

NOTIFICATION OF MULTICANDIDATE STATUS

04/08/2005 16 : 55

(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 United Surgical Partners International, Inc. Political Action Committee		2. FEC IDENTIFICATION NUMBER C00402073
(b) Name and Street Address 15305 Dallas Parkway, Suite 1000		
(c) City, State and ZIP Code Addison TX 75001		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
(i)	Arlen Specter	Senate	PA	08/03/2004
(ii)	Blanche Lincoln	Senate	AR	08/15/2004
(iii)	Roy Blunt	House	MO 07	08/03/2004
(iv)	Tom Price	House	GA 06	10/04/2004
(v)	Randy Neugebauer	House	TX 19	08/29/2004

(b) Contributors: The committee received a contribution from its 51st contributor on: _____ 08/29/2004

(c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 06/10/2004

(d) Qualification: The committee met the above requirements on: 12/10/2004

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 John Welik	SIGNATURE OF TREASURER Electronically Filed by John Welik	DATE 04/08/2005
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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.