

NOTIFICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions)

This form should be filed after the Committee qualifies as a multicandidate committee.

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1. (a) NAME OF COMMITTEE IN FULL PASTOR'S POLITICAL ACTION COMMITTEE (PAC)	FEDERAL ELECTION COMMISSION MAIL ROOM
(b) Number and Street Address P. O. Box 2069	2. FEC IDENTIFICATION NUMBER C00347443
(c) City, State and ZIP Code Phoenix, AZ 85001-2069	3. TYPE OF COMMITTEE (check one) <input type="checkbox"/> STATE PARTY <input checked="" type="checkbox"/> OTHER

MAY - 1 P 3: 56

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)	Matthew Martinez	US House of Rep	CA/31	2/11/00
(ii)	Lane Evans	US House of Rep	IL/17	2/11/00
(iii)	Mike Honda	US House of Rep	CA/15	3/01/00
(iv)	Joseph Crowley	US House of Rep	NY/7	4/24/00
(v)	Jim Maloney	US House of Rep	CT/5	4/26/00

(b) **Contributors:** The committee received a contribution from its 51st contributor on: 12/08/99

(c) **Registration:** The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 7/22/99

(d) **Qualification:** The committee met the above requirements on: 4/26/00

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 Dennis DeConcini, Treasurer	SIGNATURE OF TREASURER 	DATE 4/26/00
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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.

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 4-27-00
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<i>SK</i> PREPARER	5-1-00 DATE PREPARED