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Revised 1/2001

Image#,29992745996CATION 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 Newaygo County Democratic Executive Committee (b) Number and Street Address P.O. Box 146 2. FEC IDENTIFICATION NUMBER C00452854 (c) City, State and ZIP Code TYPE OF COMMITTEEcheck one) X STATE PARTY Newaygo 49337 OTHER 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) 07/01/2008 and simultaneously qualified as a multicandidate committee through its affiliation with: Committee Name: MICHIGAN DEMOCRATIC STATE CENTRAL COMMITEE FEC Identification Number: C00031054 STATUS BY QUALIFICATION: 5. (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) (ii) (iii) (iv) (v) Contributors: The committee received a contribution from its 51st contributor Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: (d) Qualification: The committee met the above requirements on: 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 DATE SIGNATURE OF TREASURER Electronically Filed by Charles Benham 07/29/2009 Charles Benham Text ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. For further information contact: Federal Election Commission, Washington, DC 20463 FEC FORM 1 M

Toll-free 800-424-9530 Local 202-694-1100

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