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(Revised 1/2001)

NOTIFICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions)

Image# 12950442135

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

1. (a) NAME OF COMMITTEE IN FULL			
GOOOH NATIONAL COMMITTEE			
(b) Number and Street Address			
181 RIO GABRIEL DR			2. FEC IDENTIFICATION NUMBER
			C00441568
(c) City, State and ZIP Code			3. TYPE OF COMMITTEE (check one)
LIBERTY HILL	ТХ	78642	STATE PARTY

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/D	istrict	Date
(i)	Wes Riddle	House	тх	25	02/07/2012
(ii)	Eric Klingemann	House	тх	31	01/07/2012
(iii)	Jane Cross	House	тх	15	01/07/2012
(iv)	Eddie Traylor	House	тх	10	01/07/2012
(v)	Richard Mack	House	тх	31	01/07/2012

(b) **Contributors:** The committee received a contribution from its 51st contributor on: <u>03/07/2008</u>.

Local 202-694-1100

- (c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: ______09/01/2007______.
- (d) Qualification: The committee met the above requirements on: _____02/07/2012

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 I Tim Cox	PRINT NAME OF TREAS	JRER	SIGNATURE OF TREASURER Tim Cox	[Electronically Filed]	DATE 02/07/2012				
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.									
		F F	or further information contact: ederal Election Commission, Washingtor	n, DC 20463	EC FORM 1M				