

48-HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL Friends to Elect Dr. Greg Murphy to Congress			
ADDRESS (number and street) PO Box 1131			
CITY Greenville	STATE NC	ZIP CODE 27835	
2. NAME OF CANDIDATE Murphy, Gregory, Francis, Dr.,		3. OFFICE SOUGHT (State and District) House NC 03	
		4. FEC IDENTIFICATION NUMBER C00697649	
5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)		Name of Employer	
MAILING ADDRESS 1400 L St NW Suite 400		Transaction ID : F65-CN26000	
CITY Washington	STATE DC	ZIP CODE 20005	Occupation
B. FULL NAME AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE		Name of Employer	
MAILING ADDRESS PALLADIAN 1 220 LEIGH FARM RD		Transaction ID : F65-CN26001	
CITY Durham	STATE NC	ZIP CODE 27707	Occupation
C. FULL NAME BALCH AND BINGHAM LLP FEDERAL POLITICAL COMMITTEE		Name of Employer	
MAILING ADDRESS 1710 SIXTH Ave N		Transaction ID : F65-CN25998	
CITY Birmingham	STATE AL	ZIP CODE 35203	Occupation
D. FULL NAME JACKSON HOLDINGS LLC AND JACKSON NATIONAL LIFE INSURANCE COMPANY FEDERAL SSF (JACKSON NATIONAL FEDER		Name of Employer	
MAILING ADDRESS 1 CORPORATE WAY		Transaction ID : F65-CN26003	
CITY Lansing	STATE MI	ZIP CODE 48951	Occupation
E. FULL NAME PEDIATRIX MEDICAL GROUP INC. POLITICAL ACTION COMMITTEE (PEDIATRIX PAC)		Name of Employer	
MAILING ADDRESS 1301 CONCORD Ter		Transaction ID : F65-CN26002	
CITY Sunrise	STATE FL	ZIP CODE 33323	Occupation
SIGNATURE (optional) McMichael, Collin, , ,		DATE 02/24/2024	For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

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Any information copied from reports and statements filed under the Federal Election Campaign Act 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.

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5. IS THIS AN AMENDMENT? ☒ NO, THIS IS A NEW FILING ☐ YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____			
A. FULL NAME, MAILING ADDRESS AND ZIP CODE SENTRY INSURANCE COMPANY FEDERAL POLITICAL ACTION COMMITTEE 25 MAIN St W Ste 500 Madison WI 53703		Name of Employer Transaction ID : F65-CN25999 Occupation	
		Date (month, day, year) 02/23/2024	
		Amount 1000.00	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer	
		Date (month, day, year)	
		Amount	
		Occupation	

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