FE1AN048.PDF

NOTIFICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions) RECEIVED This form should be filed after the Committee qualifies as a multicandidate committee. 1. (a) NAME OF COMMITTEE IN FULL 2011 OCT 21 AM 11: 17 FEC MAIL CENTER 2. FEC IDENTIFICATION NUMBER 0.BOX 4440 TYPE OF COMMITTEE (check one) 48244-0406 STATE PARTY T 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) and simultaneously qualified as a multicandidate committee through its affiliation with: Committee Name: _ FEC Identification Number: **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.): State/District Name Office Sought Date (i) (ii) (iii) ΜI (iv) (v) 6/18 Contributors: The committee received a contribution from its 51st contributor (c) Registration: The, committee has been registered for at least 6 months. FEC FORM 1 was 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 TREASU 10-19-2011

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. For further information contact: Federal Election Commission, Washington, DC 20463

Toll-free 800-424-9530

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(Revised 1/2001)

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