## 04/01/2010 18:45

## Image# 100043557 CATION 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 Freedom First PAC (b) Number and Street Address PO BOX 9190 2. FEC IDENTIFICATION NUMBER C00467688 (c) City, State and ZIP Code TYPE OF COMMITTEEcheck one) STATE PARTY ST PAUL MN 55109 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) **REP ERIK PAULSEN** House MN 03 12/21/2009 (ii) REP MICHELE BACHMANN 12/21/2009 House MN 06 (iii) **REP ROY BLUNT** Senate MO 00 01/17/2010 (iv) **GOV JOHN HOEVEN** ND 03/12/2010 Senate 00 (v) SEN JOHN KYL ΑZ 00 03/12/2010 Senate (b) Contributors: The committee received a contribution from its 51st contributor 10/28/2009 Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 10/01/2009 (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 Don Stiles 04/01/2010 Don Stiles 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