NOTIFICATION OF MULTICANDIDATE STATUS

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(See reverse side for instructions)

This t	orm	should	be	filed	after	the	Commi	ttee	qualifies	as a	multical	ndidate	committee.

	AME OF C	OMMITTEE IN FULL AC]									
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1	050 17th Suite 590	Street Address Street, NW	FEC IDENTIFICATION NUMBER C00541375									
. ,	ty, State ar Vashingrt	d ZIP Code on	DC	20036	3. TYPE OF COMMITTEE (check one) STATE PARTY OTHER							
l certif	y that c	one of the following situation	s is correct (co	mplete line 4 or 5):	<u> </u>							
C	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:											
C	Committee Name:											
F	FEC Identification Number:											
		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/Dis	trict	Date					
	(i)	AMERISH BERA		House	CA	07	06/20/2013					
	(ii)	ANN CALLIS		House	IL	13	09/12/2013					
	(iii)	SCOTT PETERS		House	CA	52	09/17/2013					
	(iv)	GWEN GRAHAM		House	FL	02	09/30/2013					
	(v)	KYRSTEN SINEMA		House	AZ	09	10/11/2013					
 (b) Contributors: The committee received a contribution from its 51st contributor on: 10/10/2013 (c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 02/07/2013 												
	d) Qu	alification: The committee i	met the above r	requirements on:	10/11/2013		_•					
	OR PRINT	e examined this Statement and to the	best of my knowledge SIGNATURE OF TI Brian Foucart		t and complete. lectronically Filed	DATE 10/11/2013						
NOTE:	Submissio	on of false, erroneous, or incomplete inf ANY CHANGE IN INF		t the person signing this Sta D BE REPORTED WITHIN		nalties of	2 U.S.C. §437g.					