

NOTIFICATION OF MULTICANDIDATE STATUS

02/01/2006 19 : 25

(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'S DEFENSE FUND		2. FEC IDENTIFICATION NUMBER C00401786
(b) Name and Street Address 1155 - 15th Street, NW Suite 614 (c) City, State and ZIP Code WASHINGTON DC 20005		
		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)	BILL SPADEA FOR CONGRESS	House	NJ 12	06/04/2004
(ii)	FRIENDS OF DUANE SAND	House	ND 00	06/30/2004
(iii)	FEDERER FOR CONGRESS 2004	House	MD 03	06/30/2004
(iv)	WHIT FOR CONGRESS	House	NC 04	06/30/2004
(v)	COBURN FOR SENATE COMMITTEE	Senate	OK 00	06/30/2004

(b) Contributors: The committee received a contribution from its 51st contributor on: _____ 05/24/2004

(c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 06/01/2004

(d) Qualification: The committee met the above requirements on: 12/01/2004

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 SCOTT B MACKENZIE	SIGNATURE OF TREASURER Electronically Filed by SCOTT B MACKENZIE	DATE 02/01/2006
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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.