

Image# 27930014049

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 MAJORITY PAC		2. FEC IDENTIFICATION NUMBER C00426023
(b) Number and Street Address 551 MAIN STREET SUITE 220		
(c) City, State and ZIP Code JOHNSTOWN PA 15901		3. TYPE OF COMMITTEE (check one) <input type="checkbox"/> STATE PARTY <input checked="" type="checkbox"/> OTHER

I certify that **one** of the following situations is correct (complete 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:

Committee Name: - _____

FEC Identification Number: _____

5. STATUS BY QUALIFICATION:

(a) candidates: The committee has made contributions to the five (5) federal candidates listed below (ONLY state party committees may leave this blank.):

	Name	Office Sought	State/District	Date
(i)	CHARLES WILSON	House	TX 02	07/31/2006
(ii)	CHRISTOPHER CARNEY	House	PA 10	08/01/2006
(iii)	BRAD ELLSWORTH	House	IN 08	08/03/2006
(iv)	WILLIAM (BILL) WINTER	House	CO 06	08/03/2006
(v)	LEONARD L. BOSWELL	House	IA 03	08/03/2006

(b) Contributors: The committee received a contribution from its 51st contributor on: 07/31/2006

(c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 06/27/2006

(d) Qualification: The committee met the above requirements on: 12/31/2006

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 TREASURER ROBERT C. ONDICK	SIGNATURE OF TREASURER Electronically Filed by TREASURER ROBERT C. ONDICK	DATE 01/04/2007
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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.

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For further information contact:
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Toll-free 800-424-9530
Local 202-694-1100