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Image##270003829 CATION 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 National Association of Enrolled Agents Political Action Committee (b) Number and Street Address P.O. Box 65071 2. FEC IDENTIFICATION NUMBER C00415372 (c) City, State and ZIP Code TYPE OF COMMITTEEcheck one) STATE PARTY Washington DC 20035 I certify that **one** of the following situations is correct (complete line 4 or 5): STATUS BY AFFILIATION: The committee submitted its Statement of Organization (FEC FORM 1) and simultaneously qualified as a multicandidate committee through its affiliation with: Committee Name: -FEC Identification Number: STATUS BY QUALIFICATION: 5. candidates: The committee has made contributions to the five (5) federal candidates listed below (ONLY state party committees may leave this blank.): Office Sought State/District Name Date (i) RANGEL FOR CONGRESS 09/28/2006 House NY 15 (ii) DAVE CAMP FOR CONGRESS 2006 09/28/2006 House MI 04 (iii) Earl Pomeroy For Congress House ND 00 10/11/2006 (iv) Hatch Election Committee inc UT 10/11/2006 Senate (v) People Who Support Bingaman NM 00 10/11/2006 Senate Contributors: The committee received a contribution from its 51st contributor 05/10/2006 Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 09/07/2005 (d) Qualification: The committee met the above requirements on: 10/11/2006 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 SIGNATURE OF TREASURER DATE Electronically Filed by Robert Kerr 04/24/2007 Robert Kerr

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

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.

FEC FORM 1 M