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NOTIFICATION OF MULTICANDIDATE STATUS

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(See reverse side for instructions)

This form should be filed after the Committee qualifies as a multicandidate committee

1. (a) NA	ME OF C	OMMITTEE IN FULL			1			
Progressive Action PAC								
					_			
(b) Number and Street Address P.O. Box 70980					2. FEC IDENTIFICATION NUMBER			
(c) City, State and ZIP Code					C00513176 3. TYPE OF COMMITTEE (check one)			
	ashingto		20024	STATE PARTY				
		one of the following situation	s is correct (co		OTHER			
-		•	•	•	.	/ 550	. 	
		JS BY AFFILIATION: The committee submitted its Statement of Organization (FEC FORM 1) and simultaneously qualified as a multicandidate committee through its						
	affiliation with:							
C	Committee Name:							
Ft	EC Ide	entification Number:			·			
5. S	STATUS BY QUALIFICATION:							
Γ	below (ONLY State party committees may leave this blank.): Name Office Sought State/District Date							
		Name		Office Sought	State/Dis	Strict	Date	
	(i)	Eric Griego		House	NM	01	05/31/2012	
	(ii)	David N. Cicilline		House	RI	01	10/25/2012	
	(iii)	Louise M. Slaughter		House	NY	25	10/25/2012	
	(iv)	Carol Shea-Porter		House	NH	01	10/25/2012	
	(v)	Rob Zerban		House	WI	01	10/25/2012	
(b) Co	ntributors: The committee i	received a cont	ribution from its 51st	contributor			
	on:							
(c	•	gistration: The committee h	as been registe	ered for at least 6 m	onths. FEC	FORM	1 was	
	suk	omitted on:02/17/2012	·					
(d) Qu	alification: The committee	met the above r	equirements on:	10/25/2012			
		e examined this Statement and to the				1		
TYPE O Diane Ev		NAME OF TREASURER	SIGNATURE OF TI Diane Evans	REASUREK [E	lectronically Filed			
							04/02/2013	
NOTE: S	ubmissio	on of false, erroneous, or incomplete inf ANY CHANGE IN INF		t the person signing this Sta D BE REPORTED WITHIN		nalties of	2 U.S.C. §437g.	

For further information contact:
Federal Election Commission, Washington, DC 20463
Toll-free 800-424-9530
Local 202-694-1100

FEC FORM 1M