### SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM SPAC COVER SHEET PG 1

The SPAC Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 6
3 COMMITTEE NAME		00060451	
			OFFICE USE ONLY
Friends of Jim Mu	pny		Date Received ELECTRONICALLY FILED 01/15/2025
4 COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; C	ITY; STATE; ZIP COD	E
ADDRESS	One Greenway Plaza, Ste. 225		Date Hand-delivered or Date Postmarked
	-		Date Hand-delivered of Date Fostilitarked
Change of Address	Houston, TX 77046		Receipt # Amount
			Date Processed
			Date Imaged
5 CAMPAIGN	MS / MRS / MR FIRST		MI
TREASURER NAME	Mr. Larry		
	NICKNAME LAST		SUFFIX
	Massey		
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)	; APT / SUITE #; 0	CITY; STATE; ZIP CODE
TREASURER	One Greenway Plaza, Ste. 225		
STREET ADDRESS			
(Residence or Business)	Houston, TX 77046		
7 CAMPAIGN	STREET OR PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
TREASURER MAILING	One Greenway Plaza, Ste. 225		
ADDRESS			
Change of Address	Houston, TX 77046		
8 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSION	
PHONE	(713) 526-3399		
9 REPORT			
TYPE	X January 15	Oth day before election	Exceeded modified reporting limit
	8t	h day before election	Dissolution (Attach PAC-DR)
	July 15	unoff	10th day after campaign treasurer
			termination
10 PERIOD	Month Day Year	Month	Day Year
COVERED	07/01/2024	THROUGH 12	2/31/2024
11 ELECTION			
	Month Day Year	rimary Runoff	Other
	G	eneral Special	
	· ·		
	GO	TO PAGE 2	
Forme provided by T-			Varaian 1/4 1 0 Edd00
Forms provided by Te	xas Ethics Commission www.e	ethics.state.tx.us	Version V4.1.0.5dd2ace2

### SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

## FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Friends of Jim Murphy			00060451	
14 COMMITTEE		CANDIDATE / OFFICEHOLDER NAME		
PURPOSE				
(Attach lists on plain	Candidate			
paper to complete this report if necessary.)		OFFICE SOUGHT (candidate) / OFFICE HELI	D (officaboldor)	
	Officeholder			
(Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTI	ON DATE
			Month	Day Year
(Candidate or Measure)				
	Measure			
(Officeholder)		DESCRIPTION		
15 CONTRIBUTION		RIBUTIONS OF \$50 OR LESS (OTHER THAN	I PLEDGES,	
TOTALS	LOANS, OR GUARANTE ELECTRONICALLY), UNI	ES OF LOANS, OR CONTRIBUTIONS MADE		\$ \$0.00
	2. TOTAL POLITICAL CO			\$ \$0.00
		S, LOANS, OR GUARANTEES OF LOANS)		
EXPENDITURE	3. TOTAL UNITEMIZED PO	LITICAL EXPENDITURES		
TOTALS				\$ \$0.00
	4. TOTAL POLITICAL EX	(PENDITURES		\$ \$3,500.00
CONTRIBUTION		TRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	
BALANCE	REPORTING PERIOD			<b>\$</b> \$136,250.50
OUTSTANDING		UNT OF ALL OUTSTANDING LOANS AS OF T		
LOAN TOTALS	DAY OF THE REPORTIN		TIE EAST	\$ \$0.00
16 AFFIDAVIT				•
		I swear, or affirm, under penalty of perju		
		and correct and includes all information Title 15, Election Code.	required to be	reported by me under
			y Massey	
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Car	npaign Treasure	ei
Sworn to and subscribe	boforo mo hutho coid		vic the	de
		, th , witness my hand and seal of office.	ແລ ແ ເປ	day
	,, to certify which			
Signature of officer ad	ministering oath Print	ed name of officer administering oath	Title of office	er administering oath
Signature of onicci au		and of one of unmotioning out		a annihotoring oath

SUBTOTALS - SPAC	C	FORM SPAC OVER SHEET PG 3 3 of 6
17 COMMITTEE NAME Friends of Jim Murphy	18 Filer ID 00060451	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	I	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABC	R	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$
6. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$
7. SCHEDULE E: LOANS		\$
8. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 3,500.00
9. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
10. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
11. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
12. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
13. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
14. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

#### SCHEDULE F1

				EXPENDITURE			BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		r F Mittee L	EVENTIONE Event Expense Fees ood/Beverage Expense Sift/Awards/Memorials Ex Legal Services The Instruction Guid	pense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimbursement rhead/Rental Expense pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 1/3 Rpt: 4/6		Friends of Ji	m Murphy					00060451	、 
4	Date	5	Payee name							
	07/01/2024		Blakemore &	Associates						
6	Amount (\$)	7	Payee addres	s; City;	State;	; Zip Co	de			
	\$250.00		1 E Greenwa	ay Plaza Ste 225						
			Houston, TX	77046						
8	PURPOSE	(a)	Category (See	e Categories listed at the	top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Consulting E						ide of Texas. Com	
									, officeholder living	expense
							Consulting F	ees	)	
_									0.000	14
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	enolder name	Ĺ	Office sou	Int		Office he	lid
	Date		Payee name							
	08/01/2024		Blakemore &	Associates						
	Amount (\$)		Payee addres	s; City;	State:	; Zip Co	de			
	\$250.00			ay Plaza Ste 225	,	,				
	\$200100			ay 1 haza 010 220						
			Houston, TX	77046						
	PURPOSE	(a)	Category (See	e Categories listed at the	top of this sch	edule)	(b) Description			
	OF EXPENDITURE		Consulting E	xpense					ide of Texas. Com	
									, officeholder living	expense
							Consulting F	ees	)	
	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	abt		Office he	ld
	expenditure to benefit C/OI			enolder name		Jince Sou	jiit		Onice ne	
	Data	<b>—</b>	D							
	Date 09/01/2024		Payee name Blakemore &	Associates						
					<u> </u>	71.0	1-			
	Amount (\$)		Payee addres	-	State;	; Zip Co	de			
	\$250.00		I E Greenwa	ay Plaza Ste 225						
			Houston, TX	77046						
	PURPOSE OF	(a)		e Categories listed at the	top of this sch	edule)	(b) Description			
	EXPENDITURE		Consulting E	xpense					ide of Texas. Com	
									, officeholder living	expense
							Consulting F	663		
_	Complete ONLV if direct	Ļ	Candidate/Offic	oboldor name			sht		Office he	ld
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		anuluale/Offic	enouuer name	Ĺ	Office sou	JIIL		Unice ne	au

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

#### SCHEDULE F1

				EXPENDITURE			BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	e Expense	Loan Repa Office Ove Polling Exp Printing Ex Salaries/W	yment/Reimbursement rhead/Rental Expense ense pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 2/3 Rpt: 5/6		Friends of						00060451	· · · · ·
4	Date	5	Payee name	•						
	10/01/2024		Blakemore	& Associates						
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	de			
	\$250.00		1 E Greenv	vay Plaza Ste 22	5					
			Houston, T	X 77046						
8	PURPOSE	(a)	Category (S	ee Categories listed at the	e top of this sch	nedule)	(b) Description			
	OF EXPENDITURE		Consulting						de of Texas. Com	
									officeholder living	expense
							Consulting F	ees	5	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	iceholder name	C	Office sou	ght		Office he	ld
	Date		Payee name							
	11/01/2024		Blakemore	& Associates						
	Amount (\$)	-	Payee addre	ess; City;	State	; Zip Co	le			
	\$250.00			vay Plaza Ste 22!		, <u>Lip</u> 000				
	φ230.00			vay Flaza Sie ZZ	J					
			Houston, T	X 77046						
	PURPOSE OF	(a)	Category (S	ee Categories listed at the	e top of this sch	nedule)	(b) Description			
	EXPENDITURE		Consulting	Expense					de of Texas. Com	
									officeholder living	expense
							Consulting F	ees	•	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	ght		Office he	ld
	Date		Payee name							
	12/01/2024		Blakemore	& Associates						
-	Amount (\$)	$\vdash$	Payee addre	ess; City;	State	; Zip Co	de			
	\$250.00		-	vay Plaza Ste 22!		,				
	\$200.00		0.00m		-					
			Houston, T	X 77046						
	PURPOSE	(a)	Category (S	ee Categories listed at th	e top of this sch	nedule)	(b) Description			
	OF EXPENDITURE		Consulting	Expense					de of Texas. Com	
									officeholder living	expense
							Consulting F	ees	5	
	Complete ONLY if direct		Candidate/Off	iceholder name	C	Office sou	ght		Office he	ld
	expenditure to benefit C/OI	1								

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
Sch: 3/3 Rpt: 6/6	Friends of Jim Murphy 00060451
Date	5 Payee name
10/29/2024	Blakemore & Associates
Amount (\$)	7 Payee address; City; State; Zip Code
	1 E Greenway Plaza Ste 225
φ2,000.00	
	Houston, TX 77046
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Consulting Expense</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Consulting Fees</li> </ul> </li> </ul>
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment Total pages Schedule F1: Sch: 3/3 Rpt: 6/6 Date 10/29/2024 Amount (\$) \$2,000.00 PURPOSE OF EXPENDITURE