NOTIFICATION OF MULTICANDIDATE STATUS

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(See reverse side for instructions)

	This	form	should i	be filed	after the	Committee	qualifies as	a multicandidate	committee.
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1. (a	a) NAME OF CO	MMITTEE IN FULL			1						
,	Endeavo	or Action									
(b) Number and S				550 1051 1751						
	3050 K St, N Suite 400	NW			2. FEC IDENTIFICATION NUMBER C00639674						
(c	City, State and	ZIP Code				IMITTEE (check one)					
	Washington		DC	20007	STATE PARTY TOTHER						
l ce	rtify that o	ne of the following situation	ns is correct (co	mplete line 4 or 5):							
4.	STATUS BY AFFILIATION: The committee submitted its Statement of Organization (FEC FORM 1) on and simultaneously qualified as a multicandidate committee through its affiliation with:										
	Committe	ee Name: ZUFFA POLITI									
	FEC Ider	ntification Number:C00459	693		·						
5.	STATUS	BY QUALIFICATION:									
) federal cand	idates listed									
		Name		Office Sought	State/Dist	rict Date					
	(i)										
	(ii)										
	(iii)										
	(iv)										
	(v)										
	(b) Contributors: The committee received a contribution from its 51st contributor on:										
		istration: The committee In the committe	-	ered for at least 6 m	onths. FEC F	ORM 1 was					
	(d) Qua	lification: The committee	met the above i	requirements on:		·					
	-	examined this Statement and to the									
TYPE OR PRINT NAME OF TREASURER Hunter, Jeffrey, J., ,			SIGNATURE OF THE Hunter, Jeffrey, J., ,	KEASURER <i>[E</i>	lectronically Filed]	DATE 05/11/2017					
NOT	E: Submission	of false, erroneous, or incomplete in ANY CHANGE IN INF		t the person signing this Sta D BE REPORTED WITHIN		alties of 2 U.S.C. §437g.					