Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Murday for Congress 217 Hall Rd ADDRESS (number and street) (Check if address is changed) Westminster 29693 SC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address murday4congress@gmail.com is changed) Optional Second E-Mail Address elspethmurday@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) murday4congress.com (Check if address is changed) DATE 2023 C00831990 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Murday, Elspeth, Snow, Murday, Elspeth, Snow,, Date 01 24 2024 Signature of Treasurer NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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-	TYPE OF COMMITTEE:						
(Candidate Committee:						
((a) X This committee is a principal campaign committee. (Complete the candidate information below.)						
((b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name of Candidate Murday, Elspeth, Snow, ,							
	Candidate Office State SC						
	Party Affiliation IND Sought: House Senate President District 03						
((c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
_	Name of Candidate						
I	Party Committee: (National, State (Democratic,						
((d) This committee is a or subordinate) committee of the Republican, etc.) Party						
-	Political Action Committee (PAC):						
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a						
	Corporation Corporation w/o Capital Stock Labor Organization						
	Membership Organization Trade Association Cooperative						
	In addition, this committee is a Lobbyist/Registrant PAC.						
((f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)						
	In addition, this committee is a Lobbyist/Registrant PAC.						
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
((g) This committee is an independent expenditure-only political committee (Super PAC).						
	In addition, this committee is a Lobbyist/Registrant PAC.						
((h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).						
	In addition, this committee is a Lobbyist/Registrant PAC.						
,	Joint Fundraising Representative:						
((i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.						
((j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.						
Committees Participating in Joint Fundraiser							
	1C						

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W	Irite or Type Committee Name	22003)	raye 3			
	Murday for Cong	ress				
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
	NONE					
	Mailing Address					
		CITY ▲ STATE ▲	ZIP CODE ▲			
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representativ	Leadership PAC Sponso			
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.					
	The state of the s	speth, Snow, ,				
	Full Name	,217 Hall Rd				
	Mailing Address					
		Westminster SC	29693			
		CITY ▲ STATE ▲	ZIP CODE ▲			
	Title or Position ▼					
	Candidate	Telephone number	4 613 2026			
8.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).					
		speth, Snow, ,				
	of Treasurer	247 LIGHT Dd				
	Mailing Address	217 Hall Rd				
		Westminster SC	29693			
		CITY ▲ STATE ▲	ZIP CODE ▲			
	Title or Position ▼					
		Telephone number	4 - 613 - 2026			

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Full Name of Designated Fernander Agent	s Marques, Antonio Carlos, , ,							
Mailing Address	217 Hall Rd							
	Westminster	SC	29693					
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲					
		Telephone number 86	4 - 613 - 2026					
	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.							
Name of Bank, Depository,	Name of Bank, Depository, etc.							
Oconee	Oconee Federal Savings & Loan							
Mailing Address	111 W Windsor St							
	Westminster	SC	29693					
	CITY ▲	STATE ▲	ZIP CODE ▲					
Name of Bank, Depository, etc.								
Mailing Address								
	CITY ▲	STATE ▲	ZIP CODE ▲					

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC' 5 'F9 DCF H Z G7 < 98 I @ 'CF' + H9 A = N5 H = CB

Form/Schedule: F1A Transaction ID:

My party affiliation is altered to Republican, but I'm unsure of where on this form to enter that information.

Form/Schedule: Transaction ID: