## **NOTIFICATION OF MULTICANDIDATE STATUS**

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(See reverse side for instructions)

|  | This | form | should | be | filed | after | the | Committee | aualifies | as a | multicandidate | committee. |
|--|------|------|--------|----|-------|-------|-----|-----------|-----------|------|----------------|------------|
|--|------|------|--------|----|-------|-------|-----|-----------|-----------|------|----------------|------------|

| 1. (a)  | NAME OF C   | OMMITTEE IN FULL  |   |   | 7                                  |              |                 |  |  |  |  |  |
|---|---|---|---|---|------------------------------------|--------------|-----------------|--|--|--|--|--|
|   |   | ng Cuts Over Total Taxat                                      |   |   |                                    |              |                 |  |  |  |  |  |
|   |   |   |   |   |                                    |              |                 |  |  |  |  |  |
| 1 (d)   | Number and<br>P.O. Box 3  | Street Address<br>303   | 2. FEC IDEN                             | ITIFICATION   | NUMBER                             |              |                 |  |  |  |  |  |
|   |   |   | C00494                                  | 898   |                                    |              |                 |  |  |  |  |  |
| (c) City, State and ZIP Code  3. TYPE OF COMMITTEE (check on STATE PARTY  |   |   |   |   |                                    |              |                 |  |  |  |  |  |
|   | Alexandria VA 22313 THER  |   |   |   |                                    |              |                 |  |  |  |  |  |
| I cert  | ify that (  | one of the following situation                                | ns is correct (co                       | mplete line 4 or 5):                                  |                                    |              |                 |  |  |  |  |  |
|   | 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:  |   |   |   |                                    |              |                 |  |  |  |  |  |
|   |   |   |   |   |                                    |              |                 |  |  |  |  |  |
| <b>5.</b>   | 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/District Date  |   |   |   |                                    |              |                 |  |  |  |  |  |
|   | (i) MITT ROMNEY Presidential 00 06/28/20  |   |   |   |                                    |              |                 |  |  |  |  |  |
|   | (ii)  | OLYMPIA J SNOWE   |   | Senate  | ME                                 | 00           | 06/28/2011      |  |  |  |  |  |
|   | (iii)   | ROBERT P JR CORKER  |   | Senate  | TN                                 | 00           | 06/28/2011      |  |  |  |  |  |
|   | (iv)  | ORRIN G HATCH   |   | Senate  | UT                                 | 00           | 06/28/2011      |  |  |  |  |  |
|   | (v)   | DEAN HELLER   | Senate                                  | NV  | 00                                 | 12/16/2011   |                 |  |  |  |  |  |
| (b) Contributors: The committee received a contribution from its 51st contributor on: 04/04/2012  |   |   |   |   |                                    |              |                 |  |  |  |  |  |
| (c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on:04/05/2011   |   |   |   |   |                                    |              |                 |  |  |  |  |  |
|   | (d) Qu  | alification: The committee                                    | met the above r                         | requirements on:                                      | 04/04/2012                         |              |                 |  |  |  |  |  |
|   | ,   |   |   | •   |                                    |              |                 |  |  |  |  |  |
|   |   | re examined this Statement and to the ΓNAME OF TREASURER      | best of my knowledge<br>SIGNATURE OF TI |   | t and complete<br>lectronically Fi |              |                 |  |  |  |  |  |
| Theodore V. Koch - Assistant Treasurer  Theodore V. Koch - Assistant Treasurer  O4/04/2012  |   |   |   |   |                                    |              |                 |  |  |  |  |  |
| NOTE  | Submission  | on of false, erroneous, or incomplete in<br>ANY CHANGE IN INF |   | t the person signing this Sta<br>D BE REPORTED WITHIN |                                    | penalties of | 2 U.S.C. §437g. |  |  |  |  |  |

For further information contact:
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Toll-free 800-424-9530
Local 202-694-1100

**FEC FORM 1M**