

**Graydon
Head &
Ritchey
LLP**

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Attorneys at Law

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November 28, 2007

VIA FEDEX

Christopher Ritchie
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Re: Kevin Murphy For Congress (CO0384495)

Dear Mr. Ritchie:

Enclosed please find the following items:

1. FEC Form 1 – Statement of Organization renaming myself as Treasurer for the Committee.
2. FEC Form 3 – Termination Report for the reporting period January 1, 2006 through November 22, 2007.
3. Debt Settlement Plan for the Candidate loan from Kevin L. Murphy to the Committee

Should you have any questions, please do not hesitate to contact me.

Sincerely,

GRAYDON HEAD & RITCHIE LLP



Richard L. Robinson

RLR/ds
Enclosure
c: Kevin L. Murphy
1551891.1

www.graydon.com

Mailing Address
P.O. Box 17070
Ft. Mitchell, Kentucky 41017-0070

Kentucky Office
2500 Chamber Center Drive
Suite 300
Ft. Mitchell, Kentucky 41017
telephone (859) 282-8800
fax (859) 525-0214

Cincinnati Office
1900 Fifth Third Center
511 Walnut Street
Cincinnati, Ohio 45202-3157
telephone (513) 621-6464
fax (513) 651-3836

Butler/Warren Office
7759 University Drive
Suite H
West Chester, Ohio 45069
telephone (513) 755-9500
fax (513) 755-9588

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full) (Check if name
is changed) Example: If typing, type
over the lines.

12FE4M5

KEVIN MURPHY FOR CONGRESS

3782 NARROWS ROAD ERLANGER KY 41018

ADDRESS (number and street)
▼

3782 NARROWS RD

(Check if address
is changed)

ERLANGER KY 41018-1018

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

MURK@GRAYDON.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

859-525-0214

2. DATE 10 22 2007

3. FEC IDENTIFICATION NUMBER ►

C00384495

4. 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

RICHARD L. ROBINSON

Signature of Treasurer



Date

11 22 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

<input type="checkbox"/>	Office Use Only				
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For further Information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

(a) 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

KEVIN L MURPHY

Candidate Party Affiliation

REP

Office Sought:



House



Senate



President

State

KY

District

04

(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

(e) This committee is a separate segregated fund.

(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

Write or Type Committee Name

Kevin Murphy For Congress

7. **Custodian of Records:** Identify by name, address (phone number – optional) and position of the person in possession of committee books and records.

Full Name

KEVIN L MURPHY

Mailing Address

3782 NARROWS RDERLANGERKY 41018-1018

Title or Position▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

859-342-4495

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).

Full Name
of TreasurerRICHARD L ROBINSON

Mailing Address

1953 PROVINCIALFT MITCHELLKY 41011-1810

Title or Position▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

859-578-12422Full Name of
Designated
Agent

Mailing Address

Title or Position▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

 - - -

9. **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, etc.

ACCOUNT CLOSED

Mailing Address

CITY ▲

STATE

ZIP CODE ▲

Name of Bank, Depository, etc.

Four horizontal timelines with vertical tick marks. The top three timelines are identical, showing a sequence of 15 tick marks. The bottom timeline is identical for the first 15 tick marks but then branches into two parallel sequences: one with 5 tick marks and another with 4 tick marks, ending with a final tick mark.

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission
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The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify):	Fed Ex 11/28/01
	Shipping Date <input checked="" type="checkbox"/> Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 11/29/01	
PREPARER (3/2005)	DATE PREPARED