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FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full) Murphy, Gregory, Francis, Dr.,			2. Candidate's FEC Identification Number H0NC03172	
(b) Address (number and street) PO Box 1131		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Greenville NC 27835		3. Is This Statement <input checked="" type="checkbox"/> New (N) OR <input type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought House	6. State & District of Candidate NC 03		

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2024 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Friends to Elect Dr. Greg Murphy to Congress		
(b) Address (number and street) PO Box 1131		
(c) City, State, and ZIP Code Greenville NC 27835		

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) TEAM MURPHY		
(b) Address (number and street) PO BOX 97275		
(c) City, State, and ZIP Code Raleigh NC 27624		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Murphy, Gregory, Francis, Dr., [Electronically Filed]	Date 02/03/2023
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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