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STATE OF ARIZONA

AS A PARTICIPATING CANDIDATE

Pursuant to Arizona Revised Statutes §§16-947 and 948 and AAC R2-20-104 (D)

OFFICE USE ONLY

[X] Initial Application [ ] Amended Application

FILERID 200493091

NAME OF CANDIDATE **Rick Murphy**		OFFICE SOUGHT (include Legislative District, if applicable) **State Representative - District 9**	
ADDRESS (NUMBER & STREET) **5756 W. Mescal Street**		CITY **Glendale**	STATE **AZ**	ZIP **85304**
MAILING ADDRESS (if different from above) **P.O. Box 6793**		CITY **Glendale**	STATE **AZ**	ZIP **85312**
CANDIDATE'S TELEPHONE # **623-486-4488**	CANDIDATE'S FAX # **623-486-7688**	CANDIDATE'S E-MAIL ADDRESS **rick@rickmurphyaz.com**		
CANDIDATE'S PARTY AFFILIATION (if any) **Republican**				
NAME OF CANDIDATE'S COMMITTEE **Rick Murphy 2004**				
COMMITTEE'S ADDRESS **P.O. Box 6793**		CITY **Glendale**	STATE **AZ**	ZIP **85312**
COMMITTEE'S PHONE # **623-486-4488**	COMMITTEE'S FAX # **623-486-7688**	COMMITTEE'S E-MAIL ADDRESS **info@rickmurphyaz.com**		
NAME OF DESIGNATED INDIVIDUAL WITH AUTHORITY TO WITHDRAW FUNDS (IF APPLICABLE) *(A.R.S. §16-948)* **Rick Murphy**				
DESIGNATED INDIVIDUAL'S ADDRESS **5756 W. Mescal Street**		CITY **Glendale**	STATE **AZ**	ZIP **85304**
DESIGNATED INDIVIDUAL'S TELEPHONE # **623-486-4488**	DESIGNATED INDIVIDUAL'S FAX # **623-486-7688**	DESIGNATED INDIVIDUAL'S E-MAIL ADDRESS **rick@rickmurphyaz.com**		

LIST THE NAME OF THE FINANCIAL INSTITUTION FROM WHICH THE CANDIDATE AND THE DESIGNATED INDIVIDUAL WILL CONDUCT ALL FINANCIAL ACTIVITY FOR THE CANDIDATE'S CAMPAIGN COMMITTEE (do not list account number). *(A.R.S. §16-948(A))*.

Washington Mutual

DESIGNATED CANDIDATE'S STATEMENT (if applicable) (A.R.S. §16-948(B)): I hereby designate **RickMurphy** as my duly authorized Designated Individual, with the authority to withdraw funds and make expenditures from my campaign account on my behalf.

Date: 6-18-04

Candidate's signature: [signature]

CCEC-003-APP/CERT-08/28/01