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Image# 202206209517738721 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 WORKING FOR OHIO			
(b) Number and Street Address PO BOX 6960			2. FEC IDENTIFICATION NUMBER C00783167
(c) City, State and ZIP Code CINCINNATI	ОН	45206	3. TYPE OF COMMITTEE (check one)

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/D	istrict	Date
(i)	HAWLEY, JOSHUA DAVID SEN, , ,	Senate	MO	00	05/11/2022
(ii)	RUBIO, MARCO, , ,	Senate	FL	00	05/11/2022
(iii)	MASTERS, BLAKE, , ,	Senate	AZ	00	05/11/2022
(iv)	KENT, JOSEPH, , ,	House	WA	03	05/11/2022
(v)	MILLER, MAX, , ,	House	ОН	07	05/11/2022

(b) Contributors: The committee received a contribution from its 51st contributor on: 03/31/2022 .

Toll-free 800-424-9530 Local 202-694-1100

- (c) Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: _______.
- (d) Qualification: The committee met the above requirements on: _____05/11/2022

TYPE OR F Lisker, Lisa	PRINT NAME OF TREASU	IRER SIGNATURE OF TREASURER Lisker, Lisa, , ,	[Electronically Filed]	DATE 06/20/2022				
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.								
		For further information contact: Federal Election Commission, Washington	, DC 20463	FC FORM 1M				

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