

NOTIFICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions)

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

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1. (a) NAME OF COMMITTEE IN FULL Traditional Values PAC		2. FEC IDENTIFICATION NUMBER C00636126
(b) Number and Street Address 3809 Pineland Street		3. TYPE OF COMMITTEE (check one) <input type="checkbox"/> STATE PARTY <input checked="" type="checkbox"/> OTHER
(c) City, State and ZIP Code Fairfax, VA 22031		

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)	Jim Renacci	Senate	OH	3/28/18
(ii)	Lou Barletta	Senate	PA	3/28/18
(iii)	Danny Tarkanian	Senate	NV	3/28/18
(iv)	Louie Gohmert	Congress	TX-1	3/28/18
(v)	Walter Jones	Congress	NC-3	3/28/18

- (b) **Contributors:** The committee received a contribution from its 51st contributor on: November 19, 2017

- (c) **Registration:** The committee has been registered for at least 6 months. FEC FORM1 was submitted on: March 31, 2017

- (d) **Qualification:** The committee met the above requirements on: 3/28/18

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 Wencesa Bouma	SIGNATURE OF TREASURER <i>Wencesa A. Bouma</i>	DATE 3/28/18
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. § 30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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

FEC FORM 1M
(Revised 1/2001)

1-2-3-4-5-6-7-8-9-10-11-12-13-14-15-16-17-18-19-20-21-22-23-24-25-26-27-28-29-30-31-32-33-34-35-36-37-38-39-40-41-42-43-44-45-46-47-48-49-50-51-52-53-54-55-56-57-58-59-60-61-62-63-64-65-66-67-68-69-70-71-72-73-74-75-76-77-78-79-80-81-82-83-84-85-86-87-88-89-90-91-92-93-94-95-96-97-98-99-100

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PREPARER  (3/2015)	4/13/18 DATE PREPARED

2018-04-01 10:00:00