUBOSE STRAPPING

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 30 2025

Transaction ID : A3A28C826B39F40A682C

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

EAGLE, DAVID, , ,

Mailing Address 19017 PENINSULA POINT DR

City  
CORNELIUSState  
NCZip Code  
28031-7601FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CANCER & BLOOD SPECIALISTSOccupation  
PHYSICIAN

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  
04 10 2025

Transaction ID : A84B78E41008746D5A60

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

2500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

EDNEY, MARK, , ,

**A.**

Mailing Address 627 RIDGE RD

City

SALISBURY

State

MD

Zip Code

21801-5717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHESAPEAKE UROLOGY

Occupation

UROLOGIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	2	5

Transaction ID : A17444F009FF641C9898

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ELRAFEI, TAREK, , ,

**B.**

Mailing Address 2330 EASTCHESTER RD

City

BRONX

State

NY

Zip Code

10469-5930

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

ONCOLOGIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	2	5

Transaction ID : A816470D091C646C1960

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ENGLE, MONA, , ,

**C.**

Mailing Address 61 AIRPORT RD

City

MARIETTA

State

PA

Zip Code

17547-9104

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MONA ENGLE

Occupation

TN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	5

Transaction ID : ACED459ABBDC649FD8A6

Amount of Each Receipt this Period

500.00

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

2000.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

ERTER, JACK, , MD

**A.**

Mailing Address 2409 VALLEY BROOK RD

City  
NASHVILLEState  
TNZip Code  
37215-2018FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TENNESSEE ONCOLOGYOccupation  
PHYSICIAN

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  
04 / 16 / 2025

Transaction ID : ADBEDAE65D72E495C9CC

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ETHERIDGE, WILL, ,

**B.**

Mailing Address 5908 TRIANGLE DR

City  
RALEIGHState  
NCZip Code  
27617-4741FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOUTHERN ENERGY MANAGEMENTOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 12 / 2025

Transaction ID : A77B887A1DD6440A98A0

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FANN, J, CHRIS, ,

**C.**

Mailing Address 907 COHARIE DR

City  
CLINTONState  
NCZip Code  
28328-3023FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 30 / 2025

Transaction ID : A3B49815A5DAD46E2A98

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

3850.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

FEARING, MALCOLM, KEITH, , III

**A.** Mailing Address PO BOX 759City  
MANTEOState  
NCZip Code  
27954-0759FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GMAC INSURANCEOccupation  
PRESIDENT

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  
06 20 2025

Transaction ID : AD7940B76384B4394AFB

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FELTZ, JOHN, , MD

**B.** Mailing Address 29 OLD ORCHARD RDCity  
MORRISTOWNState  
NJZip Code  
07960-3321FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIFELINE MEDICAL ASSOCIATESOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 18 2025

Transaction ID : A10B58376261A4E36814

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FERNANDEZ, LUIS, , MD

**C.** Mailing Address 128 E SOARING AVECity  
PRESCOTTState  
AZZip Code  
86301-4485FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENESIS OB-GYN/WOMENS MEDICAL CAREOccupation  
OB-GYN PHYSICIAN

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  
04 26 2025

Transaction ID : AF919155FF55E4686A59

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**Full Name (Last, First, Middle Initial)  
FILLOS, TRIANTAFILLOS, , MD

Mailing Address 16624 12TH RD

City  
WHITESTONEState  
NYZip Code  
11357-2806FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYCBSOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 10 2025

Transaction ID : A85EEA1E780FE4FE4823

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
FISHER, JOHN, J, ,

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 16 2025

Transaction ID : AC24B21F5FBBBD4C0BB3F

Amount of Each Receipt this Period

2000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
FOX, ROBERT, C, ,

Mailing Address 400 SUMMERLAND KEY LN

City  
LAFAYETTEState  
LAZip Code  
70508-5190FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LHC GROUPOccupation  
SVP

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 23 2025

Transaction ID : A3037D317D8D842B09D2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

4000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

FRAENKEL, ALEX, , ,

**A.**

Mailing Address 80 N 5TH ST

City  
BROOKLYNState  
NYZip Code  
11249-3125FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PLUS POWER SERVICES LLCOccupation  
EXECUTIVE VICE CHAIRMAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	5

Transaction ID : A60E8418517754943887

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FRANCIS, LAURA, , ,

**B.**

Mailing Address 273 MARCHMONT DR

City  
LOS GATOSState  
CAZip Code  
95032-5658FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SI-BONE, INC.Occupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

Transaction ID : A951DD2C635034B72BEC

Amount of Each Receipt this Period

2000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**C.**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

Transaction ID : A4AFA582F632944CF822

Amount of Each Receipt this Period

2000.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

2500.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

FRENCH, DAN, , ,

**A.**

Mailing Address 3720 ALTA VISTA LN

City

DALLAS

State

TX

Zip Code

75229-2726

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UROLOGY CLINICS OF NORTH TEXAS

Occupation

UROLOGIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 15 2025

Transaction ID : A9C9FA1D620AB4956A71

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

FRIER, DANIEL, , ,

**B.**

Mailing Address 84 BLOOMFIELD AVE

City

PINE BROOK

State

NJ

Zip Code

07058-9709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FRIER &amp; LEVITT, LLC

Occupation

LAWYER

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  
04 25 2025

Transaction ID : A32149E81AF0C40CF9AB

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GELLY, ERIC, , ,

**C.**

Mailing Address 1122 S KINGS DR

City

CHARLOTTE

State

NC

Zip Code

28207-1806

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SKYLA FEDERAL CREDIT UNION

Occupation

CEO

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  
06 13 2025

Transaction ID : AD4FCB11BB1EA4F188DC

Amount of Each Receipt this Period

500.00

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

4500.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

GEORGE, JERRY, , MD

**A.**

Mailing Address 9 HANCOCK CT

City

SOUTH SETAUKET

State

NY

Zip Code

11720-4610

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW YORK CANCER AND BLOOD SPECIALIS

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 10 / 2025

Transaction ID : A34ECC941BFD34D4CB58

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GERAGHTY, DUKE, ,

**B.**

Mailing Address 103 THE WINERY

City

MANTEO

State

NC

Zip Code

27594

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OBHBA

Occupation

GOVERNMENT AFFAIRS DIR

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  
06 / 20 / 2025

Transaction ID : A15386FD2AC5E4976820

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GERGEN, JAMES, ,

**C.**

Mailing Address 28 WENTWORTH ST

City

CHARLESTON

State

SC

Zip Code

29401-1624

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CPM FEDERAL CREDIT UNION

Occupation

CEO

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  
05 / 15 / 2025

Transaction ID : A9AECB48A16DF4241978

Amount of Each Receipt this Period

500.00

☐ Memo Item

1750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

GHARIBO, CHRISTOPHER, , ,

**A.**

Mailing Address 7 SHINNECOCK TRL

City

FRANKLIN LAKES

State

NJ

Zip Code

07417-1033

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYU

Occupation

MD

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  
05 16 2025

Transaction ID : A3990CFEA97854CB1994

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GRINSTEAD, BILL, , ,

**B.**Mailing Address 77 SANDS ST  
FL 6

City

BROOKLYN

State

NY

Zip Code

11201-1431

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ORENDA, INC.

Occupation

CEO

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  
05 21 2025

Transaction ID : AD3940F3BCB54481AA6B

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GROSS, MICHAEL, , ,

**C.**

Mailing Address 6115 PRESTONSHIRE LN

City

DALLAS

State

TX

Zip Code

75225-1912

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UROLOGY CLINICS OF NORTH TEXAS

Occupation

UROLOGIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 12 2025

Transaction ID : A4B1B55C8DB2B451EB69

Amount of Each Receipt this Period

3500.00

☐ Memo Item

4500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

GRUENSTEIN, STEVEN, , ,

**A.**

Mailing Address 40 VERDUN AVE

City

NEW ROCHELLE

State

NY

Zip Code

10804-2215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

MD

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  
04 / 10 / 2025

Transaction ID : A8969F16FE56741F7849

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GUIDA, ALFONSO, , , JR.

**B.**

Mailing Address 440 1ST ST NW

City

WASHINGTON

State

DC

Zip Code

20001-2023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

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  
06 / 26 / 2025

Transaction ID : ABFB8F04C8CB44755B11

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

GUIGOVA, ADRIANA, , , MD

**C.**

Mailing Address 7 PHEASANT RUN

City

SETAUKET

State

NY

Zip Code

11733-2220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2025

Transaction ID : A8BB5C14009CD49BB8FC

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

GUNTER, WILLIAM, , MD

**A.**

Mailing Address 4011 NOTTAWAY RD

City  
DURHAMState  
NCZip Code  
27707-5424FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UWH OF THE CAROLINASOccupation  
PHYSICIAN

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  
04 23 2025

Transaction ID : A2DB803E639324AC389E

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HALL, PHILO, ,

**B.**

Mailing Address 703 17TH ST SE

City  
WASHINGTONState  
DCZip Code  
20003-3126FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EPSTEIN BECKER GREENOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 03 2025

Transaction ID : A21E23E4015854A018CC

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HALL, TODD, ,

**C.**

Mailing Address 4486 TIMBERFIELD DR

City  
PFAFFTOWNState  
NCZip Code  
27040-9044FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TRULIANT FEDERAL CREDIT UNIONOccupation  
PRESIDENT/CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 15 2025

Transaction ID : AE5B040FB6BD6482180A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

3000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

HARGETT, WILLIAM, BRYAN, , III

**A.** Mailing Address PO BOX 351City  
AYDENState  
NCZip Code  
28513-0351FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 13 2025

Transaction ID : A43210270DE1D4D0DB9E

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HARRIS, MD, JOSHUA, , , MD

**B.** Mailing Address 107 WYATT RDCity  
GARDEN CITYState  
NYZip Code  
11530-3117FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYCBSOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 10 2025

Transaction ID : A3A4061EAC311485E8F1

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HARVEY, RYAN, , ,

**C.** Mailing Address 212 CAROLINA CROSSING DRCity  
YORKState  
SCZip Code  
29745-8853FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FAMILY TRUST FEDERAL CREDIT UNIONOccupation  
PRESIDENT/CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 28 2025

Transaction ID : A7F2293B6BD0340228D2

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

4500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

HEMPHILL, MICHAEL, , MD

**A.**

Mailing Address 3654 KNOLLWOOD RD

City  
NASHVILLEState  
TNZip Code  
37215-2013FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TENNESSEE ONCOLOGYOccupation  
PHYSICIAN

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  
04 14 2025

Transaction ID : A91FA0D1AC7304ED2A0F

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HENNESSY, JAMES, JORDAN, ,

**B.**

Mailing Address PO BOX 2372

City  
KITTY HAWKState  
NCZip Code  
27949FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PAMLICO MANAGEMENT GROUPOccupation  
PROPRIETOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 20 2025

Transaction ID : AAFE1940C468A444F9AC

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HERRERO, REBECCA, , MD

**C.**

Mailing Address 1864 WOODHAVEN DR

City  
HENDERSONState  
NVZip Code  
89074-0927FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WOMEN'S HEALTH ASSOCIATES OF SOUTHOccupation  
PHYSICIAN

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  
04 18 2025

Transaction ID : A8031B347496C4AE6AFE

Amount of Each Receipt this Period

500.00

☐ Memo Item

3750.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

HILL, NINA, M, ,

**A.**

Mailing Address 7919 MASONBORO SOUND RD

City  
WILMINGTONState  
NCZip Code  
28409-2674FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 28 2025

Transaction ID : A78A4A91756754ED88BF

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HILL, STEPHEN, , ,

**B.**

Mailing Address 200 N QUEEN STREET

City  
KINSTONState  
NCZip Code  
28501FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HILLCO, LTDOccupation  
VP

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 28 2025

Transaction ID : A0B1CD067DF9442478C3

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HOOD, LYNN, M, ,

**C.**

Mailing Address 6116 CRESCENT KNOLL DR

City  
RALEIGHState  
NCZip Code  
27614-8954FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRINCIPLE LTCOccupation  
CEO

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 28 2025

Transaction ID : A867CF91CFA6E4877987

Amount of Each Receipt this Period

1000.00

☐ Memo Item

8000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

HOOD, LYNN, M, ,

**A.** Mailing Address 6116 CRESCENT KNOLL DRCity  
RALEIGHState  
NCZip Code  
27614-8954FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PRINCIPLE LTCOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y	
04		28		2025	

Transaction ID : A20F631EC3A074244A69

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

HUTH, MATTHEW, T, ,

**B.** Mailing Address PO BOX 92City  
WANCHESEState  
NCZip Code  
27981FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FRESH CATCH SEAFOODOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y	
06		20		2025	

Transaction ID : A52C9EEB9EA044EEFB9D

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

IVEY, ROBERT, W, ,

**C.** Mailing Address 2666 LENNOXILLE RDCity  
BEAUFORTState  
NCZip Code  
28516FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
FARMER

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	
06		13		2025	

Transaction ID : A50E0CAF573884F57B60

Amount of Each Receipt this Period

250.00

☐ Memo Item

4750.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

JABLONSKI, REGINA, , MD

**A.**

Mailing Address 8 DAVIDS WAY

City

PORT JEFFERSON

State

NY

Zip Code

11777-1154

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

DOCTOR

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  
04 / 10 / 2025D D / Y Y Y Y Y  
10 / 2025Y Y Y Y Y  
2025

Transaction ID : AB77B532131FD454F953

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JACKSON, JAMIE, WELLIE, ,

**B.**

Mailing Address 6205 HOBBDON HWY

City

CLINTON

State

NC

Zip Code

28328-5803

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 30 / 2025D D / Y Y Y Y Y  
30 / 2025Y Y Y Y Y  
2025

Transaction ID : AFAC7EE5B884B460F868

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JAIN, DR SANJEEV, , MD

**C.**

Mailing Address 14 REED DR

City

ROSLYN

State

NY

Zip Code

11576-3214

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

DOCTOR

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  
04 / 10 / 2025D D / Y Y Y Y Y  
10 / 2025Y Y Y Y Y  
2025

Transaction ID : AAE25EBD3EBC94E52B7C

Amount of Each Receipt this Period

500.00

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

1750.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

JOHNSON, BRIAN, , ,

**A.**

Mailing Address 221 S FAYETTE ST

City

ALEXANDRIA

State

VA

Zip Code

22314-3519

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VETERANS GUARDIANOccupation  
EVP, GOV AFFAIRS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	5	

Transaction ID : AECDD077F2745476283B

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JONES, JENA, , ,

**B.**

Mailing Address 358 IROQUOIS TRL

City

COLUMBUS

State

NC

Zip Code

28722-2901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PGT SOLUTIONSOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	5	

Transaction ID : A950E8D9CBDD040C5B0C

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

JONES, KEN, , ,

**C.**

Mailing Address 6825 US HWY 70 E

City

PRINCETON

State

NC

Zip Code

27569-7801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DEACON JONES AUTO PARKOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AA5B3178E75E04278A45

Amount of Each Receipt this Period

1000.00

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

2250.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

JOYCE, HARRIETT, , ,

**A.**

Mailing Address 715 COMET DR

City  
BEAUFORTState  
NCZip Code  
28516FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
CONSTRUCTION

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 02 2025

Transaction ID : A92C2A13731334C77B75

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KAPOOR, DEEPAK, , ,

**B.**

Mailing Address 333 LAS OLAS WAY

City  
FORT LAUDERDALEState  
FLZip Code  
33301-2363FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 29 2025

Transaction ID : A62B4DB39665B45EEAD4

Amount of Each Receipt this Period

7000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KAPOOR, DEEPAK, , ,

**C.**

Mailing Address 333 LAS OLAS WAY

City  
FORT LAUDERDALEState  
FLZip Code  
33301-2363FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 29 2025

Transaction ID : A5295C635836048E8984

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

REATTRIBUTION FROM

8000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

KAPOOR, DEEPAK, , ,

**A.**

Mailing Address 333 LAS OLAS WAY

City

FORT LAUDERDALE

State

FL

Zip Code

33301-2363

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	5

Transaction ID : AEDFF3D0F50F64B6E9B4

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REATTRIBUTION TO

Full Name (Last, First, Middle Initial)

KELLY, BRIAN, , ,

**B.**

Mailing Address 4694 AVERY LN

City

LAKE OSWEGO

State

OR

Zip Code

97035-5754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WOMEN'S HEALTHCARE ASSOCIATES, LLC

Occupation

CEO

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	5

Transaction ID : AB2E1F5600C8B424A821

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KIM, GENE, , , MD

**C.**

Mailing Address 29 JAMES ST

City

FAIRPORT

State

NY

Zip Code

14450

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	5

Transaction ID : A824FD7BFB651435AAB9

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

525.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**Full Name (Last, First, Middle Initial)  
WINRED**A.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	5

Transaction ID : A0618442DC7FA426BB87

Amount of Each Receipt this Period

25.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
KIM, GENE, , MD**B.** Mailing Address 29 JAMES STCity  
FAIRPORTState  
NYZip Code  
14450FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

SELF

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

Transaction ID : AD845817F9C9D4162942

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINRED**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	6		2	0	2	5

Transaction ID : A7D0BE07C4C0B47CC8FF

Amount of Each Receipt this Period

25.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ►

25.00

**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 Page

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

KING, STEVE, BARRY, ,

**A.**

Mailing Address PO BOX 596

City  
MANTEO

State  
NC

Zip Code  
27954-0596

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 ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 16 2025

Transaction ID : A2392019FBADE4EEBBD8

Amount of Each Receipt this Period

7000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KING, STEVE, BARRY, ,

**B.**

Mailing Address PO BOX 596

City  
MANTEO

State  
NC

Zip Code  
27954-0596

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 ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 20 2025

Transaction ID : A7D860804021F40D591E

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

REATTRIBUTION FROM

Full Name (Last, First, Middle Initial)

KING, STEVE, BARRY, ,

**C.**

Mailing Address PO BOX 596

City  
MANTEO

State  
NC

Zip Code  
27954-0596

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 ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 20 2025

Transaction ID : AEC88307C52624980A40

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REATTRIBUTION TO

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

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

7000.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

KIVETT, TELIA, , ,

**A.** Mailing Address PO BOX 590City  
CLINTONState  
NCZip Code  
28329FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KEVITT'SOccupation  
BUSINESS OWNER

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  
05 30 2025

Transaction ID : A793C434692274374BF9

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

KOGEN, ALEKSANDRA, , ,

**B.** Mailing Address 27 FLAGG CTCity  
STATEN ISLANDState  
NYZip Code  
10304-1157FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ACCUREFERENCE MEDICAL LABOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 21 2025

Transaction ID : A4849AB9A1EBD4CB7892

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LAMBRECHT, LAUREN, , , MD

**C.** Mailing Address 203 LAKEWOOD CTCity  
MOBILEState  
ALZip Code  
36608-2265FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AZALEA CITY PHYSICIANS FOR WOMENOccupation  
PHYSICIAN

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  
04 18 2025

Transaction ID : A44840A8950A84205936

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1750.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

LANGDON, ROBERT, E, , II

**A.**

Mailing Address 96 DUPLIN LN

City  
CLAYTONState  
NCZip Code  
27527-9433FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 28 2025

Transaction ID : A30FA9D42EAC6437CA24

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LEE, JASON, , ,

**B.**

Mailing Address 198 ASHLEY AVE

City  
CHARLESTONState  
SCZip Code  
29403-5824FEC ID number of contributing  
federal political committee.

C

Name of Employer  
REVOccupation  
PRIEST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 29 2025

Transaction ID : A726912EADF6442DAA47

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LEE, MARK, , ,

**C.**

Mailing Address 7105 MANOR OAKS DR

City  
RALEIGHState  
NCZip Code  
27615-5571FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BAKER ROOFINGOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 01 2025

Transaction ID : ACA0787605A4C4DE8968

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

LIGHT, JAYMI, , ,

**A.**Mailing Address 2055 15TH ST N  
APT 605City  
ARLINGTONState  
VAZip Code  
22201-6410FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAS INSTITUTEOccupation  
LOBBYIST

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  
06 / 24 / 2025

Transaction ID : ADC75B9DBC5F4709AA1

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MAJOR, DIANE, MACPHERSON, ,

**B.**

Mailing Address 2232 WESTWOOD PL

City  
FALLS CHURCHState  
VAZip Code  
22043FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE D MAJOR GROUP LLCOccupation  
CEO

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  
05 / 15 / 2025

Transaction ID : AA781D69D15324F54BA4

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MANCHIKANTI, CHANDRAKALA, , ,

**C.**

Mailing Address 2075 NATCHEZ LN

City  
PADUCAHState  
KYZip Code  
42001-5415FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KSA ENTERPRISESOccupation  
VP

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2025

Transaction ID : AEE47F39EF59A473F9AD

Amount of Each Receipt this Period

3500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

4000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

MANCHIKANTI, LAXMAIAH, , ,

**A.**

Mailing Address 2075 NATCHEZ LN

City

PADUCAH

State

KY

Zip Code

42001-5415

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PMCOA

Occupation

PHYSICIAN

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2025D D / Y Y Y Y Y  
13 / 2025Y Y Y Y Y  
2025

Transaction ID : AB8F97F5DC13F4224A02

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MASON, MAX, O, ,

**B.**

Mailing Address 821 TINKERBELL RD

City

CHAPEL HILL

State

NC

Zip Code

27517-3014

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PRINCIPLE LTC

Occupation

CHIEF STRATEGY OFFICER

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 28 / 2025D D / Y Y Y Y Y  
28 / 2025Y Y Y Y Y  
2025

Transaction ID : AA32881D9136E45BD971

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCCAIN, JOSEPH, , ,

**C.**

Mailing Address 8324 WINDSOR RIDGE DR

City

CHARLOTTE

State

NC

Zip Code

28277-6528

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FOUNDERS FEDERAL CREDIT UNION

Occupation

CREDIT UNION EMPLOYEE

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  
06 / 04 / 2025D D / Y Y Y Y Y  
04 / 2025Y Y Y Y Y  
2025

Transaction ID : A00372A9E55C24F4CBB7

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

5000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

MCCLELLAND, CLIFFORD, , ,

**A.**

Mailing Address 2701 AMHURST BLVD  
APT 23D

City  
NEW BERN

State  
NC

Zip Code  
28562-4289

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 ▼

255.13

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 20 2025

Transaction ID : A75B6E9C1ED5E47CD915

Amount of Each Receipt this Period

104.10

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City  
ARLINGTON

State  
VA

Zip Code  
22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 20 2025

Transaction ID : A91E79AE1363340FCA53

Amount of Each Receipt this Period

104.10

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

MCCULLEN, ALLIE, RAY, ,

**C.**

Mailing Address 7361 HOBBDON HWY

City  
CLINTON

State  
NC

Zip Code  
28328-5609

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

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  
05 30 2025

Transaction ID : A4BA64D4F3CFC477998A

Amount of Each Receipt this Period

500.00

☐ Memo Item

604.10

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

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

MCKITRICK, JASON, , ,

**A.** Mailing Address 6339 CAVALIER CORRIDOR

City

FALLS CHURCH

State

VA

Zip Code

22044-1301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIBERTY PARTNERS GROUP

Occupation

PRINCIPAL

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 07 2025

Transaction ID : A326BFC5FC94943AD900

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCNEILL, JOHN, A, ,

**B.** Mailing Address 2334 S 41ST ST

City

WILMINGTON

State

NC

Zip Code

28403-5502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIBERTY HEALTHCARE GROUP

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 28 2025

Transaction ID : AE4246EF3188248E2ACD

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCNEILL, RONALD, B, ,

**C.** Mailing Address 2334 S 41ST ST

City

WILMINGTON

State

NC

Zip Code

28403-5502

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LIBERTY HEALTHCARE GROUP

Occupation

MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 28 2025

Transaction ID : A8FBDBBCD6F3E4C54992

Amount of Each Receipt this Period

3500.00

☐ Memo Item

7500.00

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

MILLER, STEW, , ,

**A.**

Mailing Address 105 GROVE HALL CT

City  
CARY

State  
NC

Zip Code  
27513-5613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
YES SOLAR SOLUTIONS

Occupation  
CO-FOUNDER & PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 05 2025

Transaction ID : AAFB2CC00642A4EE6838

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MILTON, JERRY, D, ,

**B.**

Mailing Address PO BOX 176

City  
BUIES CREEK

State  
NC

Zip Code  
27506-0176

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 30 2025

Transaction ID : A4C3100D8C8F44E36890

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MITCHELL, JOHN, , ,

**C.**

Mailing Address 1717 COLVARD FARMS RD

City  
DURHAM

State  
NC

Zip Code  
27713-7073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
DEVELOPER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 06 2025

Transaction ID : A160468AE297B47DE955

Amount of Each Receipt this Period

3500.00

☐ Memo Item

7800.00

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

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

MONTANA, STEVEN, , MD

**A.** Mailing Address 6 TIMBER RIDGE DRCity  
HUNTINGTONState  
NYZip Code  
11743-4898FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYCBSOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2025

Transaction ID : AE094C810579143769D8

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORKOS, ESKANDER, , MD

**B.** Mailing Address 302 INVERNESS RDCity  
CLINTONState  
NCZip Code  
28328FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAMPSON REGIONAL MEDICAL CENTEROccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 30 / 2025

Transaction ID : A43B23B917BC04D849AE

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORTIER, JEFF, ,

**C.** Mailing Address 4948 ESKRIDGE TER NWCity  
WASHINGTONState  
DCZip Code  
20016-3443FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FARRAGUT PARTNERSOccupation  
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2025

Transaction ID : A5EEF1C85109240FB8C2

Amount of Each Receipt this Period

2500.00

☐ Memo Item

3900.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

MURRAY, DAVID, , ,

A.

Mailing Address 6319 OLM I LANDRITH DR

City

ALEXANDRIA

State

VA

Zip Code

22307-1318

FEC ID number of contributing  
federal political committee.

C

Name of Employer

TURNINGPOINT ENERGY

Occupation

DIRECTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID : A1A5962ED658D4357A71

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NAWAZ, SHAHID, , ,

B.

Mailing Address 15 DAVIDS WAY

City

PORT JEFFERSON

State

NY

Zip Code

11777-1153

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

MD

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	5	

Transaction ID : A41BEBDAD3D274E45AAD

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NEIMAN, WADE, , , MD

C.

Mailing Address 1300 CRENSHAW CT

City

LYNCHBURG

State

VA

Zip Code

24503-1922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WOMENS HEALTH SERVICES

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	5	

Transaction ID : AF3C039E1384C443ABB6

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

2000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

NESSEL, ARIEL, T, ,

**A.**

Mailing Address PO BOX 1128

City  
ROSSState  
CAZip Code  
94957-1128FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NESSEL DEVELOPMENTOccupation  
ENTREPRENEUR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 13 2025

Transaction ID : AC1C1A2AC07C54032852

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NEWCORN, R JEFFREY, , ,

**B.**Mailing Address 2515 WAUKEGAN RD  
# 513City  
BANNOCKBURNState  
ILZip Code  
60015-1569FEC ID number of contributing  
federal political committee.

C

Name of Employer  
R. JEFFREY & ASSOCIATES, INC.Occupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 29 2025

Transaction ID : A0F821B74294F4FEE9F7

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NEWMAN, BRIAN, , ,

**C.**

Mailing Address PO BOX 1450

City  
KITTY HAWKState  
NCZip Code  
27949-1450FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEWMAN HOMESOccupation  
BUILDER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025

Transaction ID : A2970B83EFB6947CE914

Amount of Each Receipt this Period

400.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

2400.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

NOOR, USMAN, , ,

**A.**

Mailing Address 104 GRATTAN CT

City

MORRISVILLE

State

NC

Zip Code

27560-7048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

8MSOLAR LLC

Occupation

OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 13 / 2025

Transaction ID : AEF67038018C74D01864

Amount of Each Receipt this Period

825.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NOSHIR, DACOSTA, , , MD

**B.**

Mailing Address 235 N BELLE MEAD AVE

City

EAST SETAUKET

State

NY

Zip Code

11733-3538

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NY CANCER &amp; BLOOD SPECIALISTS

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2025

Transaction ID : AEF0992E18CFB4F1691F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ODROBINAK, JAMES, , ,

**C.**Mailing Address 1315 AVE ASHFORD  
APT 301

City

SAN JUAN

State

PR

Zip Code

00907-1383

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MEDICAL CARD SYSTEM

Occupation

CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 04 / 2025

Transaction ID : A75841B3E28114B42AD5

Amount of Each Receipt this Period

3500.00

☐ Memo Item

5325.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

OF MISSION INDIANS, MORONGO BAND, , ,

**A.** Mailing Address 12700 PUMARRA RDCity  
BANNINGState  
CAZip Code  
92220FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
N/A

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 30 2025

Transaction ID : ABE6D63C94249473DB2B

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

OLANDER, DAVID, , ,

**B.** Mailing Address 2432 CARON LNCity  
FALLS CHURCHState  
VAZip Code  
22043FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAPITOL COUNSEL, LLCOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : AB351CA39B4E94A4DA85

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

OLIVER, PAULA, P, ,

**C.** Mailing Address 109 RIAL CTCity  
MANTEOState  
NCZip Code  
27954FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

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  
06 18 2025

Transaction ID : A2A048089690D48A082C

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

2500.00

**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

OSWALD, JOSEPH, , ,

**A.** Mailing Address 10205 VILLA RIDGE DRCity  
LAS VEGASState  
NVZip Code  
89134-7641FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

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  
06 28 2025

Transaction ID : AE802A047DF1340BF9A3

Amount of Each Receipt this Period

250.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M M / D D / Y Y Y Y Y  
06 28 2025

Transaction ID : A6DC17F37F8FC40D28FC

Amount of Each Receipt this Period

250.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

OVERTON, JOEL, L, ,

**C.** Mailing Address PO BOX 7804City  
KILL DEVIL HILLSState  
NCZip Code  
27948-5804FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

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  
06 20 2025

Transaction ID : A347D121DF0DC48E480A

Amount of Each Receipt this Period

250.00

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

500.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

PACHECO, ELLIOT, , ,

**A.**

Mailing Address PO BOX 8360

City

SAN JUAN

State

PR

Zip Code

00910-0360

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ELLIOT PACHECO

Occupation

BUSSINESS OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 04 2025

Transaction ID : A289F7840B35A40B59CB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PATEL, MAULIK, P, ,

**B.**

Mailing Address 607 NC-24

City

ROSEBORO

State

NC

Zip Code

28382

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 30 2025

Transaction ID : AD3AB1C29BF974A138EF

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PA, TU, DAO, ,

**C.**

Mailing Address 5601 CHAMPIONS DR

City

PLANO

State

TX

Zip Code

75093-4229

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 13 2025

Transaction ID : A8E4A444899EE4176990

Amount of Each Receipt this Period

2000.00

☐ Memo Item

4000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**Full Name (Last, First, Middle Initial)  
PA, TU, DAO, ,**A.** Mailing Address 5601 CHAMPIONS DRCity  
PLANOState  
TXZip Code  
75093-4229FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 17 2025

Transaction ID : A32D33094AFCF42C7BDA

Amount of Each Receipt this Period

- 2000.00

☐ Memo Item

RETURNED CHECK

Full Name (Last, First, Middle Initial)  
PEROT, ROSS, , , JR**B.** Mailing Address 3000 TURTLE CREEK BLVDCity  
DALLASState  
TXZip Code  
75219FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
REAL ESTATE DEVELOPER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 14 2025

Transaction ID : A7B40FA445FEB4370BBD

Amount of Each Receipt this Period

3500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
PEROT, ROSS, , , JR**C.** Mailing Address 3000 TURTLE CREEK BLVDCity  
DALLASState  
TXZip Code  
75219FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
REAL ESTATE DEVELOPER

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 14 2025

Transaction ID : A364B87622470420AAF1

Amount of Each Receipt this Period

3500.00

☐ Memo Item

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

PICKENS, JOHN, , ,

**A.**

Mailing Address 3316 CARUTH BLVD

City

DALLAS

State

TX

Zip Code

75225-4821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UROLOGY CLINICS OF NORTH TEXAS

Occupation

UROLOGIST

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : AD4D88225A2C34C64856

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PINEDA, CHARLOTTE, , ,

**B.**Mailing Address 28 K ST SE  
APT 928

City

WASHINGTON

State

DC

Zip Code

20003-3283

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN ASSOCIATION OF NEUROLOGIC

Occupation

VICE PRESIDENT, HEALTH POLICY AND AD

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	5	

Transaction ID : A7D42086646A0496AB8C

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PINEDA, CHARLOTTE, , ,

**C.**Mailing Address 28 K ST SE  
APT 928

City

WASHINGTON

State

DC

Zip Code

20003-3283

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN ASSOCIATION OF NEUROLOGIC

Occupation

VICE PRESIDENT, HEALTH POLICY AND AD

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	5	

Transaction ID : A225D546017E841339FA

Amount of Each Receipt this Period

500.00

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

4500.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

PLAZA, KEISHLA, , ,

**A.** Mailing Address 100 CALLE CECILIO URBINA

City

GUAYNABO

State

PR

Zip Code

00970-7001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GR

Occupation

OFFICE MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

Transaction ID : AC25FB9B92F6946A9A2E

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RACKLEY, YVONNE, , ,

**B.** Mailing Address 304 ARROWHEAD DR E

City

CLINTON

State

NC

Zip Code

28328

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SAMSPON ARTS COUNCIL

Occupation

BOARD MEMBER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID : AFD17E9F795DD4074A91

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RADCLIFFE, MARLA, , ,

**C.** Mailing Address 5859 SAVONA TERRACE

City

FORT MILL

State

SC

Zip Code

29708-8800

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RENU ENERGY

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	2	5

Transaction ID : AAB977EB4622F4750AD4

Amount of Each Receipt this Period

3300.00

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

7100.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

REIBEL, JAMES, M, ,

**A.**

Mailing Address 305 SIR WALTER RALEIGH ST

City  
MANTEOState  
NCZip Code  
27954-9007FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		20		2025

Transaction ID : A4C546648784E4BAE872

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

REITER, MATT, , ,

**B.**

Mailing Address 8823 SOUTHWICK ST

City  
FAIRFAXState  
VAZip Code  
22031-3234FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAPITOL ASSOCIATESOccupation  
GOVERNMENT RELATIONS CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		24		2025

Transaction ID : A76B37309D4494907958

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RETTTER, AVI, , , MD

**C.**

Mailing Address 72 HALLBERG AVE

City  
BERGENFIELDState  
NJZip Code  
07621-2618FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NYCBSOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		10		2025

Transaction ID : A3FDB72C8A4FA412293C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

ROBINSON, ROBERT, , ,

**A.**

Mailing Address 4008 HUDSON ST

City

METAIRIE

State

LA

Zip Code

70006-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COSTA DEL MAR

Occupation

STRATEGIC ACCOUNT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 15 2025D D / Y Y Y Y Y  
15 2025Y Y Y Y Y  
2025

Transaction ID : A80BF399557DD41D6A62

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

RODRIGUEZ, GUALBERTO, , ,

**B.**Mailing Address 1362 AVE MAGDALENA  
APT 1902

City

SAN JUAN

State

PR

Zip Code

00907-2090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

VASTAGO LLC

Occupation

PRESIDENT

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 07 2025D D / Y Y Y Y Y  
07 2025Y Y Y Y Y  
2025

Transaction ID : A46BDACF60E034379B02

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SCANLON, MD, SUSAN, , , MD

**C.**Mailing Address 180 E PEARSON ST  
APT 5501

City

CHICAGO

State

IL

Zip Code

60611-2184

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MIDWEST CENTER FOR WOMENS HEALTHC

Occupation

PHYSICIAN AND BOARD CHAIR

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  
04 24 2025D D / Y Y Y Y Y  
24 2025Y Y Y Y Y  
2025

Transaction ID : AC0857B2866B54DC1ACF

Amount of Each Receipt this Period

500.00

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

4000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

SCHLINE, DANIEL, , ,

**A.**

Mailing Address 2329 BYRD ST

City  
RALEIGHState  
NCZip Code  
27608-1411FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAROLINAS CREDIT UNION LEAGUEOccupation  
PRESIDENT/CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 22 2025

Transaction ID : AA9CBB7BC8ABC4AA586F

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SEWELL, BILLY, , ,

**B.**

Mailing Address 521 NEW BRIDGE ST

City  
JACKSONVILLEState  
NCZip Code  
28540-5430FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PLATINUM CORRAL, LLCOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 12 2025

Transaction ID : A757CED85C3C54A4FBA0

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SHAW, HARRY, M, ,

**C.**

Mailing Address PO BOX 1108

City  
CLINTONState  
NCZip Code  
28329-1108FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 13 2025

Transaction ID : A47370AE323AD497792F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

5500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

SHUFORD, MATTHEW, , , MD

**A.**

Mailing Address 6733 JOYCE WAY

City

DALLAS

State

TX

Zip Code

75225-2717

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UROLOGY CLINICS OF NORTH TEXAS

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID : AB92ABD58774B413EB30

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SHULIMOVICH, MAXIM, , , MD

**B.**Mailing Address 85 WOODHULL ST  
APT 2

City

BROOKLYN

State

NY

Zip Code

11231-2621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW YORK CANCER AND BLOOD SPECIALIS

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	5	

Transaction ID : A299A8EF82DEB41AA88C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SINGLETON, JAMES, , ,

**C.**

Mailing Address 130 AQUA ALY

City

HOLLY RIDGE

State

NC

Zip Code

28445-7945

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 ▼

239.70

Date of Receipt

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

Transaction ID : A0972ABDA43E24197A07

Amount of Each Receipt this Period

52.05

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

4552.05

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**Full Name (Last, First, Middle Initial)  
WINRED**A.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

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

Transaction ID : AC6400A67EBE74F55BE7

Amount of Each Receipt this Period

52.05

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
SINGLETON, JAMES, , ,**B.** Mailing Address 130 AQUA ALYCity  
HOLLY RIDGEState  
NCZip Code  
28445-7945FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

265.73

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

Transaction ID : A1BE7E423CF724591B35

Amount of Each Receipt this Period

26.03

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINRED**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

Transaction ID : A1F87175467644AD09B0

Amount of Each Receipt this Period

26.03

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶

26.03

**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 Page

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

SINGLETON, JAMES, , ,

**A.**

Mailing Address 130 AQUA ALY

City

HOLLY RIDGE

State

NC

Zip Code

28445-7945

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 ▼

291.76

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 20 2025

Transaction ID : AB5B975CC0A51436AB57

Amount of Each Receipt this Period

26.03

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219

FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 20 2025

Transaction ID : A96892F64BA2649018BD

Amount of Each Receipt this Period

26.03

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

SNOOK, LEE, , , MD

**C.**

Mailing Address 5151 KEANE DR

City

CARMICHAEL

State

CA

Zip Code

95608-6044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MPMC

Occupation

PHYSICIAN

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  
05 16 2025

Transaction ID : AD6A67B60ED824AE1809

Amount of Each Receipt this Period

500.00

☐ Memo Item

526.03

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

**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

SNYDER, JOHN, , ,

**A.**

Mailing Address 9431 SARDIS GLEN DR

City

MATTHEWS

State

NC

Zip Code

28105-1571

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PROSPERING SOLUTIONS

Occupation

GOVERNMENT RELATIONS

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  
06 / 24 / 2025

Transaction ID : A68EECB5A54C6474EA2F

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SOIN, AMOL, , , MD

**B.**

Mailing Address 10601 SUNDERLAND WOODS CT

City

DAYTON

State

OH

Zip Code

45458-6109

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OHIO PAIN CLINIC

Occupation

DOCTOR

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 15 / 2025

Transaction ID : A8AD8FBAEEDC242DD800

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SPARKS, L DAVID, DAVID, ,

**C.**

Mailing Address 11602 HALEY HOLW

City

RICHMOND

State

TX

Zip Code

77407-7915

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PCCA

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2025

Transaction ID : AD2F7DD5421DB494BA7A

Amount of Each Receipt this Period

2500.00

☐ Memo Item

6500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

SPELL, ROBERT, C, ,

**A.**

Mailing Address 803 COHARIE DR

City  
CLINTONState  
NCZip Code  
28328FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GROUP BENEFIT & COMMERCIAL SERVICESOccupation  
PRESIDENT

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  
05 30 2025

Transaction ID : A109CD1961B1247AC9D3

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SPELL, ROBERT, C, ,

**B.**

Mailing Address 803 COHARIE DR

City  
CLINTONState  
NCZip Code  
28328FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GROUP BENEFIT & COMMERCIAL SERVICESOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 13 2025

Transaction ID : ABC9D513B06E643FD83A

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SPENCER, SHELLY, M, ,

**C.**

Mailing Address 234 BRAKEWOOD RD

City  
MANTEOState  
NCZip Code  
27954-9691FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 20 2025

Transaction ID : A8E0CDAC832C4446AAD4

Amount of Each Receipt this Period

7000.00

☐ Memo Item

8000.00

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

PAGE 68 OF 194

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

SPENCER, SHELLY, M, ,

**A.** Mailing Address 234 BRAKEWOOD RDCity  
MANTEOState  
NCZip Code  
27954-9691FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 20 2025

Transaction ID : A4B6E3ADC28324332902

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

REATTRIBUTION FROM

Full Name (Last, First, Middle Initial)

SPENCER, SHELLY, M, ,

**B.** Mailing Address 234 BRAKEWOOD RDCity  
MANTEOState  
NCZip Code  
27954-9691FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 20 2025

Transaction ID : A04BB19D16EE7437CB50

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REATTRIBUTION TO

Full Name (Last, First, Middle Initial)

STARLING, ANNETTE, CHANCY, ,

**C.** Mailing Address 107 DEER RUN TRAILCity  
CLINTONState  
NCZip Code  
28328-3005FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
FARMER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 30 2025

Transaction ID : AEFE3CABBD6374640AC2

Amount of Each Receipt this Period

2600.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2600.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

STARLING, ANNETTE, CHANCY, ,

**A.** Mailing Address 107 DEER RUN TRAILCity  
CLINTONState  
NCZip Code  
28328-3005FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
FARMER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 13 2025

Transaction ID : AF20663C22C604029B8C

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
STARLING, ANNETTE, CHANCY, ,  
Mailing Address 107 DEER RUN TRAILCity  
CLINTONState  
NCZip Code  
28328-3005FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
FARMER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 13 2025

Transaction ID : A4F581988352441D4975

Amount of Each Receipt this Period

- 1100.00

☒ Memo Item

REATTRIBUTION FROM

**C.** Full Name (Last, First, Middle Initial)  
STARLING, ANNETTE, CHANCY, ,  
Mailing Address 107 DEER RUN TRAILCity  
CLINTONState  
NCZip Code  
28328-3005FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
FARMER

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 13 2025

Transaction ID : A307937A4624940DBBC8

Amount of Each Receipt this Period

1100.00

☒ Memo Item

REATTRIBUTION TO

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

2000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

STARLING, LUTHER, DONALD, , SR.

**A.**

Mailing Address 703 COHARIE DR

City  
CLINTONState  
NCZip Code  
28328-3019FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 30 2025

Transaction ID : AA6883EBA59954045BFB

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STARLING, LUTHER, D, , JR

**B.**

Mailing Address 100 DEER RUN TRL

City  
CLINTONState  
NCZip Code  
28328FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DAUGHTRY WOODARD LAWRENCE & STARIOccupation  
ATTORNEY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 30 2025

Transaction ID : A2815FE740B2E410E9AB

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STARNES, BRYAN, , ,

**C.**

Mailing Address 4486 WIKE RD

City  
GRANITE FALLSState  
NCZip Code  
28630FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALG SENIOR LLCOccupation  
CFO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 19 2025

Transaction ID : A265DD281E4EA428A984

Amount of Each Receipt this Period

7000.00

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

11500.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

STARNES, BRYAN, , ,

**A.** Mailing Address 4486 WIKE RDCity  
GRANITE FALLSState  
NCZip Code  
28630FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALG SENIOR LLCOccupation  
CFO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 19 2025

Transaction ID : A6F09F246DBAD4CDAA6D

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

REDESIGNATION FROM

Full Name (Last, First, Middle Initial)

STARNES, BRYAN, , ,

**B.** Mailing Address 4486 WIKE RDCity  
GRANITE FALLSState  
NCZip Code  
28630FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALG SENIOR LLCOccupation  
CFO

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 19 2025

Transaction ID : AF8E70EE6A7544C1B8E7

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REDESIGNATION TO

Full Name (Last, First, Middle Initial)

STOCK, KRISTA, , ,

**C.** Mailing Address 1888 SUFFOLK RDCity  
COLUMBUSState  
OHZip Code  
43221-4216FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U.S. WOMEN'S HEALTH ALLIANCEOccupation  
EXECUTIVE DIRECTOR

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  
04 14 2025

Transaction ID : A3634FADD737349D8A31

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

500.00

**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

STROM, DONNA, , ,

**A.**

Mailing Address 450 W KNIGHT LN

City  
TEMPEState  
AZZip Code  
85284-1369FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

207.50

Date of Receipt

M M / D D / Y Y Y Y Y  
05 29 2025

Transaction ID : A9CE8BF1798E643DFBAC

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M M / D D / Y Y Y Y Y  
05 29 2025

Transaction ID : A273D75B06F0D4D63B14

Amount of Each Receipt this Period

25.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

STROM, DONNA, , ,

**C.**

Mailing Address 450 W KNIGHT LN

City  
TEMPEState  
AZZip Code  
85284-1369FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

232.50

Date of Receipt

M M / D D / Y Y Y Y Y  
06 09 2025

Transaction ID : A4D9CB98BAF1B45AF9DA

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

50.00



**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 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)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**Full Name (Last, First, Middle Initial)  
WINRED**A.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

Transaction ID : AB2B08CC2252F44B5964

Amount of Each Receipt this Period

25.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.Full Name (Last, First, Middle Initial)  
STROM, DONNA, , ,**B.** Mailing Address 450 W KNIGHT LNCity  
TEMPEState  
AZZip Code  
85284-1369FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

257.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

Transaction ID : ACDD94B89E4494D6FB34

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)  
WINRED**C.** Mailing Address PO BOX 9891City  
ARLINGTONState  
VAZip Code  
22219FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

Transaction ID : A3A35D80BB3F84575820

Amount of Each Receipt this Period

25.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ►

25.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

STROM, DONNA, , ,

**A.**

Mailing Address 450 W KNIGHT LN

City  
TEMPEState  
AZZip Code  
85284-1369FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

282.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 26 2025

Transaction ID : A738FF424AF4246D69A9

Amount of Each Receipt this Period

25.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

Full Name (Last, First, Middle Initial)

WINRED

**B.**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15804.24

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 26 2025

Transaction ID : A773232781E214E8FAD3

Amount of Each Receipt this Period

25.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

Full Name (Last, First, Middle Initial)

STRUM, BRENDAN, W, ,

**C.**

Mailing Address 21 SPINNAKER

City  
MANTEOState  
NCZip Code  
27954FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWNOccupation  
UNKNOWN

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  
06 30 2025

Transaction ID : AECF7AD4E97904B329F3

Amount of Each Receipt this Period

250.00

☐ Memo Item

275.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

STUDDARD, KEITH, , ,

**A.**

Mailing Address 2170 BRACKENSHIRE CIR

City  
JACKSONState  
MSZip Code  
39211-5836FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KEITH STUDDARDOccupation  
CONSULTANT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 02 2025

Transaction ID : A5C874000804C4B15B06

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

STUPKA, KARL, , ,

**B.**

Mailing Address 1907 CARROLL DR

City  
RALEIGHState  
NCZip Code  
27608-2555FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NC SOLAR NOWOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 06 2025

Transaction ID : ADAFCE48083C445FA90A

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SUAREZ, JORGE, , , MD

**C.**Mailing Address COND SANTA MARIA 139 APT 502  
CARR 177City  
SAN JUANState  
PRZip Code  
00926FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
DOCTOR

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 04 2025

Transaction ID : AAF6E1D46781443B1838

Amount of Each Receipt this Period

2000.00

☐ Memo Item

6300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

SUBA, STEVEN, , MD

A.

Mailing Address 4805 SEATON CT

City

FORT WORTH

State

TX

Zip Code

76132-1163

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UWC OF TEXAS

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	5

Transaction ID : A05585B0E8A824097A72

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SULLIVAN, CHRISTOPHER, , MD

B.

Mailing Address 14635 N SHADED STONE PL

City

ORO VALLEY

State

AZ

Zip Code

85755-5707

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENESIS OBGYN

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	2	5

Transaction ID : A31D6A154672049FF84B

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SYALI, GURMOHAN, , MD

C.

Mailing Address 129 BREELEY BLVD

City

MELVILLE

State

NY

Zip Code

11747-5332

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NEW YORK CANCER AND BLOOD

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	0		2	0	2	5

Transaction ID : AC071B5C718F24E59A5E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

2100.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

SYLVESTER, LINDSAY, H, ,

**A.** Mailing Address PO BOX 755City  
RICHLANDSState  
NCZip Code  
28574FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 30 2025

Transaction ID : A7C4BE97078784CA380B

Amount of Each Receipt this Period

4000.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)  
SYLVESTER, LINDSAY, H, ,  
Mailing Address PO BOX 755City  
RICHLANDSState  
NCZip Code  
28574FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 30 2025

Transaction ID : ADA5AAAE42F354BB6BB8

Amount of Each Receipt this Period

- 500.00

☒ Memo Item

REATTRIBUTION FROM

**C.** Full Name (Last, First, Middle Initial)  
SYLVESTER, LINDSAY, H, ,  
Mailing Address PO BOX 755City  
RICHLANDSState  
NCZip Code  
28574FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 30 2025

Transaction ID : ADDE9816D9D7D429EBEA

Amount of Each Receipt this Period

500.00

☒ Memo Item

REATTRIBUTION TO

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

4000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

TAUBER, JOSEPH, , ,

**A.** Mailing Address 60 HEARTH HAVEN DRCity  
WETUMPKAState  
ALZip Code  
36092-8163FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

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  
05 16 2025

Transaction ID : A9B0E695FC9F542E1891

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TAYLOR, MARGARETTA, J, ,

**B.** Mailing Address 2 SUTTON SQUARECity  
NEW YORKState  
NYZip Code  
10022-2408FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 30 2025

Transaction ID : A38827E5B43B0461F808

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TEED, ELIZABETH, , ,

**C.** Mailing Address 1301 S JOYCE ST  
APT 4330City  
ARLINGTONState  
VAZip Code  
22202-2083FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CORNERSTONE GOVERNMENT AFFAIRSOccupation  
LOBBYIST

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  
04 01 2025

Transaction ID : A2DA4BF1DB9974F4DB63

Amount of Each Receipt this Period

250.00

☐ Memo Item

3750.00

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

PAGE 79 OF 194

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

TOBIN, JAMES, P, ,

**A.**

Mailing Address PO BOX 243

City

MANNS HARBOR

State

NC

Zip Code

27953

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PIRATES COVE MARINA

Occupation

MARINA MANAGER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 20 2025

Transaction ID : A950574E54F3F4F88A76

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TORRES, ALFREDO, , ,

**B.**

Mailing Address 43 FIELDHOUSE AVE

City

EAST SETAUKET

State

NY

Zip Code

11733-1071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

MD

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 10 2025

Transaction ID : AD28E122DD43F4101851

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TRAN, ANH-HONG, , ,

**C.**

Mailing Address 3710 EUCLID AVE

City

DALLAS

State

TX

Zip Code

75205-3162

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UROLOGY CLINICS OF NORTH TEXAS

Occupation

UROLOGIST

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 16 2025

Transaction ID : ADD3E2EF0CF924B299A2

Amount of Each Receipt this Period

3500.00

☐ Memo Item

8000.00

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

TREFZGER, CHARLES, , ,

**A.**

Mailing Address 29 37TH AVE NW

City  
HICKORY

State  
NC

Zip Code  
28601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALG SENIOR

Occupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 19 2025

Transaction ID : A7E3D36CD117A4383B0F

Amount of Each Receipt this Period

7000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TREFZGER, CHARLES, , ,

**B.**

Mailing Address 29 37TH AVE NW

City  
HICKORY

State  
NC

Zip Code  
28601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALG SENIOR

Occupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 19 2025

Transaction ID : A1C83F15691D6458BB80

Amount of Each Receipt this Period

- 3500.00

☒ Memo Item

REDESIGNATION FROM

Full Name (Last, First, Middle Initial)

TREFZGER, CHARLES, , ,

**C.**

Mailing Address 29 37TH AVE NW

City  
HICKORY

State  
NC

Zip Code  
28601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALG SENIOR

Occupation  
CEO

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 19 2025

Transaction ID : ACE6669A3096345AE9DA

Amount of Each Receipt this Period

3500.00

☒ Memo Item

REDESIGNATION TO

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

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

7000.00



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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

TRESCOT, ANDREA, MARGARET, , MD

A. Mailing Address PO BOX 62

City  
EAST PALATKAState  
FLZip Code  
32131-0062FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PPOAOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 13 2025

Transaction ID : A8BEAFA7424A1469F82E

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TWIDDY, CLARK, , ,

B. Mailing Address 1352 SOUND LANDING RD

City  
KITTY HAWKState  
NCZip Code  
27949-4393FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TWIDDY & COMPANYOccupation  
HOSPITALITY

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 29 2025

Transaction ID : A27B27660D38F4401A12

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

USMAN, IFRAH, , ,

C. Mailing Address 104 GRATTAN CT

City  
MORRISVILLEState  
NCZip Code  
27560-7048FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTEDOccupation  
INFORMATION REQUESTED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 13 2025

Transaction ID : A2F1AC2EF522C443D835

Amount of Each Receipt this Period

825.00

☐ Memo Item

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

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

3825.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

VACIRCA, JEFF, , ,

**A.**

Mailing Address 1500 ROUTE 112

City

PORT JEFFERSON STA

State

NY

Zip Code

11776-8054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CANCEROccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 10 / 2025

Transaction ID : A18805CC4C30C4201AE6

Amount of Each Receipt this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

VALENTIN, LEONARDO, , , MD

**B.**

Mailing Address PO BOX 8973

City

BAYAMON

State

PR

Zip Code

00960-8973

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYEDOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2025

Transaction ID : A0E01FFCC6E01409F9B3

Amount of Each Receipt this Period

3400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

VARGAS, JOSE J., , ,

**C.**Mailing Address 550 CALLE CONSTITUCION  
APT 801

City

SAN JUAN

State

PR

Zip Code

00920-3858

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 ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2025

Transaction ID : ABA66D8F5685F4F4F9D4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

7900.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

VEGA, MELVIN, , ,

**A.**

Mailing Address ATENAS CT

APT 701-A

City

MANATI

State

PR

Zip Code

00674-9525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RPS MEDICAL

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 04 2025

Transaction ID : AC1EC27CBCEA443299A7

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

VEGA, MELVIN, , ,

Mailing Address ATENAS CT

APT 701-A

City

MANATI

State

PR

Zip Code

00674-9525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RPS MEDICAL

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 04 2025

Transaction ID : A0FBB4FF4F346442EA76

Amount of Each Receipt this Period

3500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

VEGA, MELVIN, , ,

Mailing Address ATENAS CT

APT 701-A

City

MANATI

State

PR

Zip Code

00674-9525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RPS MEDICAL

Occupation

CEO

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 04 2025

Transaction ID : A4BB9E476BD564468849

Amount of Each Receipt this Period

- 2000.00

☒ Memo Item

REDESIGNATION FROM

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

5500.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

VEGA, MELVIN, , ,

**A.**

Mailing Address ATENAS CT

APT 701-A

City

MANATI

State

PR

Zip Code

00674-9525

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RPS MEDICAL

Occupation

CEO

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 04 / 2025

04

2025

Transaction ID : AD4178BA69CC64CFA821

Amount of Each Receipt this Period

2000.00

☒ Memo Item

REDESIGNATION TO

Full Name (Last, First, Middle Initial)

VILLA, ANDREW, , , MD

**B.**

Mailing Address 2511 W QUEEN CREEK RD

UNIT 467

City

CHANDLER

State

AZ

Zip Code

85248-0071

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WOMEN'S HEALTH ARIZONA

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 18 / 2025

18

2025

Transaction ID : AEBE0DD3606AA4BAB930

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

VRABLIC, MARK, G, ,

**C.**

Mailing Address PO BOX 432

City

WANCHESE

State

NC

Zip Code

27981

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WILLIE ETHERIDGE SEAFOOD

Occupation

SEAFOOD BUSINESS

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 20 / 2025

20

2025

Transaction ID : A37A1B759B72442979BB

Amount of Each Receipt this Period

250.00

☐ Memo Item

750.00

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

VRABLIC, MARK, G, ,

**A.**

Mailing Address PO BOX 432

City

WANCHESE

State

NC

Zip Code

27981

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WILLIE ETHERIDGE SEAFOOD

Occupation

SEAFOOD BUSINESS

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 20 2025

Transaction ID : A1F580AD104E94FE487A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WALKER, STACIE, , ,

**B.**

Mailing Address 1221 HARP ST

City

RALEIGH

State

NC

Zip Code

27604-8008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE EMPLOYEES CREDIT UNION

Occupation

CHIEF LENDING OFFICER

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  
05 31 2025

Transaction ID : AF19EC4F18BA64595819

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WASIL, TARUN, , , MD

**C.**

Mailing Address 1 DELAWARE DR

City

NEW HYDE PARK

State

NY

Zip Code

11042-1116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NYCBS

Occupation

PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 10 2025

Transaction ID : A9B999082806E4A9EB29

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

2250.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

WATSON, RONALD, O, ,

**A.**

Mailing Address 9102 COAST GUARD RD

City

EMERALD ISLE

State

NC

Zip Code

28594-2444

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

LAND DEVELOPER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	5

Transaction ID : A62E9831D59E7473AA58

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WHEELER, AMIE, , ,

**B.**

Mailing Address 217 N GREENE ST

City

GREENSBORO

State

NC

Zip Code

27401-2410

FEC ID number of contributing  
federal political committee.

C

Name of Employer

REVITY FCU

Occupation

COO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

Transaction ID : A17A270E64A2041D7BD2

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WILDER, WILLIAM, NELSON, , JR

**C.**

Mailing Address 3431 LAKEVIEW TRL

City

KINSTON

State

NC

Zip Code

28504

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WN WILDER CO INC

Occupation

PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : A7A0B1987812D46C1860

Amount of Each Receipt this Period

1000.00

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

2500.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

WILSON, JEFF, , ,

**A.**

Mailing Address 4619 SERENITY POINT RD

City

WILMINGTON

State

NC

Zip Code

28409-3462

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIBERTY HEALTHOccupation  
COO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	5

Transaction ID : AA4F896C38113421B836

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WOLF, JEFF, , ,

**B.**Mailing Address 100 JEFFERSON AVE  
APT 10019

City

MIAMI BEACH

State

FL

Zip Code

33139-7061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCORPIUS BIOMANUFACTURINGOccupation  
MANAGEMENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	2	5

Transaction ID : A64BDF6C6331B46ED917

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

WOODS, SCOTT, , ,

**C.**

Mailing Address 913 WATERMELON RUN

City

CHARLESTON

State

SC

Zip Code

29412-4434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
S.C. FEDERAL CREDIT UNIONOccupation  
CEO

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	2	5

Transaction ID : A1FD6EAAD4E6049D7B4C

Amount of Each Receipt this Period

2500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

4000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

YOUN, PAUL, , MD

**A.**

Mailing Address 29 WOODBURY WAY

City  
SYOSSETState  
NYZip Code  
11791-2721FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK CANCER & BLOOD FOUNDATIONOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 10 2025

Transaction ID : ACBC147591BB74D6D94C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

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

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

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

Amount of Each Receipt this Period

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1000.00

300981.08



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 194

(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

AFFORDABLE HOUSING TAX CREDIT COALITION PAC (AFFORDABLE HOUSING PAC

Mailing Address 630 I ST NW

City

WASHINGTON

State

DC

Zip Code

20001-3736

FEC ID number of contributing  
federal political committee.

C C00842583

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 13 2025

Transaction ID : AD9514FEB633243CEACB

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ALEXION PHARMACEUTICALS INC. PAC

Mailing Address 1455 PENNSYLVANIA AVE NW  
SUITE 510

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.

C C00471169

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 30 2025

Transaction ID : AEA49B7FDAB684086A95

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF NEUROLOGY BRAINPAC

Mailing Address 401 C ST NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing  
federal political committee.

C C00435933

Name of Employer

Occupation

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  
04 01 2025

Transaction ID : A79103C7859DE4279A16

Amount of Each Receipt this Period

5000.00

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

11000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN ACADEMY OF OTOLARYNGOLOGY-HEAD AND NECK SURGERY ENT PAC

A.

Mailing Address 1650 DIAGONAL ROAD

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.

C C00306449

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 08 2025

Transaction ID : AB85C6AE7F6E947229A2

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1400 L STREET, NW  
SUITE 400

City

WASHINGTON

State

DC

Zip Code

20005-3592

FEC ID number of contributing  
federal political committee.

C C00010868

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 15 2025

Transaction ID : A4FA3A078695C4F3EA4D

Amount of Each Receipt this Period

1500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 33079

City

WASHINGTON

State

DC

Zip Code

20033-0079

FEC ID number of contributing  
federal political committee.

C C00006080

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 28 2025

Transaction ID : AFCECC71E6A904ECF98C

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

5000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

**AMERICAN HOSPITAL ASSOCIATION PAC**

Mailing Address 800 TENTH STREET, NW

TWO CITYCENTER, SUITE 400

City

WASHINGTON

State

DC

Zip Code

20001-4956

FEC ID number of contributing  
federal political committee.**C** C00106146

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : A4214E8FC49DB4C1CBEE

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC**

Mailing Address PALLADIAN 1

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

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		26		2025

Transaction ID : A1AB89E2A88A44AF7B4C

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)**

Mailing Address 1111 NORTH FAIRFAX ST.

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.**C** C00012880

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : A1CBE8E6926A94D868A8

Amount of Each Receipt this Period

1000.00

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

6000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE (ASA PAC)

**A.**

Mailing Address 1061 AMERICAN LANE

City

SCHAUMBURG

State

IL

Zip Code

60173

FEC ID number of contributing  
federal political committee.**C** C00255752

Name of Employer

Occupation

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  
06 / 30 / 2025D D / Y Y Y Y Y  
30 / 2025Y Y Y Y Y  
2025

Transaction ID : A7CD063B39763433DBE4

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN SOCIETY OF INTERVENTIONAL PAIN PHYSICIANS PAC

**B.**

Mailing Address 2831 LONE OAK RD

City

PADUCAH

State

KY

Zip Code

42003-8041

FEC ID number of contributing  
federal political committee.**C** C00351197

Name of Employer

Occupation

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  
06 / 13 / 2025D D / Y Y Y Y Y  
13 / 2025Y Y Y Y Y  
2025

Transaction ID : A9BEC10A83A914F2F9C1

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN SPORTFISHING ASSOCIATION POLITICAL ACTION COMMITTEE

**C.**

Mailing Address 1001 N. FAIRFAX ST., SUITE 501

City

ALEXANDRIA

State

VA

Zip Code

22314

FEC ID number of contributing  
federal political committee.**C** C00249532

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2025D D / Y Y Y Y Y  
30 / 2025Y Y Y Y Y  
2025

Transaction ID : A86FAEA830C3E4A12B1F

Amount of Each Receipt this Period

3000.00

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

13000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

AMERICA'S CREDIT UNIONS PAC OF CREDIT UNION NATIONAL ASSOCIATION, INC.

**A.**Mailing Address 99 M ST SE  
STE 300City  
WASHINGTONState  
DCZip Code  
20003-3957FEC ID number of contributing  
federal political committee.**C** C00007880

Name of Employer

Occupation

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
06		30		2025

Transaction ID : A0428109CA9654391B38

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMGEN INC. POLITICAL ACTION COMMITTEE

**B.**

Mailing Address 1 AMGEN CENTER DR

City  
THOUSAND OAKSState  
CAZip Code  
91320-1730FEC ID number of contributing  
federal political committee.**C** C00251876

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		17		2025

Transaction ID : A0CBF2381EBCB4646865

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMHP HOLDINGS CORP. POLITICAL ACTION COMMITTEE (AMERIHEALTH CARITAS PAC)

**C.**

Mailing Address 3875 CHESTER PIKE W

City  
NEWTOWN SQUAREState  
PAZip Code  
19073FEC ID number of contributing  
federal political committee.**C** C00804096

Name of Employer

Occupation

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
05		16		2025

Transaction ID : A2B4903FD56E44EC0A63

Amount of Each Receipt this Period

500.00

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

8000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

ARKEMA INC PAC

**A.**

Mailing Address 900 FIRST AVE

City

KING OF PRUSSIA

State

PA

Zip Code

19406-1308

FEC ID number of contributing  
federal political committee.**C** C00182980

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A083E465B4B054E1BA80

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ASSOCIATED BUILDERS AND CONTRACTORS, INC. POLITICAL ACTION COMMITTEE (ABC PAC)

**B.**Mailing Address 440 FIRST STREET NW  
SUITE 200

City

WASHINGTON

State

DC

Zip Code

20001

FEC ID number of contributing  
federal political committee.**C** C00010421

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : A7CB1F67E61FB44DABFD

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

ASTELLAS US LLC PAC (ASTELLAS PAC)

**C.**

Mailing Address 2375 WATERVIEW DR

City

NORTHBROOK

State

IL

Zip Code

60062-6145

FEC ID number of contributing  
federal political committee.**C** C00444885

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : ABAEEC97C1B4D4919AF4

Amount of Each Receipt this Period

1000.00

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

4500.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**Full Name (Last, First, Middle Initial)  
BGR PACMailing Address 601 11TH ST NW  
11TH FLOOR SOUTHCity  
WASHINGTONState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.**C** C00359588

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4524.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

Transaction ID : ABC5DF91FB634459096D

Amount of Each Receipt this Period

4524.00

☐ Memo Item

IN-KIND:IN KIND FACILITY RENTAL AND CATERING

Full Name (Last, First, Middle Initial)

**BOEHRINGER INGELHEIM USA CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 900 RIDGEBURY RD

City  
RIDGEFIELDState  
CTZip Code  
06877-1058FEC ID number of contributing  
federal political committee.**C** C00420398

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : ACD7D0D6F5D2D4639B85

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**BRISTOL-MYERS SQUIBB COMPANY POLITICAL ACTION COMMITTEE (BMS PAC)**

Mailing Address 3401 PRINCETON PIKE

City  
LAWRENCEVILLEState  
NJZip Code  
08648FEC ID number of contributing  
federal political committee.**C** C00035675

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

Transaction ID : A3B2A91991F36461F8C8

Amount of Each Receipt this Period

1000.00

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

6524.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAC)

**A.**

Mailing Address 1201 15TH STREET, NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C** C00000901

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	2	5

Transaction ID : A9DC28013602247CC86D

Amount of Each Receipt this Period

3500.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

CENCORA, INC. PAC

Mailing Address 1 WEST FIRST AVENUE

City

CONSHOHOCKEN

State

PA

Zip Code

19428-1800

FEC ID number of contributing  
federal political committee.**C** C00400929

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

Transaction ID : AEF2A2AE64F22461BACA

Amount of Each Receipt this Period

2500.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

CENCORA, INC. PAC

Mailing Address 1 WEST FIRST AVENUE

City

CONSHOHOCKEN

State

PA

Zip Code

19428-1800

FEC ID number of contributing  
federal political committee.**C** C00400929

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

Transaction ID : ABD3D88F0375843FA943

Amount of Each Receipt this Period

1000.00

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

7000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

**COMMUNITY HEALTH SYSTEMS, INC. PAC (CHS)****A.**

Mailing Address 4000 MERIDIAN BLVD

City  
FRANKLINState  
TNZip Code  
37067-6325FEC ID number of contributing  
federal political committee.**C** C00485896

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 13 / 2025

Transaction ID : AEB5F9CF80A054AB9BA7

Amount of Each Receipt this Period

2000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**CONQUERING CANCER PAC**Mailing Address 228 WASHINGTON ST S  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314FEC ID number of contributing  
federal political committee.**C** C00785014

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : A433B57A5083A40958C7

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**CONQUERING CANCER PAC**Mailing Address 228 WASHINGTON ST S  
STE 115City  
ALEXANDRIAState  
VAZip Code  
22314FEC ID number of contributing  
federal political committee.**C** C00785014

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 01 / 2025

Transaction ID : AE214415BFC454570934

Amount of Each Receipt this Period

5000.00

☐ Memo Item

12000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

COOK GROUP INC PAC

**A.**

Mailing Address PO BOX 6924

City

ARLINGTON

State

VA

Zip Code

22206

FEC ID number of contributing  
federal political committee.**C** C00399089

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	2	5

**Transaction ID : A8B4086C36D8E45118B2**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EDWARDS LIFESCIENCES POLITICAL ACTION COMMITTEE (A.K.A. EDWARDS PAC)

**B.**

Mailing Address ONE EDWARDS WAY

City

IRVINE

State

CA

Zip Code

92614-5688

FEC ID number of contributing  
federal political committee.**C** C00411900

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

**Transaction ID : ABA9E663ACC3F4806AD8**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

EMD SERONO, INC. POLITICAL ACTION COMMITTEE

**C.**

Mailing Address ONE TECHNOLOGY PLACE

City

ROCKLAND

State

MA

Zip Code

02370-1071

FEC ID number of contributing  
federal political committee.**C** C00258236

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	2	5

**Transaction ID : A79E31130E1974542980**

Amount of Each Receipt this Period

2500.00

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

4500.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**Full Name (Last, First, Middle Initial)  
**ENCOMPASS HEALTH CORPORATION PAC**

Mailing Address 9001 LIBERTY PKWY

City  
BIRMINGHAMState  
ALZip Code  
35242-7509FEC ID number of contributing  
federal political committee.**C** C00414649

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		23		2025

Transaction ID : ABA32C50C60DD49359CF

Amount of Each Receipt this Period

1500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
**ENVISION HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE**Mailing Address 20 BURTON HILLS BLVD  
SUITE 500City  
NASHVILLEState  
TNZip Code  
37215FEC ID number of contributing  
federal political committee.**C** C00398271

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : A40DB8DA3B79C4284972

Amount of Each Receipt this Period

2500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
**FOLEY & LARDNER POLITICAL FUND, INC.**Mailing Address 3000 K STREET NW  
SUITE 600City  
WASHINGTONState  
DCZip Code  
20007FEC ID number of contributing  
federal political committee.**C** C00105338

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : A936C70C66C5D4514A6B

Amount of Each Receipt this Period

1000.00

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

5000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

**FOOD SOLUTIONS ACTION PAC (FSA PAC)****A.**

Mailing Address PO BOX 34024

City

WASHINGTON

State

DC

Zip Code

20043-4024

FEC ID number of contributing  
federal political committee.**C** C00789164

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	5	

Transaction ID : A02DFE16D519F4E08881

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HANGER INC. PAC****B.**

Mailing Address 10910 DOMAIN DRIVE SUITE 300

City

AUSTIN

State

TX

Zip Code

78758-7807

FEC ID number of contributing  
federal political committee.**C** C00430397

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : A926C99535C0D49CD961

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**HARDWOOD FEDERATION PAC, INC.****C.**Mailing Address 601 13TH ST NW  
STE 1000

City

WASHINGTON

State

DC

Zip Code

20005-3932

FEC ID number of contributing  
federal political committee.**C** C00396671

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	5	

Transaction ID : A2AA3F30E98F148CCABB

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)

**A.**Mailing Address 975 F ST NW  
STE 560City  
WASHINGTONState  
DCZip Code  
20004-1454FEC ID number of contributing  
federal political committee.**C** C00217638

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

Transaction ID : AFB44F5CB934649569B7

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

Mailing Address 1401 H STREET NW SUITE 1200

City  
WASHINGTONState  
DCZip Code  
20005FEC ID number of contributing  
federal political committee.**C** C00105981

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	2	5

Transaction ID : A5FF611EC1215429294E

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

JOHNSON &amp; JOHNSON PAC

Mailing Address 1350 I ST NW  
STE 1210City  
WASHINGTONState  
DCZip Code  
20005-3305FEC ID number of contributing  
federal political committee.**C** C00010983

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : A377B4A1DD6B047BEB51

Amount of Each Receipt this Period

2500.00

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

4500.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

**KAH HOSPICE COMPANY, INC. (DBA GENTIVA) PAC**Mailing Address 3350 RIVERWOOD PKWY SE  
STE 1400City  
ATLANTAState  
GAZip Code  
30339-3314FEC ID number of contributing  
federal political committee.**C** C00407080

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : A4FEB73FF1A0D489097C

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**KNIGHT HEALTH HOLDINGS, LLC SCIONHEALTH PAC**

Mailing Address 680 S 4TH ST

City  
LOUISVILLEState  
KYZip Code  
40202-2407FEC ID number of contributing  
federal political committee.**C** C00812701

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		15		2025

Transaction ID : A8EDF8D262E9842798D8

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**LABORATORY CORPORATION OF AMERICA HOLDINGS POLITICAL PARTICIPATION COMMITTEE**

Mailing Address 231 MAPLE AVE

City  
BURLINGTONState  
NCZip Code  
27215-5848FEC ID number of contributing  
federal political committee.**C** C00314997

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		01		2025

Transaction ID : ABE8A6B9C3348466388C

Amount of Each Receipt this Period

1500.00

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

6000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

LANTHEUS HOLDINGS INC PAC

**A.**

Mailing Address 201 BURLINGTON RD

City

BEDFORD

State

MA

Zip Code

01730-1406

FEC ID number of contributing  
federal political committee.**C** C00848697

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : A4AD110B2E0AF4108A6E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LUNDBECK LLC EMPLOYEE PAC

**B.**

Mailing Address SIX PARKWAY NORTH, SUITE 400

City

DEERFIELD

State

IL

Zip Code

60015-2522

FEC ID number of contributing  
federal political committee.**C** C00491118

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		01		2025

Transaction ID : A1C31EFE243EC4D81850

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MERCK &amp; CO., INC., EMPLOYEES POLITICAL ACTION COMMITTEE (MERCK PAC)

**C.**Mailing Address 601 PENNSYLVANIA AVE., NW  
NORTH BUILDING, SUITE 1200

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing  
federal political committee.**C** C00097485

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : AB1D3EB613EEA4A0285F

Amount of Each Receipt this Period

2500.00

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

4500.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

MN8 ENERGY LLC PAC (MN8 PAC)

Mailing Address 1155 AVENUE OF THE AMERICAS

FL 27

City

NEW YORK

State

NY

Zip Code

10036-2720

FEC ID number of contributing  
federal political committee.

C C00865378

Name of Employer

Occupation

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  
06 13 2025

Transaction ID : A7D600E05047846BEBB5

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MORGAN STANLEY POLITICAL ACTION COMMITTEE

Mailing Address 1585 BROADWAY

FL 9

City

NEW YORK

State

NY

Zip Code

10036-8200

FEC ID number of contributing  
federal political committee.

C C00337626

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 13 2025

Transaction ID : A2173B3E02D1D4679A3E

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL APARTMENT ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 4300 WILSON BLVD

SUITE 800

City

ARLINGTON

State

VA

Zip Code

22203-4213

FEC ID number of contributing  
federal political committee.

C C00113241

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 23 2025

Transaction ID : AFA2F4C947FB842D99AE

Amount of Each Receipt this Period

2500.00

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

10000.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE****A.**

Mailing Address 430 NORTH MICHIGAN AVENUE

City  
CHICAGOState  
ILZip Code  
60611-4011FEC ID number of contributing  
federal political committee.**C** C00030718

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		15		2025

**Transaction ID : A4115B8984C31460E81A**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL COTTON COUNCIL OF AMERICA COMMITTEE FOR THE ADVANCEMENT OF COTTON****B.**

Mailing Address PO BOX 2995

City  
CORDOVAState  
TNZip Code  
38088-2995FEC ID number of contributing  
federal political committee.**C** C00023028

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		17		2025

**Transaction ID : A795FAC2D64FE41FB962**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL COTTON COUNCIL OF AMERICA COMMITTEE FOR THE ADVANCEMENT OF COTTON****C.**

Mailing Address PO BOX 2995

City  
CORDOVAState  
TNZip Code  
38088-2995FEC ID number of contributing  
federal political committee.**C** C00023028

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04		17		2025

**Transaction ID : A7BE39F28797F448E91D**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

12000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE (NECAPAC)

**A.**Mailing Address 1201 PENNSYLVANIA AVENUE, NW  
12TH FLOORCity  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00113811

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : A476217BA0CCE4D449C3

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL FEDERATION OF INDEPENDENT BUSINESS FEDERAL POLITICAL ACTION COMMITTEE (NFIB)

**B.**Mailing Address 555 12TH ST NW  
SUITE 1001City  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00101105

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : AA9EF68B9226F41FEA0E

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMITTEE

**C.**Mailing Address 1775 EYE ST. NW  
SUITE 1100City  
WASHINGTONState  
DCZip Code  
20006FEC ID number of contributing  
federal political committee.**C** C00130773

Name of Employer

Occupation

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
05		29		2025

Transaction ID : ACD558658B4E048CDB55

Amount of Each Receipt this Period

5000.00

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

8500.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

**NATIONAL PORK PRODUCERS COUNCIL PORK PAC****A.**

Mailing Address PO BOX 10383

City

DES MOINES

State

IA

Zip Code

50306

FEC ID number of contributing  
federal political committee.**C** C00201871

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

Transaction ID : ACEE6A5D1FA224552986

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NATIONAL SHOOTING SPORTS FOUNDATION, INC. POLITICAL ACTION COMMITTEE (NSSF PAC)****B.**Mailing Address 400 N CAPITOL ST NW  
SUITE 475

City

WASHINGTON

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.**C** C00480863

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID : AD68B23D19F4D4712B6A

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NELSON MULLINS RILEY & SCARBOROUGH****C.**

Mailing Address PO BOX 11070

City

COLUMBIA

State

SC

Zip Code

29211

FEC ID number of contributing  
federal political committee.**C** C00278895

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID : ABDD865C3D3974E0E8F3

Amount of Each Receipt this Period

2000.00

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

8000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

**NEXTERA ENERGY, INC. POLITICAL ACTION COMMITTEE**Mailing Address 801 PENNSYLVANIA AVE., NW  
SUITE 220City  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00064774

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : A498888190110446D83C

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**NOVO NORDISK INC. PAC (NOVO NORDISK PAC)**Mailing Address 1000 F STREET, NW  
FOURTH FLOORCity  
WASHINGTONState  
DCZip Code  
20004FEC ID number of contributing  
federal political committee.**C** C00424838

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		26		2025

Transaction ID : AA83541A34F3D48CBB21

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**ONslow COUNTY REPUBLICAN PARTY**

Mailing Address PO BOX 716

City  
JACKSONVILLEState  
NCZip Code  
28541FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		30		2025

Transaction ID : A117CC3A0CCDF4F38954

Amount of Each Receipt this Period

100.00

☐ Memo Item

FEDERALLY PERMISSIBLE FUNDS

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

3600.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

OPTION CARE HEALTH INC PAC

Mailing Address 3000 LAKESIDE DR  
STE 300NCity  
BANNOCKBURNState  
ILZip Code  
60015-5405FEC ID number of contributing  
federal political committee.**C** C00668384

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : A455D8819AD884335803

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAM HEALTH PAC

Mailing Address 1828 GOOD HOPE RD  
STE 102City  
ENOLAState  
PAZip Code  
17025-1203FEC ID number of contributing  
federal political committee.**C** C00796862

Name of Employer

Occupation

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
05		23		2025

Transaction ID : AF794385A5F864BEDAF7

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PAM HEALTH PAC

Mailing Address 1828 GOOD HOPE RD  
STE 102City  
ENOLAState  
PAZip Code  
17025-1203FEC ID number of contributing  
federal political committee.**C** C00796862

Name of Employer

Occupation

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
05		23		2025

Transaction ID : A16DBC28D8722488194D

Amount of Each Receipt this Period

- 1500.00

☒ Memo Item

REDESIGNATION FROM

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

6000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

PAM HEALTH PAC

**A.**Mailing Address 1828 GOOD HOPE RD  
STE 102City  
ENOLAState  
PAZip Code  
17025-1203FEC ID number of contributing  
federal political committee.**C** C00796862

Name of Employer

Occupation

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
05		23		2025

Transaction ID : A535BE18FCF7E442CB96

Amount of Each Receipt this Period

1500.00

☒ Memo Item

REDESIGNATION TO

Full Name (Last, First, Middle Initial)

PINE GATE RENEWABLES LLC POWER PAC

**B.**

Mailing Address 130 ROBERTS ST

City  
ASHEVILLEState  
NCZip Code  
28801-3129FEC ID number of contributing  
federal political committee.**C** C00894725

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : A859BE22F85F44D09BBD

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

PREMIER INC. EMPLOYEES' CIVIC ACTION FUND

**C.**Mailing Address 444 N CAPITOL ST NW  
S625City  
WASHINGTONState  
DCZip Code  
20001FEC ID number of contributing  
federal political committee.**C** C00346288

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		15		2025

Transaction ID : AC79A181437164327A1C

Amount of Each Receipt this Period

1000.00

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

3000.00

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

FOR LINE NUMBER:  
(check only one)

Diagram illustrating a 1D lattice with 5 sites. The sites are labeled 11a, 11b, 11c, 11d, and 11e (implied). The bottom row of boxes is labeled 12, 13a, 13b, 14, and 15. The top row of boxes is labeled 11a, 11b, 11c, 11d, and 11e. Site 11c contains an 'X' in the top box.

# FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

**SANOFI US SERVICES INC. EMPLOYEES' POLITICAL ACTION COMMITTEE****A.**

Mailing Address 55 CORPORATE DRIVE

City  
BRIDGEWATERState  
NJZip Code  
08807FEC ID number of contributing  
federal political committee.**C** C00144345

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 26 2025

Transaction ID : AF8C2B610B4E745A68C7

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SELECT MEDICAL CORPORATION PAC****B.**

Mailing Address 4714 GETTYSBURG ROAD

City  
MECHANICSBURGState  
PAZip Code  
17055FEC ID number of contributing  
federal political committee.**C** C00546119

Name of Employer

Occupation

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  
05 23 2025

Transaction ID : A73399D6ECC554700B6C

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SELECT MEDICAL CORPORATION PAC****C.**

Mailing Address 4714 GETTYSBURG ROAD

City  
MECHANICSBURGState  
PAZip Code  
17055FEC ID number of contributing  
federal political committee.**C** C00546119

Name of Employer

Occupation

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  
05 23 2025

Transaction ID : A688A1A308FCB43D19A6

Amount of Each Receipt this Period

1000.00

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

6500.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

SOCIETY FOR CARDIOVASCULAR ANGIOGRAPHY AND INTERVENTIONS ASSOCIATION PAC

**A.**Mailing Address 1100 17TH STREET  
SUITE 400City  
WASHINGTONState  
DCZip Code  
20036FEC ID number of contributing  
federal political committee.**C** C00519371

Name of Employer

Occupation

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
05		16		2025

Transaction ID : AF855A090CFBE4A09BD7

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TENET HEALTHCARE CORPORATION PAC

**B.**

Mailing Address 14201 DALLAS PKWY

City  
DALLASState  
TXZip Code  
75254-2916FEC ID number of contributing  
federal political committee.**C** C00119354

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : A835D00DFEC14FE5BC2

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

THE AMERICAN OCCUPATIONAL THERAPY ASSOCIATION, INC. POLITICAL ACTION COMMITTEE (AOTPA)

**C.**

Mailing Address 6116 EXECUTIVE BLVD., SUITE 200

City  
NORTH BETHESDAState  
MDZip Code  
20852-4929FEC ID number of contributing  
federal political committee.**C** C00089086

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : A6EE4EF95F0214B24B00

Amount of Each Receipt this Period

1000.00

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

8000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION COMMITTEE FOR RURAL ELECTRIFICATION (AMER

**A.**

Mailing Address 4301 WILSON BLVD

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.**C** C00002972

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		13		2025

Transaction ID : AEF42F26E60C345F6A0D

Amount of Each Receipt this Period

1000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

THE NATIONAL RURAL ELECTRIC COOPERATIVE ASSOCIATION ACTION COMMITTEE FOR RURAL ELECTRIFICATION (AMER

Mailing Address 4301 WILSON BLVD

City

ARLINGTON

State

VA

Zip Code

22203

FEC ID number of contributing  
federal political committee.**C** C00002972

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		26		2025

Transaction ID : AF220165591EC437A850

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

THOROUGHbred PAC

Mailing Address 1225 NEW YORK AVE NW  
STE 600

City

WASHINGTON

State

DC

Zip Code

20005-6409

FEC ID number of contributing  
federal political committee.**C** C00425439

Name of Employer

Occupation

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
06		30		2025

Transaction ID : AD5F39532E0B94776943

Amount of Each Receipt this Period

5000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

7000.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

TRINITY INDUSTRIES EMPLOYEE PAC

**A.**Mailing Address 14221 NORTH DALLAS PARKWAY  
SUITE 1100City  
DALLASState  
TXZip Code  
75254-2942FEC ID number of contributing  
federal political committee.**C** C00268904

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		08		2025

Transaction ID : A0C474E5062394DA599F

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

UNITED STATES BEET SUGAR ASSOCIATION PAC

**B.**Mailing Address 50 F ST NW  
STE 675City  
WASHINGTONState  
DCZip Code  
20001-1533FEC ID number of contributing  
federal political committee.**C** C00063586

Name of Employer

Occupation

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
04		17		2025

Transaction ID : A4E9807C1B09D4216AC4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

US ONCOLOGY INC. NETWORK POLITICAL ACTION COMMITTEE

**C.**

Mailing Address 10101 WOODLOCH FOREST DR

City  
THE WOODLANDSState  
TXZip Code  
77380FEC ID number of contributing  
federal political committee.**C** C00339655

Name of Employer

Occupation

Receipt For: 2026

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
05		08		2025

Transaction ID : AB73F4D6C52434B14901

Amount of Each Receipt this Period

5000.00

☐ Memo Item

8000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

**US ONCOLOGY INC. NETWORK POLITICAL ACTION COMMITTEE**

Mailing Address 10101 WOODLOCH FOREST DR

City

THE WOODLANDS

State

TX

Zip Code

77380

FEC ID number of contributing  
federal political committee.**C** C00339655

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
05		08		2025

Transaction ID : A06B6D7F1718648D9B37

Amount of Each Receipt this Period

5000.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

**WAYNE FARMS LLC POLITICAL ACTION COMMITTEE WAYNE-SANDERSON PAC**

Mailing Address 4110 CONTINENTAL DR.

City

OAKWOOD

State

GA

Zip Code

30566

FEC ID number of contributing  
federal political committee.**C** C00412445

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
04		17		2025

Transaction ID : AF10F52277717453084D

Amount of Each Receipt this Period

1000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

**ZENECA INC. POLITICAL ACTION COMMITTEE**Mailing Address 1800 CONCORD PIKE  
PO BOX 15437

City

WILMINGTON

State

DE

Zip Code

19803-2910

FEC ID number of contributing  
federal political committee.**C** C00279455

Name of Employer

Occupation

Receipt For: 2026



Primary



General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y
06		18		2025

Transaction ID : ABD01F39375CB4C3BB74

Amount of Each Receipt this Period

1000.00

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

7000.00

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

192624.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

**TEAM MURPHY****A.**

Mailing Address PO BOX 30844

City

BETHESDA

State

MD

Zip Code

20824

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

C00730796

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

76425.86

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2025D D / Y Y Y Y Y  
30 / 2025Y Y Y Y Y  
2025

Transaction ID : A9A49E3E4761F48E1B97

Amount of Each Receipt this Period

43364.16

☐ Memo Item

TRANSFER OF NET PROCEEDS

**B.**

Full Name (Last, First, Middle Initial)

COOMBS, JOSHUA, WAYNE, ,

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 30 / 2025D D / Y Y Y Y Y  
30 / 2025Y Y Y Y Y  
2025

Transaction ID : A861951F8235047A9911

Amount of Each Receipt this Period

300.00

☒ Memo Item**C.**

Full Name (Last, First, Middle Initial)

SUDHAUS, WILLIAM, S, ,

Mailing Address 967 DELCHESTER RD

City

NEWTOWN SQUARE

State

PA

Zip Code

19073-1107

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

Name of Employer

Occupation

INFORMATION REQUESTED

INFORMATION REQUESTED

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 27 / 2025D D / Y Y Y Y Y  
27 / 2025Y Y Y Y Y  
2025

Transaction ID : AD81157529729447F80F

Amount of Each Receipt this Period

3500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

43364.16

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

WETHERINGTON, WILLIAM, MICHAEL, ,

Mailing Address 743 PLANTATION BLVD

City  
GALLATINState  
TNZip Code  
37066-7401FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CEOOccupation  
SOT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 23 2025

Transaction ID : A91CAE09A8A664294BDB

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MANIRE, ROSS, W., ,

Mailing Address 311 WHITE PINE CANYON RD

City  
PARK CITYState  
UTZip Code  
84060-6511FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
CONSULTANT & BOARD MEMBER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 14 2025

Transaction ID : A0F37EBFF16504F959D4

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

BRADY, DOUG, DOUGLAS, ,

Mailing Address 805 FRONT ST

City  
BEAUFORTState  
NCZip Code  
28516-2230FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
REAL ESTATE

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 25 2025

Transaction ID : A030CDEFEE47345AB939

Amount of Each Receipt this Period

1750.00

☒ Memo Item

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

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

0.00

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

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

CHADWICK, RICHARD, H, , III

**A.**

Mailing Address 105 CHELSEA CIR

City  
BEAUFORTState  
NCZip Code  
28516-9001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELFOccupation  
PSYCHOTHERAPIST

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  
05 30 2025

Transaction ID : AD2B089D6792F4A63865

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

BRADY, CAROLYN, , ,

**B.**

Mailing Address 805 FRONT ST

City  
BEAUFORTState  
NCZip Code  
28516-2230FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 25 2025

Transaction ID : A328C23FE4D154870BBA

Amount of Each Receipt this Period

1750.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

PARKER, BRIAN, , ,

**C.**

Mailing Address 5211 DRIFTWOOD LN

City  
MOREHEAD CITYState  
NCZip Code  
28557-2577FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PARKER AUTOOccupation  
DEALER

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  
05 20 2025

Transaction ID : A1374A67586DB4B81BAC

Amount of Each Receipt this Period

500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0.00

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

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

CHADWICK, KATHRYN, , ,

**A.** Mailing Address 1015 MORRIS MARINA RDCity  
ATLANTICState  
NCZip Code  
28511FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WILD WILLS REVENGEOccupation  
RESTAURANT OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 31 2025

Transaction ID : A61349DAD4D1A4B66AEB

Amount of Each Receipt this Period

1500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

SMITH, STEPHEN, B, ,

**B.** Mailing Address 8333 SOUGLAS AVE  
STE 1365City  
DALLASState  
TXZip Code  
75225FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SMITH CAPITAL MARKETS LLCOccupation  
PRESIDENT

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 27 2025

Transaction ID : A5BEE18DEC4A045AE96B

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

RUSSELL, ASHLEY-NICOLE, , ,

**C.** Mailing Address 5008 OLEANDER DRCity  
WILMINGTONState  
NCZip Code  
28403-7015FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASHLEY-NICOLE RUSSELLOccupation  
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  
05 31 2025

Transaction ID : A3020664C4AD74E829BA

Amount of Each Receipt this Period

250.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

CHADWICK, TERESA, , ,

**A.**

Mailing Address 105 CHELSEA CIR

City  
BEAUFORTState  
NCZip Code  
28516-9001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARTARET COUNTY SCHOOLOccupation  
EXECUTIVE ASSISTANT

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  
05 30 2025

Transaction ID : AD53ECFEB5AF24506AF0

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

WILLIAMS, RANDALL, W., ,

**B.**

Mailing Address 115 OCEAN RIDGE DR

City  
ATLANTIC BEACHState  
NCZip Code  
28512-7201FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARTERET COUNTYOccupation  
DIRECTOR CONSOLIDATED HUMAN SERV

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  
06 02 2025

Transaction ID : A8DA2FC2A64084E47990

Amount of Each Receipt this Period

500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

ALBERNAZ, MARCUS, S, , MD

**C.**

Mailing Address 3800 CHARLESTON CT

City  
GREENVILLEState  
NCZip Code  
27834-7667FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EASTERN CAROLINA ENTOccupation  
PHYSICIAN

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 27 2025

Transaction ID : A3510D4899B904CDA83D

Amount of Each Receipt this Period

3500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0.00

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

PAGE 122 OF 194

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

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

NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

OLIVER, CHARLES, , II

**A.**

Mailing Address 2401 FRONT ST

City  
BEAUFORTState  
NCZip Code  
28516-9321FEC ID number of contributing  
federal political committee.

C

Name of Employer  
THE BOATHOUSEOccupation  
OWNER

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 02 2025

Transaction ID : A3647F1E3BBF5404A800

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

GANT, ALLEN, E., JR.

**B.**

Mailing Address 1022 W DAVIS ST

City  
BURLINGTONState  
NCZip Code  
27215-3605FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2025

Transaction ID : ADE389912FCE94196BFF

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

DILLON, CHIP, ,

**C.**

Mailing Address 15 CYPRESS POINT DR

City  
PINEHURSTState  
NCZip Code  
28374-7133FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 24 2025

Transaction ID : AAF7D7EAF49AD4DDBBB7

Amount of Each Receipt this Period

1750.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

DILLON, MARGARET, , ,

**A.**

Mailing Address 15 CYPRESS POINT DR

City  
PINEHURSTState  
NCZip Code  
28374-7133FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 24 2025

Transaction ID : ABFD39AF739CD489ABBA

Amount of Each Receipt this Period

1750.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

TERRY, PENNY, , ,

**B.**

Mailing Address 40 LAKE DORNOCH DR

City  
PINEHURSTState  
NCZip Code  
28374-7109FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 24 2025

Transaction ID : AD75774446C6B4160B2F

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

TERRY, ALAN, , ,

**C.**

Mailing Address 40 LAKE DORNOCH DR

City  
PINEHURSTState  
NCZip Code  
28374-7109FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 24 2025

Transaction ID : AF11E874EB828416FB0E

Amount of Each Receipt this Period

3500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

**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)

PAGE 124 OF 194

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

WILLIAMSON, C., DONALD, ,

**A.** Mailing Address 1011 OCEAN RIDGE DRCity  
ATLANTIC BEACHState  
NCZip Code  
28512-7219FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 30 2025

Transaction ID : A8700077F24554138836

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

PRUETT, BOB, R, ,

**B.** Mailing Address PO BOX 695City  
BEAUFORTState  
NCZip Code  
28516-0695FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

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  
05 30 2025

Transaction ID : A961C4083D751421EB6E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

HOLLER, ANNETTE, J, ,

**C.** Mailing Address 5226 DRIFTWOOD LNCity  
MOREHEAD CITYState  
NCZip Code  
28557-2576FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

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  
06 03 2025

Transaction ID : A92307BDE4C8547E1A32

Amount of Each Receipt this Period

500.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

0.00

**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)

PAGE 125 OF 194

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

TEAM, ROBERT, A., , JR.

**A.**

Mailing Address 102 ACACIA CIR

City  
LEXINGTONState  
NCZip Code  
27292-5458FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FRONT STREET CAPITALOccupation  
MANAGING PARTNER

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	5

Transaction ID : A616454C00D574E66997

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

GILMORE, ASHLEY, M., ,

**B.**

Mailing Address 112 LISBON ST

City  
CLINTONState  
NCZip Code  
28328-4027FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SAMPSON COMMUNITY COLLEGEOccupation  
EDUCATOR

Receipt For: 2026

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	2	5

Transaction ID : A216CF9DF2FED42F6BA7

Amount of Each Receipt this Period

250.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

TEAM MURPHY

**C.**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824FEC ID number of contributing  
federal political committee.

C C00730796

Name of Employer

Occupation

Receipt For: 2026

☐ Primary    ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

76425.86

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

Transaction ID : AE2E4BD3B206F41ADA91

Amount of Each Receipt this Period

17860.62

☐ Memo Item

TRANSFER OF NET PROCEEDS

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1	7	8	6	0	.	6	2
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**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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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

SUDHAUS, WILLIAM, S, ,

A.

Mailing Address 967 DELCHESTER RD

City

NEWTOWN SQUARE

State

PA

Zip Code

19073-1107

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 27 2025

Transaction ID : AB307083E435144BC884

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

MANIRE, ROSS, W., ,

B.

Mailing Address 311 WHITE PINE CANYON RD

City

PARK CITY

State

UT

Zip Code

84060-6511

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF

Occupation

CONSULTANT &amp; BOARD MEMBER

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 14 2025

Transaction ID : A38523C85F73241438FC

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

SMITH, STEPHEN, B, ,

C.

Mailing Address 8333 SOUGLAS AVE  
STE 1365

City

DALLAS

State

TX

Zip Code

75225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SMITH CAPITAL MARKETS LLC

Occupation

PRESIDENT

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 27 2025

Transaction ID : A27E0E974244545E48CC

Amount of Each Receipt this Period

3500.00

☒ Memo Item

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

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

0.00

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

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

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

NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

ALBERNAZ, MARCUS, S, , MD

**A.**

Mailing Address 3800 CHARLESTON CT

City

GREENVILLE

State

NC

Zip Code

27834-7667

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EASTERN CAROLINA ENT

Occupation

PHYSICIAN

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 27 2025

Transaction ID : A62384CA324E34294944

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

OLIVER, CHARLES, , , II

**B.**

Mailing Address 2401 FRONT ST

City

BEAUFORT

State

NC

Zip Code

28516-9321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

THE BOATHOUSE

Occupation

OWNER

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 02 2025

Transaction ID : A1ED5A163D57043CAA41

Amount of Each Receipt this Period

3500.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

GANT, ALLEN, E., , JR.

**C.**

Mailing Address 1022 W DAVIS ST

City

BURLINGTON

State

NC

Zip Code

27215-3605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2026

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

6400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 31 2025

Transaction ID : A67EF8FC3FF984F779A3

Amount of Each Receipt this Period

2900.00

☒ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

0.00

61224.78

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

SOUTHWEST AIRLINES

A.

Mailing Address 2702 LOVE FIELD DR

City

DALLAS

State

TX

Zip Code

75235

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2026



Primary



General



Other (specify) ▼

Election Cycle-to-Date ▼

213.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	8		2	0	2	5

Transaction ID : AB80060474763479BAC8

Amount of Each Receipt this Period

213.87



Memo Item

OFFSET AIRFARE

Full Name (Last, First, Middle Initial)

B.

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

Amount of Each Receipt this Period



Memo Item

Full Name (Last, First, Middle Initial)

C.

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

Amount of Each Receipt this Period



Memo Item

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

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

213.87

213.87



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

PAGE 129 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. ACCULINK**

Mailing Address PO BOX 30080

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27833

FEC Identification Number

C

Purpose of Disbursement  
VOID PRINTING AND POSTAGE FOR MAILING FROM 3/31/2025 INVOICE  
PAID 4/10/2025 NO DEBT OUTSTANDING

001

Amount of Each Disbursement this Period

- 1326.80

Transaction ID : B45E0E112F534474F8E0

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2024

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. AMAZON**

Mailing Address 410 TERRY AVE. NORTH

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	2	5

City  
SEATTLEState  
WAZip Code  
98109

FEC Identification Number

C

Purpose of Disbursement  
GENERAL OFFICE SUPPLIES

001

Amount of Each Disbursement this Period

255.80

Transaction ID : B1D2B261E2150436DB77

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. AMAZON**

Mailing Address 410 TERRY AVE. NORTH

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	2	5

City  
SEATTLEState  
WAZip Code  
98109

FEC Identification Number

C

Purpose of Disbursement  
GENERAL OFFICE SUPPLIES

001

Amount of Each Disbursement this Period

127.90

Transaction ID : B95FB5E3E25484B58AD3

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

- 943.10

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

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

PAGE 130 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BOULEVARD

City  
FT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
AIRLINE FEE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

24.00

Transaction ID : B0A8678259F2B42BBB2F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BOULEVARD

City  
FT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
AIRLINE FEE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.07

Transaction ID : B8B6CA03F38C7416181C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BOULEVARD

City  
FT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
AIRFARE FEE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : B38F79AFA3731463A821

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

104.07

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

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

PAGE 131 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BOULEVARD

City  
FT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
AIRLINE WIFI

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

26.00

Transaction ID : B309AD3D0E181401E8BE

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BOULEVARD

City  
FT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
AIRFARE FEE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

982.50

Transaction ID : BB0A218CAC3A14C55A02

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BOULEVARD

City  
FT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
AIRLINE FEE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : B5F74EB4453044CECAA7

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

1048.50

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

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

PAGE 132 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BOULEVARD

City  
FT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
AIRLINE FEE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

21.04

Transaction ID : B78804D7EBDBB479DBFF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BOULEVARD

City  
FT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
AIRFARE FEE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

369.48

Transaction ID : B3505829641CD4D8AA65

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BOULEVARD

City  
FT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
AIRFARE FEE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

563.97

Transaction ID : B99C7072EC566404BB37

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

954.49

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

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

PAGE 133 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BOULEVARD

City  
FT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
AIRFARE FEE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : BA844FE5D78B449E285D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN AIRLINES**

Mailing Address 4255 AMON CARTER BOULEVARD

City  
FT WORTHState  
TXZip Code  
76155Purpose of Disbursement  
AIRFARE FEE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : B1F88211BD2B840C6A76

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

80.90

Transaction ID : B35A8D30D20B4419A911

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

160.90

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

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

PAGE 134 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

411.80

Transaction ID : BB697DBF556104839908

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

100.60

Transaction ID : B622F2A6D13774F4BBFF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

852.70

Transaction ID : B4A580D6869ED4DEC9CF

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

1365.10

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

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

PAGE 135 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		15		2025

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

945.80

Transaction ID : B386AE44C4F8C42BD9C9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		24		2025

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

412.20

Transaction ID : B2E74CC06768E400F840

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2025

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

473.90

Transaction ID : B9EF73171D0DE497BBBA

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

1831.90

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

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

PAGE 136 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	5

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

381.20

Transaction ID : BE909440F367840E9A96

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

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

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1.00

Transaction ID : B79880F8E844E454EB18

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

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

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

8.30

Transaction ID : B2C39A093BE8943B68BF

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

390.50

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



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

PAGE 137 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

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

City  
BATON ROUGEState  
LAZip Code  
70808

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1356.00

Transaction ID : B8DC20A65A09D4CEBBC6

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	5

City  
BATON ROUGEState  
LAZip Code  
70808

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

762.10

Transaction ID : BD65225ECB1FD44DBB77

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

City  
BATON ROUGEState  
LAZip Code  
70808

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

233.00

Transaction ID : B31A7EAE326494AB7B5E

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

2351.10

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

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

PAGE 138 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2025

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

2.50

Transaction ID : B30B1BCBDF8D34628B36

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2025

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

668.10

Transaction ID : B9C28018E9CF04F09A14

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		18		2025

City  
BATON ROUGEState  
LAZip Code  
70808Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

456.10

Transaction ID : B66595A286B8542069D0

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

1126.70

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

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

PAGE 139 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	5

City  
BATON ROUGEState  
LAZip Code  
70808

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

406.20

Transaction ID : B9FDC327FF5DF4EF08F7

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. ANEDOT, INC.**

Mailing Address 5555 HILTON AVE STE 106

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

City  
BATON ROUGEState  
LAZip Code  
70808

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

355.30

Transaction ID : BBAF33FAA9F234C0A94F

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. BEST, ANNITA, LANE, ,**

Mailing Address PO BOX 1131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
WAGES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B8A4E59CE80B44F75B36

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

1761.50

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

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

PAGE 140 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. BEST, ANNITA, LANE, ,**

Mailing Address PO BOX 1131

City  
GREENVILLEState  
NCZip Code  
27858Purpose of Disbursement  
WAGES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B5659B25C14EC4AF6BB6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BEST, ANNITA, LANE, ,**

Mailing Address PO BOX 1131

City  
GREENVILLEState  
NCZip Code  
27858Purpose of Disbursement  
MILEAGE REIMBURSEMENTS

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

326.20

Transaction ID : BD74F403408274F14BA9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BEST, ANNITA, LANE, ,**

Mailing Address PO BOX 1131

City  
GREENVILLEState  
NCZip Code  
27858Purpose of Disbursement  
WAGES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : BB8214113286041199E4

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

2326.20

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

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

PAGE 141 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. BGR PAC**Mailing Address 601 11TH ST NW  
11TH FLOOR SOUTHCity  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
IN-KIND:IN KIND FACILITY RENTAL AND CATERING

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4524.00

Transaction ID : BBC5DF91FB634459096D

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
ONLINE/WEBSITE/EMAIL SERVICES

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1963.19

Transaction ID : B19DF8DDDE4E145C6AFF

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
ONLINE/WEBSITE/EMAIL SERVICES

Candidate Name

Office Sought: 

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1774.53

Transaction ID : BE9AB9350CF084DC2BC3

☐ Memo Item

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

8261.72

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

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

PAGE 142 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVE. NW

City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
MEAL EXPENSES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

187.30

Transaction ID : BDD55E9B829994E76806

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVE. NW

City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
MEAL EXPENSES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

150.90

Transaction ID : BD5341FA7AF9740D2AB1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITAL GRILLE**

Mailing Address 601 PENNSYLVANIA AVE. NW

City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
MEAL EXPENSES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

74.70

Transaction ID : B46F5F5B75E784743942

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

412.90

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
MEAL EXPENSES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

666.05

Transaction ID : BE683701B117E4A0CB9E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
MEAL EXPENSES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

425.48

Transaction ID : B79B1B1D93C8744D8BC1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
MEAL EXPENSES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	5	

FEC Identification Number

C

Amount of Each Disbursement this Period

738.24

Transaction ID : BCEBBE92074464EC99E3

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

1829.77

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

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

PAGE 144 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
MEAL EXPENSES

007

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

718.58

Transaction ID : B41B0E0BE11094797B6C

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
MEAL EXPENSES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

171.00

Transaction ID : BB473714348574F19946

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CFS COMPLIANCE**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824-0844Purpose of Disbursement  
E-MERCHANT FEE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10.00

Transaction ID : BAEE6F704E8534B61990

☐ Memo Item

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

899.58

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



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

PAGE 145 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CFS COMPLIANCE**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824-0844Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

51.25

Transaction ID : B2017BD7207A1425BA51

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CFS COMPLIANCE**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824-0844Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

12.50

Transaction ID : B2EA0604067324B809E1

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CFS COMPLIANCE**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824-0844Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

102.00

Transaction ID : BE8579371F38F4EB7A59

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

165.75

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

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

PAGE 146 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	2	5

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B8C31F4333D434C00A3C

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	2	5

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

117.25

Transaction ID : B3922B3D0F0BD43F097F

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	7		2	0	2	5

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

45.00

Transaction ID : B6A05962D0DC64B68933

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

2162.25

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

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

PAGE 147 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	2	5

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

51.00

Transaction ID : B4D7C4D767E104C10861

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

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

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

58.75

Transaction ID : B845EF09E27DC421B843

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	2	5

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

47.50

Transaction ID : BEE1B05B4106C4482870

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

157.25

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CFS COMPLIANCE**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824-0844Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

12.50

Transaction ID : B1EE91D33A63B40BAB33

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CFS COMPLIANCE**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824-0844Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : BF58680CF21CE4A61985

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CFS COMPLIANCE**

Mailing Address PO BOX 30844

City  
BETHESDAState  
MDZip Code  
20824-0844Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

77.50

Transaction ID : BB347DD6E450F4978A69

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

2090.00

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

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

PAGE 149 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	2	5

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

17.50

Transaction ID : BAF7F716DDDD448BB966

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	2	5

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

6.25

Transaction ID : BC8EC4046913E4685BDA

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B968D6D62E9C54DFAAF9

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

2023.75

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

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

PAGE 150 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
COMPLIANCE CONSULTING

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B2803688671B34AF2BE4

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	2	5

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

50.63

Transaction ID : BCC8C26AC7BBA47F6874

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. CFS COMPLIANCE**

Mailing Address PO BOX 30844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

City  
BETHESDAState  
MDZip Code  
20824-0844

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

44.00

Transaction ID : B014851D660584593BA5

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

2094.63

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

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

PAGE 151 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CHICK-FIL-A #03882**

Mailing Address 1214 18TH ST NW

City  
WASHINGTONState  
DCZip Code  
20036-2538Purpose of Disbursement  
MEAL EXPENSE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

129.25

Transaction ID : B7E05FA94CD2A42219D9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COLONIAL PARKING**Mailing Address 1050 THOMAS JEFFERSON ST. NW  
SUITE 100 WCity  
WASHINGTONState  
DCZip Code  
20007Purpose of Disbursement  
PARKING

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

32.00

Transaction ID : BF89138815BD44302951

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CONGRESSIONAL INSTITUTE**Mailing Address 1700 DIAGONAL ROAD  
#300City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
CONVENTION REGISTRATION FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

452.32

Transaction ID : BA3DEECEC08364C21AE6

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

613.57

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. COURTYARD WASHINGTON DC**

Mailing Address 1325 2ND ST NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2025

City  
WASHINGTONState  
DCZip Code  
20002-3487

FEC Identification Number

C

Purpose of Disbursement  
LODGING

002

Amount of Each Disbursement this Period

432.49

Transaction ID : B7F400771048E485EA30

☐ Memo Item

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. COURTYARD WASHINGTON DC**

Mailing Address 1325 2ND ST NE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2025

City  
WASHINGTONState  
DCZip Code  
20002-3487

FEC Identification Number

C

Purpose of Disbursement  
MEAL EXPENSE

001

Amount of Each Disbursement this Period

55.46

Transaction ID : BE4F321F9B0D74AAEBAA

☐ Memo Item

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. DELTA AIRLINES**

Mailing Address 1030 DELTA BOULEVARD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		02		2025

City  
ATLANTAState  
GAZip Code  
30354

FEC Identification Number

C

Purpose of Disbursement  
AIRFARE

002

Amount of Each Disbursement this Period

686.96

Transaction ID : BBE0E17175B66496C8FC

☐ Memo Item

Candidate Name

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

1174.91

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



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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. FLB PROPERTIES**

Mailing Address PO BOX 2065

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27836

FEC Identification Number

C

Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

350.00

Transaction ID : BEC4351934153445DA45

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. FLB PROPERTIES**

Mailing Address PO BOX 2065

Date of Disbursement

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

City  
GREENVILLEState  
NCZip Code  
27836

FEC Identification Number

C

Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

350.00

Transaction ID : B5BB23F855B904D23987

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. FLB PROPERTIES**

Mailing Address PO BOX 2065

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27836

FEC Identification Number

C

Purpose of Disbursement  
RENT

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

350.00

Transaction ID : BB1D3D055BF3F475D85B

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

1050.00

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. HAMPTON INN LAKE NORMAN**

Mailing Address 19501 STATESVILLE RD

City  
CORNELIUSState  
NCZip Code  
28031-8538Purpose of Disbursement  
LODING

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

258.64

Transaction ID : BA53E9D3970EA4E339D8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOLIDAY INN EXPRESS - NC**

Mailing Address 150 COLLINS CROSSING RD

City  
HOLLY SPRINGSState  
NCZip Code  
27540-5473Purpose of Disbursement  
LODGING EXPENSE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

393.01

Transaction ID : BCCBFAB6D4966479EB8F

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JOE'S STONE CRAB**

Mailing Address 750 15TH ST NW

City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

527.71

Transaction ID : B73A31134B0F04C2786E

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

1179.36

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. LUCY CROXTON CONSULTING (LCC, INC.)**

Mailing Address 3352 COUNTRY CLUB ROAD

City  
WINSTON SALEMState  
NCZip Code  
27104Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

7500.00

Transaction ID : B3A032A7C9B064D66B0B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LUCY CROXTON CONSULTING (LCC, INC.)**

Mailing Address 3352 COUNTRY CLUB ROAD

City  
WINSTON SALEMState  
NCZip Code  
27104Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

5000.00

Transaction ID : B6D3D32C391CF4790A38

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LUCY CROXTON CONSULTING (LCC, INC.)**

Mailing Address 3352 COUNTRY CLUB ROAD

City  
WINSTON SALEMState  
NCZip Code  
27104Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : BCDED4D501AC245DB915

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

22500.00

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. LUCY CROXTON CONSULTING (LCC, INC.)**

Mailing Address 3352 COUNTRY CLUB ROAD

City  
WINSTON SALEMState  
NCZip Code  
27104Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

6108.02

Transaction ID : BA958EEDE87F24FD1AB6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MEARS TRANSPORTATION**

Mailing Address 324 W GORE ST

City  
ORLANDOState  
FLZip Code  
32806-1037Purpose of Disbursement  
TRANSPORTATION

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

110.00

Transaction ID : B54D6D0EDA2FD4599BA9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MEARS TRANSPORTATION**

Mailing Address 324 W GORE ST

City  
ORLANDOState  
FLZip Code  
32806-1037Purpose of Disbursement  
TRANSPORTATION

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

128.00

Transaction ID : B4E33F0AA8B5C441AA13

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

6346.02

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
MILEAGE

002

Amount of Each Disbursement this Period

123.20

Transaction ID : BAE2FA27057E14430946

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
MILEAGE

002

Amount of Each Disbursement this Period

123.20

Transaction ID : B0FBBEA77EFE34B00BB5

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
SEE MEMO ITEMS

002

Amount of Each Disbursement this Period

265.40

Transaction ID : B87FFA058A330466FA1B

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

511.80

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		29		2025

City  
GREENVILLEState  
NCZip Code  
27858Purpose of Disbursement  
MILEAGE

002

FEC Identification Number

C

Amount of Each Disbursement this Period

180.60

Transaction ID : B0755DD17A8C34ABF8D0

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2025

City  
GREENVILLEState  
NCZip Code  
27858Purpose of Disbursement  
SEE MEMO ITEMS

002

FEC Identification Number

C

Amount of Each Disbursement this Period

40.00

Transaction ID : BA7FEBE6785BF4E96856

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. MEARS TRANSPORTATION**

Mailing Address 324 W GORE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2025

City  
ORLANDOState  
FLZip Code  
32806-1037Purpose of Disbursement  
TRANSPORTATION

002

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : BE36A2BA2239742A0B74

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

40.00

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

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

PAGE 159 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. MEARS TRANSPORTATION**

Mailing Address 324 W GORE ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		01		2025

City  
ORLANDOState  
FLZip Code  
32806-1037

FEC Identification Number

C

Purpose of Disbursement  
TRANSPORTATION

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

20.00

Transaction ID : B7F3EF5BF01C74924A9F

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2025

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
SEE MEMO ITEM

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

210.00

Transaction ID : B816D08DA62AA456C9D0

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. UNITED STATES POSTAL SERVICE**

Mailing Address 806 E 10TH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		12		2025

City  
GREENVILLEState  
NCZip Code  
27858-3502

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

210.00

Transaction ID : BD1F3BA85661D4E2B877

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

210.00

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

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

PAGE 160 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
SEE MEMO ITEM

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

29.93

Transaction ID : BDC40E0E1AB7540A3AFC

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
MILEAGE

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

553.00

Transaction ID : BDBAF688116954099BA4

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
SEE MEMO ITEM

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

219.00

Transaction ID : B34579E600B78403C875

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

801.93

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



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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. UNITED STATES POSTAL SERVICE**

Mailing Address 806 E 10TH ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27858-3502

FEC Identification Number

C

Purpose of Disbursement  
POSTAGE

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

219.00

Transaction ID : B62AE23AABD7448AEAF1

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
SEE MEMO ITEMS

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

901.45

Transaction ID : B61051CD9EFD8461DAAB

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. ENTERPRISE**

Mailing Address 35 E COLONIAL DR

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	2	5

City  
ORLANDOState  
FLZip Code  
32801-1238

FEC Identification Number

C

Purpose of Disbursement  
CAR RENTAL

002

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

901.45

Transaction ID : BE069AE7119C04D48820

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

901.45

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2025

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
MILEAGE REIMBURSEMENTS

002

Amount of Each Disbursement this Period

368.90

Transaction ID : BDB10F3D336174079A3C

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. MURPHY, GREGORY, FRANCIS, , MD**

Mailing Address PO BOX 1131

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2025

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
MILEAGE REIMBURSEMENTS

002

Amount of Each Disbursement this Period

114.80

Transaction ID : BF3B657E81DBB4B84894

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. NATIONALS PARK**

Mailing Address 1500 S CAPITOL ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		05		2025

City  
WASHINGTONState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
EVENT TICKETS

007

Amount of Each Disbursement this Period

1380.00

Transaction ID : B84E6CDE95BF14A198D7

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

1863.70

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

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

PAGE 163 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. NATIONALS PARK**

Mailing Address 1500 S CAPITOL ST SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
PARKING

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : B5E19DCB0DC73469CB08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NINO'S CUCINA**

Mailing Address 511 RED BANKS RD

City  
GREENVILLEState  
NCZip Code  
27858Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

294.18

Transaction ID : BAC1297D402114E66AB9

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. NORTH CAROLINA REPUBLICAN PARTY**

Mailing Address 1506 HILLSBOROUGH ST

City  
RALEIGHState  
NCZip Code  
27605Purpose of Disbursement  
PROGRAM AD

004

Candidate Name

NORTH CAROLINA REPUBLICAN PARTY

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

C00038505

Amount of Each Disbursement this Period

1000.00

Transaction ID : B61311343311746268EC

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

1344.18

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

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

PAGE 164 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. OLD NORTH STRATEGIES, LLC**

Mailing Address PO BOX 944

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		17		2025

City  
KINGS MOUNTAINState  
NCZip Code  
28086

FEC Identification Number

C

Purpose of Disbursement  
STRATEGIC CAMPAIGN CONSULTING

003

Amount of Each Disbursement this Period

1000.00

Transaction ID : B80119FD007A64057815

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. OLD NORTH STRATEGIES, LLC**

Mailing Address PO BOX 944

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2025

City  
KINGS MOUNTAINState  
NCZip Code  
28086

FEC Identification Number

C

Purpose of Disbursement  
STRATEGIC CAMPAIGN CONSULTING

003

Amount of Each Disbursement this Period

1517.68

Transaction ID : BDC9B28310F164CA4939

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. OLD NORTH STRATEGIES, LLC**

Mailing Address PO BOX 944

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2025

City  
KINGS MOUNTAINState  
NCZip Code  
28086

FEC Identification Number

C

Purpose of Disbursement  
STRATEGIC CAMPAIGN CONSULTING

003

Amount of Each Disbursement this Period

1526.18

Transaction ID : BC382E0C60CDD46988F1

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

4043.86

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

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

PAGE 165 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. PUSH DIGITAL, LLC**Mailing Address 1401 SAM RITTENBERG BLVD  
SUITE 1City  
CHARLESTONState  
SCZip Code  
29407Purpose of Disbursement  
ONLINE/CLOUD SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1354.92

Transaction ID : B9FBDFB6ECD544EDCA17

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RELYUS**

Mailing Address 3469 BLACK &amp; DECKER RD

City  
HOPE MILLSState  
NCZip Code  
28348Purpose of Disbursement  
PRINTING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

904.30

Transaction ID : BAA6FE195F2454F0AAA8

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. RELYUS**

Mailing Address 3469 BLACK &amp; DECKER RD

City  
HOPE MILLSState  
NCZip Code  
28348Purpose of Disbursement  
PRINTING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

524.34

Transaction ID : B77846BB03F8B4449867

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

2783.56

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

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

PAGE 166 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. ROBINSON, LINDY, , ,**

Mailing Address PO BOX 1131

City  
GREENVILLEState  
NCZip Code  
27858Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1278.60

Transaction ID : B1C19E3EC5210424499B

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROBINSON, LINDY, , ,**

Mailing Address PO BOX 1131

City  
GREENVILLEState  
NCZip Code  
27858Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1139.80

Transaction ID : B8D58B90C8A7A4C09A69

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROBINSON, LINDY, , ,**

Mailing Address PO BOX 1131

City  
GREENVILLEState  
NCZip Code  
27858Purpose of Disbursement  
SEE MEMO ITEMS

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

645.60

Transaction ID : B86E999B9BDB7474EA40

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

3064.00

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

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

PAGE 167 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. ROBINSON, LINDY, , ,**

Mailing Address PO BOX 1131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Amount of Each Disbursement this Period

500.00

Transaction ID : B35D95A50F7F54085B50

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. ROBINSON, LINDY, , ,**

Mailing Address PO BOX 1131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	2	5

City  
GREENVILLEState  
NCZip Code  
27858

FEC Identification Number

C

Purpose of Disbursement  
MILEAGE

002

Amount of Each Disbursement this Period

145.60

Transaction ID : B9D0ECF9BC4E2448795B

☒ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. SANDERLING RESORT**

Mailing Address 1461 DUCK ROAD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

City  
DUCKState  
NCZip Code  
27949

FEC Identification Number

C

Purpose of Disbursement  
LODGING EXPENSE

002

Amount of Each Disbursement this Period

540.27

Transaction ID : B3711CB3DC285419D918

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

540.27

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

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

PAGE 168 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. SANITARY FISH MARKET**

Mailing Address 501 EVANS ST

City  
MOREHEAD CITYState  
NCZip Code  
28557Purpose of Disbursement  
CATERING

007

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

1594.80

Transaction ID : BDA38389092BE4199B9E

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address 2702 LOVE FIELD DR

City  
DALLASState  
TXZip Code  
75235Purpose of Disbursement  
AIRFARE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

498.35

Transaction ID : B1E7E2D6E38624F7A99A

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. TERRA DAVIS CONSULTING, LLC**

Mailing Address 1369 E STREET SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

8445.00

Transaction ID : B286876177FC24512839

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

10538.15

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



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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. TERRA DAVIS CONSULTING, LLC**

Mailing Address 1369 E STREET SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
FUNDRAISING CONSULTING

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

24887.50

Transaction ID : BFE6DC6FC1F344B898ED

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TOWNSEND MARKETING**

Mailing Address 8315 E 111TH ST S

City  
BIXBYState  
OKZip Code  
74008Purpose of Disbursement  
PRINTING SERVICES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

268.48

Transaction ID : BB77DE11EE9644D18816

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UNITED AIRLINES**

Mailing Address 77 WEST WACKER DRIVE

City  
CHICAGOState  
ILZip Code  
60601Purpose of Disbursement  
CREDIT - AIRFARE

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

- 895.50

Transaction ID : B52CF5FC136EB4CFC9E2

☐ Memo Item

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

24260.48

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

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

PAGE 170 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. US HOUSE OF REPRESENTATIVES DINING**

Mailing Address US CAPITOL BUILDING

City  
WASHINGTONState  
DCZip Code  
20004Purpose of Disbursement  
FOOD/BEVERAGE

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

859.73

Transaction ID : B41731134B14A47038C7

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WALMART**

Mailing Address 702 S.W. 8TH ST.

City  
BENTONVILLEState  
ARZip Code  
72716Purpose of Disbursement  
GENERAL OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.82

Transaction ID : B2978A25BDD0445CAA60

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WALMART**

Mailing Address 702 S.W. 8TH ST.

City  
BENTONVILLEState  
ARZip Code  
72716Purpose of Disbursement  
GENERAL OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.82

Transaction ID : BCDF3A31F50C64AFA93F

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

887.37

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

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

PAGE 171 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. WALMART**

Mailing Address 702 S.W. 8TH ST.

City  
BENTONVILLEState  
ARZip Code  
72716Purpose of Disbursement  
GENERAL OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

28.26

Transaction ID : BBE81399496074EA9BA6

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WALMART**

Mailing Address 702 S.W. 8TH ST.

City  
BENTONVILLEState  
ARZip Code  
72716Purpose of Disbursement  
GENERAL OFFICE SUPPLIES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

13.82

Transaction ID : BC3D589DEA2DA41F8905

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WALT DISNEY COMPANY**

Mailing Address 500 S BUENA VISTA ST

City  
BURBANKState  
CAZip Code  
91521-0001Purpose of Disbursement  
LODGING

002

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/> General
<input type="checkbox"/>	Other (specify) ▼	

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

398.25

Transaction ID : B3814213599924B86907

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

440.33

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. WENSTRUP FOR CONGRESS**

Mailing Address PO BOX 9551

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2025

City  
CINCINNATIState  
OHZip Code  
45209-0551

FEC Identification Number

C C00497818

Purpose of Disbursement  
SEE MEMO ITEM

001

Category/  
Type

Amount of Each Disbursement this Period

1643.19

Transaction ID : BF190A03F181D4DD6BA5

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH

District: 02

Full Name (Last, First, Middle Initial)

**B. CAPITOL HILL CLUB**

Mailing Address 300 FIRST ST SE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		30		2025

City  
WASHINGTONState  
DCZip Code  
20003

FEC Identification Number

C

Purpose of Disbursement  
MEAL EXPENSES

001

Category/  
Type

Amount of Each Disbursement this Period

1643.19

Transaction ID : BE78F46E1AFC54A88B1D

☒ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2025

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

003

Category/  
Type

Amount of Each Disbursement this Period

23.64

Transaction ID : B6909A1EF731D40BBB85

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

1666.83

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2025

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

8.26

Transaction ID : B224BFD460C7647D0A4B

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		07		2025

City  
ALEXANDRIAState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

15.38

Transaction ID : BCF462CD5FA7B4370895

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		14		2025

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

115.45

Transaction ID : B55B98D8F7B5E4D7695C

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

115.45

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

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

PAGE 174 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

92.24

Transaction ID : BBF78951D99BA428EB16

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

23.21

Transaction ID : B29FFD4428AA047C9B9E

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

322.62

Transaction ID : BDD28B806E5214D87A84

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

322.62

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

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

PAGE 175 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2025

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

32.82

Transaction ID : BF0DDC0E2DCF5469B825

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		21		2025

City  
ALEXANDRIAState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

289.80

Transaction ID : B2D1634F4B42440A5B34

☒ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2025

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

194.81

Transaction ID : B6263689CD58C4C0F99F

☐ Memo Item

State:

District:

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

194.81

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

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

PAGE 176 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

9.34

Transaction ID : BAFC3A975B9744DCDAE7

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	2	5

City  
ALEXANDRIAState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

185.47

Transaction ID : B115645AB30AD4647B5A

☒ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

66.98

Transaction ID : B8571AE19B2984C7998B

☐ Memo Item

Office Sought:

<input type="checkbox"/> House
<input type="checkbox"/> Senate
<input type="checkbox"/> President

Disbursement For: 2026

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State:

District:

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

66.98

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



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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

39.47

Transaction ID : B09C1069B1D734F70921

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

27.51

Transaction ID : BF3C94E04912240959C4

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

54.50

Transaction ID : B27DD75737E904E11B64

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

54.50

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

48.07

Transaction ID : B36C5A58B1E134726981

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

6.43

Transaction ID : BD1C185F3E72F451D8AF

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

80.77

Transaction ID : B9BDADA74955246A7AE6

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

80.77

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

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

PAGE 179 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

72.50

Transaction ID : BE2DC157B5BC449C1B66

☒ Memo Item**B. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

8.27

Transaction ID : B9BFFB50754E042F7AB8

☒ Memo Item**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

166.09

Transaction ID : BE4D6AC27F5544EB8A98

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

166.09

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

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

PAGE 180 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

152.86

Transaction ID : B58450859625F4C7189F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

13.23

Transaction ID : BA9509E9BACC14F4CB50

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

57.21

Transaction ID : B87C7FC9B3A3342E2BDC

☐ Memo Item

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

57.21

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

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

PAGE 181 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2025

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

9.61

Transaction ID : B2C9D6ABE80604ACEAE8

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2025

City  
ALEXANDRIAState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

47.60

Transaction ID : B325D8A364AF847DAA88

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2025

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

84.44

Transaction ID : B25CC3D0411E840CA8CA

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

84.44

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

14.35

Transaction ID : BE57733B1CB8241F792F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

70.09

Transaction ID : B9D9D0BF292FF4A4198F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

122.95

Transaction ID : B9A2B5631246D4B50810

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

122.95

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2025

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

86.14

Transaction ID : B64EE2523B9734C48925

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		16		2025

City  
ALEXANDRIAState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

36.81

Transaction ID : BF394A11FA6BC4503851

☒ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2025

City  
ARLINGTONState  
VAZip Code  
22209-2515

FEC Identification Number

C

Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

6.19

Transaction ID : B69E5C4A57CBD42138FF

☐ Memo Item

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

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

6.19

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

1.75

Transaction ID : B4E170A3735B94E3AB5F

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

4.44

Transaction ID : B9479CB5E3B6E434EAFE

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

003

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

310.85

Transaction ID : B5EF46F0ACD684AC5A2F

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

310.85

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



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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. CAMPAIGN SOLUTIONS, INC.**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIAState  
VAZip Code  
22314Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

280.53

Transaction ID : B4271715F8E504180B9B

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. WINRED TECHNICAL SERVICES**

Mailing Address 1776 WILSON BLVD

City  
ARLINGTONState  
VAZip Code  
22209-2515Purpose of Disbursement  
E-MERCHANT FEES

001

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2026

<input checked="" type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	5

FEC Identification Number

C

Amount of Each Disbursement this Period

30.32

Transaction ID : B70AAB006E505465EBE4

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

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

0.00

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

120920.09

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. ALASKANS FOR NICK BEGICH**

Mailing Address PO BOX 67170

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
CHUGIAKState  
AKZip Code  
99567

FEC Identification Number

**C** C00792341Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : BC9DFE0B3758C462FAD7

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AK

District: 00

Full Name (Last, First, Middle Initial)

**B. BRIAN FITZPATRICK FOR ALL OF US**

Mailing Address PO BOX 939

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
LANGHORNEState  
PAZip Code  
19047-0939

FEC Identification Number

**C** C00607416Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B77987340227641A4A67

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA

District: 01

Full Name (Last, First, Middle Initial)

**C. CISCOMANI FOR CONGRESS**

Mailing Address PO BOX 35103

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
TUCSONState  
AZZip Code  
85740-5103

FEC Identification Number

**C** C00786194Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B55DCD0C0B02C415482E

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ

District: 06

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. DON BACON FOR CONGRESS**

Mailing Address P.O. BOX 391368

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
OMAHAState  
NEZip Code  
68139

FEC Identification Number

**C** C00575167Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B63DC51366F8448E6B94

☐ Memo ItemCandidate Name  
BACON, DONALD, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NE

District: 02

Full Name (Last, First, Middle Initial)

**B. ELECTGABEEVANS.COM**

Mailing Address PO BOX 350608

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
WESTMINSTERState  
COZip Code  
80035-0608

FEC Identification Number

**C** C00849844Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : BB8E4CE73BCA74CD4A40

☐ Memo ItemCandidate Name  
EVANS, TIMOTHY, GABRIEL JOSEPH, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO

District: 08

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF DAVID SCHWEIKERT**

Mailing Address 8175 EAST EVANS ROAD # 13176

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
SCOTTSDALEState  
AZZip Code  
85267

FEC Identification Number

**C** C00540617Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B0B87D7A44A144129840

☐ Memo ItemCandidate Name  
SCHWEIKERT, DAVID, S, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ

District: 01

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

3000.00

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

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

PAGE 188 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. IOWANS FOR ZACH NUNN**

Mailing Address PO BOX 11

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
BONDURANTState  
IAZip Code  
50035-0011

FEC Identification Number

**C** C00784389Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B936FF1665173461BAD7

☐ Memo ItemCandidate Name  
NUNN, ZACH, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA District: 03

Full Name (Last, First, Middle Initial)

**B. KEAN FOR CONGRESS INC**

Mailing Address PO BOX 999

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
EDISONState  
NJZip Code  
08818-0999

FEC Identification Number

**C** C00703058Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : BA8BA2691775A4224931

☐ Memo ItemCandidate Name  
KEAN, THOMAS, H., , JR.

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 07

Full Name (Last, First, Middle Initial)

**C. KEN CALVERT FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 2438

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
CORONAState  
CAZip Code  
92878-2438

FEC Identification Number

**C** C00257337Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B236621D78EEF458C963

☐ Memo ItemCandidate Name  
CALVERT, KEN, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 41

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

3000.00

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

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

PAGE 189 OF 194

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. KIGGANS FOR CONGRESS**

Mailing Address P.O. BOX 5042

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
VIRGINIA BEACHState  
VAZip Code  
23471

FEC Identification Number

**C** C00776120Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B4E3408E574A34424A82

☐ Memo Item

Candidate Name

KIGGANS, JENNIFER, , ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA

District: 02

Full Name (Last, First, Middle Initial)

**B. LAWLER FOR CONGRESS**

Mailing Address PO BOX 87

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
SOUTH SALEMState  
NYZip Code  
10590-0087

FEC Identification Number

**C** C00815415Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B1FE8728944A5482BA4B

☐ Memo Item

Candidate Name

LAWLER, MICHAEL, VINCENT, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District: 17

Full Name (Last, First, Middle Initial)

**C. MACKENZIE FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 747

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
EMMAUSState  
PAZip Code  
18049-0747

FEC Identification Number

**C** C00846501Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B0F7F3AE3EBB348E5996

☐ Memo Item

Candidate Name

MACKENZIE, RYAN, EDWARD, ,

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA

District: 07

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. MAGGIE'S LIST**

Mailing Address 6675 WEEPING WILLOW WAY

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	2	5

City  
TALLAHASSEEState  
FLZip Code  
32311

FEC Identification Number

**C** C00469023Purpose of Disbursement  
CONTRIBUTION

011

Amount of Each Disbursement this Period

1000.00

Candidate Name  
MAGGIE'S LISTCategory/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : B5B38D990AC1646C2965

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**B. MILLER-MEEKS FOR CONGRESS**

Mailing Address PO BOX 33

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
OTTUMWAState  
IAZip Code  
52501

FEC Identification Number

**C** C00558825Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Amount of Each Disbursement this Period

1000.00

Candidate Name  
MILLER-MEEKS, MARIANNETTE, JANE, ,Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : BE97C4E58C0044F148C7

☐ Memo Item

State: IA

District: 01

Full Name (Last, First, Middle Initial)

**C. PATRIOTS FOR PERRY**

Mailing Address 4075 LINGLESTOWN RD

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	2	5

City  
HARRISBURGState  
PAZip Code  
17112-1020

FEC Identification Number

**C** C00510164Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Amount of Each Disbursement this Period

1000.00

Candidate Name  
PERRY, SCOTT, , ,Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID : BBB171A6352EB4AC78AA

☐ Memo Item

State: PA

District: 10

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

Full Name (Last, First, Middle Initial)

**A. ROB FOR PA**

Mailing Address 11 DOCK ST BOX 971

Date of Disbursement

M M	D D	Y Y Y Y
06	23	2025

City  
PITSTONState  
PAZip Code  
18640Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name  
BRESNAHAN, ROB, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 08

FEC Identification Number

**C** C00852137

Amount of Each Disbursement this Period

1000.00

Transaction ID : B980D9FAEB3F5480F907

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TOM BARRETT FOR CONGRESS**

Mailing Address PO BOX 15221

Date of Disbursement

M M	D D	Y Y Y Y
06	23	2025

City  
LANSINGState  
MIZip Code  
48901Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name  
BARRETT, THOMAS, MORE, ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 07

FEC Identification Number

**C** C00793976

Amount of Each Disbursement this Period

1000.00

Transaction ID : B5164A012868A4069998

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VALADAO FOR CONGRESS**Mailing Address 5132 N PALM AVE  
# 227

Date of Disbursement

M M	D D	Y Y Y Y
06	23	2025

City  
FRESNOState  
CAZip Code  
93704-2236Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Candidate Name  
VALADAO, DAVID, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2026  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 22

FEC Identification Number

**C** C00499392

Amount of Each Disbursement this Period

1000.00

Transaction ID : BC555FD23F8B046C29D8

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

3000.00

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



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

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

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NAME OF COMMITTEE (In Full)

FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS

Full Name (Last, First, Middle Initial)

**A. VAN ORDEN FOR CONGRESS**

Mailing Address PO BOX 1836

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2025

City  
LA CROSSEState  
WIZip Code  
54602

FEC Identification Number

C C00742007

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : B510C7B706948420B8B4

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI

District: 03

Full Name (Last, First, Middle Initial)

**B. YOUNG KIM FOR CONGRESS**

Mailing Address PO BOX 17490

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2025

City  
ANAHEIMState  
CAZip Code  
92817

FEC Identification Number

C C00665638

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : BDC118A295989494BAA4

☐ Memo Item

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 40

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

2000.00

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

20000.00



**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 193 OF 194

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ARISTOTLE INTERNATIONAL, INC.**

Nature of Debt (Purpose):

CAMPAIGN SERVICES

Mailing Address PO BOX 716045

City

PHILADELPHIA

State

PA

Zip Code

19171-6045

Outstanding Balance Beginning This Period

0.00

Transaction ID : D7BB2CFF3220E40BDAEC

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ARISTOTLE INTERNATIONAL, INC.**

Nature of Debt (Purpose):

CAMPAIGN SERVICES

Mailing Address PO BOX 716045

City

PHILADELPHIA

State

PA

Zip Code

19171-6045

Outstanding Balance Beginning This Period

0.00

Transaction ID : D204BB04AD5B641CC941

Amount Incurred This Period

1500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CAMPAIGN SOLUTIONS, INC.**

Nature of Debt (Purpose):

ONLINE/WEBSITE/EMAIL SERVICES

Mailing Address 117 N SAINT ASAPH ST

City

ALEXANDRIA

State

VA

Zip Code

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : D3299329BC3CC4DF5933

Amount Incurred This Period

1641.73

Payment This Period

0.00

Outstanding Balance at Close of This Period

1641.73

1) **SUBTOTALS** This Period This Page (optional) .....

4641.73

2) **TOTALS** This Period (last page this line number only) .....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 194 OF 194

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**FRIENDS TO ELECT DR. GREG MURPHY TO CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**CASTLEBAR STRATEGIES, LLC**

Nature of Debt (Purpose):

REIMBURSEMENTS

Mailing Address PO BOX 470561

City

CHARLOTTE

State

NC

Zip Code

28247

Outstanding Balance Beginning This Period

0.00

Transaction ID : DD772B360F5B646519D4

Amount Incurred This Period

3140.08

Payment This Period

0.00

Outstanding Balance at Close of This Period

3140.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**OLD NORTH STRATEGIES, LLC**

Nature of Debt (Purpose):

STRATEGIC CAMPAIGN CONSULTING

Mailing Address PO BOX 944

City

KINGS MOUNTAIN

State

NC

Zip Code

28086

Outstanding Balance Beginning This Period

0.00

Transaction ID : DD5E9F1A8EA044CD4AE3

Amount Incurred This Period

1259.03

Payment This Period

0.00

Outstanding Balance at Close of This Period

1259.03

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**TERRA DAVIS CONSULTING, LLC**

Nature of Debt (Purpose):

FUNDRAISING CONSULTING

Mailing Address 1369 E STREET SE

City

WASHINGTON

State

DC

Zip Code

20003

Outstanding Balance Beginning This Period

0.00

Transaction ID : DD54D82C6D89B46E9A6B

Amount Incurred This Period

37002.31

Payment This Period

0.00

Outstanding Balance at Close of This Period

37002.31

1) **SUBTOTALS** This Period This Page (optional) .....

41401.42

2) **TOTALS** This Period (last page this line number only) .....

46043.15

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

46043.15