NOTIFICATION OF MULTICANDIDATE STATUS

09/19/2002 13:07

(See reverse side for instructions). This form should be filed after the Committee qualifies as a multicandidate committee. 1. (5) NAME OF COMMITTEE IN FULL New American Optimists (b) Number and Sheet Adones-Post Office Box 2068 2. FEC IDENTIFICATION NUMBER C00368613 (t) Cry, State and AF Code 3. TYPE OF COMMITTEE (declare) ☐ STATE PARTY NC: 27602 Releigh X OTHER Loertify 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.): Office Sought State/District Date. Name (i) (ii) (iiii) (Iv) (v) (b) Contributors: The committee received a contribution from its 51st contributor OII: 12/17/2001 (c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 08/28/2001 (d) Qualification: The committee met the above requirements on: I cartify 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 SIGNATURE OF TREASURER DATE Electronically Filed by 09/19/2002 Jeanette Hyde Jeanette Hyde Note: Submission of false, enoneous, 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 20468 FEC FORM 1 M Toll-free 800-424-9590 Revised 1/2001 Local 202-894-1100