

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 PRIME THERAPEUTICS LLC EMPLOYEE PAC (PRIMEPAC)		2. FEC IDENTIFICATION NUMBER C00498105
(b) Number and Street Address 1305 CORPORATE CENTER DR		
(c) City, State and ZIP Code EAGAN MN 55121		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)	JOHN CORNYN	Senate	TX 00	08/11/2014
(ii)	RONALD JAMES KIND	House	WI 03	02/27/2015
(iii)	BILL NELSON	Senate	FL 00	02/27/2015
(iv)	MICHELLE LUJAN GRISHAM	House	NM 01	03/26/2015
(v)	BENJAMIN E SASSE	Senate	NE 00	06/12/2015

- (b) Contributors:** The committee received a contribution from its 51st contributor on: 05/06/2016.

- (c) Registration:** The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 06/29/2011.

- (d) Qualification:** The committee met the above requirements on: 05/06/2016.

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 Aaron Rodriguez	SIGNATURE OF TREASURER Aaron Rodriguez	[Electronically Filed] DATE 06/14/2016
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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.