## **NOTIFICATION OF MULTICANDIDATE STATUS**

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(See reverse side for instructions)

This	form	should	be	filed	after	the	Committee	aualifies	as a	n multicandidate	committee

1. (a	a) NAME OF CC	DMMITTEE IN FULL			7					
	United V	Vholesale Mortgage PAC								
					_					
(b	Number and S 585 South E		2. FEC IDENTIFICATION NUMBER							
(c	) City, State and	I ZIP Code		C00779538  3. TYPE OF COMMITTEE (check one)						
	Pontiac		MI	48341	STATE PARTY  TOTHER					
l ce	rtify that <b>o</b>	<b>ne</b> of the following situation	ns is correct (co	mplete line 4 <i>or</i> 5):	I S OTTER					
4.		BY AFFILIATION: The co								
	Committe	ee Name:								
FEC Identification Number:										
5.										
	` '	ididates: The committee has we (ONLY State party comm		` '	federal cand	idates listed				
		Name		Office Sought	State/Dist	rict Date				
	(i)									
	(ii)									
	(iii)									
	(iv)									
	(v)									
	on:_									
	. ,	pistration: The committee I mitted on:	nas been registe 	ered for at least 6 m	onths. FEC FO	ORM 1 was				
	(d) Qua	alification: The committee	met the above i	requirements on:	02/18/2022	<del>.</del>				
	-	examined this Statement and to the NAME OF TREASURER	best of my knowledge SIGNATURE OF T	DE 4 01 IDED		DATE				
	bner, Corey, ,		Chubner, Corey, , ,	REAGONER [E	lectronically Filed]	02/25/2022				
NOT	E: Submissior	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.				