## 05/23/2007 11:10

## Image##NOTIFICATION OF MULTICANDIDATE STATUS

( See reverse side for instructions ) This form should be filed after the Committee qualifies as a multicandidate committee. 1. (a) NAME OF COMMITTEE IN FULL ASSOCIATION OF KENTUCKY FRIED CHICKEN FRANCHISEES INC POLITICAL ACTION COMMITTEE AKFCF PAC (b) Number and Street Address P.O. Box 26366 2. FEC IDENTIFICATION NUMBER C00412098 (c) City, State and ZIP Code TYPE OF COMMITTEEcheck one) ☐ STATE PARTY Alexandria VA 22313 I certify that **one** of the following situations is correct (complete line 4 or 5): STATUS BY AFFILIATION: The committee submitted its Statement of Organization (FEC FORM 1) and simultaneously qualified as a multicandidate committee through its affiliation with: Committee Name: -FEC Identification Number: STATUS BY QUALIFICATION: 5. candidates: The committee has made contributions to the five (5) federal candidates listed below (ONLY state party committees may leave this blank.): Office Sought State/District Name Date (i) MICHELE M BACHMANN 08/16/2006 House MN 06 (ii) **BILL NELSON** 08/16/2006 Senate FL 00 (iii) ROBERT P JR CORKER Senate ΤN 00 08/16/2006 (iv) **ERIC CANTOR** VA 06/26/2006 House 07 (v) **CHARLES H TAYLOR** House NC 08/16/2006 11 Contributors: The committee received a contribution from its 51st contributor 06/14/2006 Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 06/02/2005 (d) Qualification: The committee met the above requirements on: 08/16/2006 I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete. TYPE OR PRINT NAME OF TREASURER SIGNATURE OF TREASURER DATE Electronically Filed by David E. Evans 05/23/2007 David E. Evans

For further information contact:
Federal Election Commission, Washington, DC 20463
Toll-free 800-424-9530
Local 202-694-1100

Note: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

FEC FORM 1 M