Image##27000028540 NOTIFICATION 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]
MEDICAL FACILITIES OF AMERICA INC PAC	
(b) Number and Street Address	
2917 PENN FOREST BOULEVARD STE 200	2. FEC IDENTIFICATION NUMBER
PO BOX 29600	C00405472
(c) City, State and ZIP Code	3. TYPE OF COMMITTEE check one)
ROANOKE VA 24018	STATE PARTY

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)	Deborah Pryce	House	OH 15	07/12/2005
(ii)	Max Baucus	Senate	MT	07/21/2005
(iii)	Nathan Deal	House	GA 10	09/21/2005
(iv)	John Boehner	House	OH 8	05/18/2006
(v)	Philip English	House	PA 3	06/20/2006

- (b) Contributors: The committee received a contribution from its 51st contributor on: 06/24/2006
- (c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 08/26/2004
- (d) Qualification: The committee met the above requirements on: 06/24/2006

 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

 Martin Novel
 Electronically Filed by Martin Novel
 04/23/2007

 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.
 U.S.C. 437g.

	For further information contact:	
	Federal Election Commission, Washington, DC 20463 Toll-free 800-424-9530	FEC FORM 1 M
	Local 202-694-1100	Revised 1/2001