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1. (a) Name	of Candidate	(in full)	rphi	1			·. · .				
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(c) City, St	ate, and ZIP				19	809	3. Is Th	is 🗔	New (N) OR	^^	mended A)
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		DE	SIGNATIC	N OF PRIN	CIPAL	CAMPAIG	N COMM	ITTEE	•		٠
7 I hereby d	esignate the	following nam	ed political co	ommittee as my F	Principal C	ampaign Con	omittee for the	20	2 Z alacti	on(s)	
•				opropriate office				(year of e		O11(3).	
	of Committee		•	•		\$ 15 g		· · · · · · · · · · · · · · · · · · ·		8	
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8. I hereby a		ollowing nam	ed committee	, which is NOT m	ny principa	ıl campaign co	ommittee, to r	eceive and	expend funds	on behal	f of my
		n should be fi	led with the pr	rincipal campaigr	n committe	e.	1)	A	_		
(a) Name	of Committee	(in full)									
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(c) City, St	ate, and ZIP	Code								<u>. </u>	
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	I certify tha	it I have exam	nined this Stat	ement and to the	e best of n	ny knowledge	and belief it i	s true, corre	oct and comp	lete.	
Signature of C	Candidate .	eH.	Mungs	hy			Date	6	1251	202	· ·
NOTE: Subm	ission of fals	e, erroneous,	or incomplete	information may	/ subject ti	he person sigr	ning this State	ement to per	nalties of 52 t	J.S.C. §3(0109
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FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

(c) City, State, and ZIP Code

Optional Supplemental Page for Designation of Additional Authorized Committees

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* 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) (b) Address (number and street) (c) City, State, and ZIP Code 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) (b) Address (number and street) (c) City,:State, and ZIP Code 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) (b) Address (number and street) (c) City, State, and ZIP Code 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) (b) Address (number and street)

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Lee Murphy - CANDOTE FOR CONGSESS

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PREPARER	<u> </u>	DATE PREPARED
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