

# NOTIFICATION OF MULTICANDIDATE STATUS

12/09/2003 19:17

(See reverse side for instructions.)

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

1. (a) NAME OF COMMITTEE IN FULL  Mike PAC	
(b) Name and Street Address P.O. Box 65790	2. FEC IDENTIFICATION NUMBER C00383422
(c) City, State and ZIP Code Washington DC 20035	3. TYPE OF COMMITTEE (check one) <input type="checkbox"/> STATE PARTY <input checked="" type="checkbox"/> OTHER

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/District	Date
<b>(i)</b>	Chris Chocola	House	IN 2	03/19/2003
<b>(ii)</b>	Jim Gerlach	House	PA 6	03/19/2003
<b>(iii)</b>	Phil Gingrey	House	GA 11	03/19/2003
<b>(iv)</b>	Heather Wilson	House	NM 1	08/30/2003
<b>(v)</b>	Robin Hayes	House	NC 8	08/30/2003

**(b) Contributors:** The committee received a contribution from its 51st contributor on: 09/08/2003

**(c) Registration:** The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 11/18/2002

**(d) Qualification:** The committee met the above requirements on: 09/08/2003

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 Mark Valente III	SIGNATURE OF TREASURER Electronically Filed by Mark Valente III	DATE 12/08/2003
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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.