03/25/2009 14:30

Image# 29032396517CATION OF MULTICANDIDATE STATUS

(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 American College of Rheumatology (RheumPAC) (b) Number and Street Address 1800 Century Place 2. FEC IDENTIFICATION NUMBER C00432823 Suite 250 (c) City, State and ZIP Code TYPE OF COMMITTEEcheck one) STATE PARTY Atlanta GΑ 30345-4300 X 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.): Name Office Sought State/District **Date** (i) 05/01/2008 Shelley Berkley House NV 01 (ii) Max Baucus 05/01/2008 Senate MT 00 (iii) Michael Burgess House TX 26 05/19/2008 (iv) Frank Pallone, Jr 09/12/2008 House NJ 06 (v) Anna Eshoo House CA 14 09/16/2008 (b) Contributors: The committee received a contribution from its 51st contributor 02/25/2008 Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 02/24/2007 (d) Qualification: The committee met the above requirements on: 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 DATE SIGNATURE OF TREASURER Electronically Filed by Fred Dietz 03/25/2009 Fred Dietz Text 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
Local 202-694-1100

FEC FORM 1 M
Revised 1/2001