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Image##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 **SECUREUS** (b) Number and Street Address PO Box 96 2. FEC IDENTIFICATION NUMBER C00411538 (c) City, State and ZIP Code TYPE OF COMMITTEEcheck one) ☐ STATE PARTY Torrance CA 90507 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. (a) 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 Date Name (i) Bill Mitchell 9 04/07/2006 House FL (ii) 10 04/07/2006 Chris Carney House PA (iii) Charles Brown House CA 4 04/07/2006 (iv) FL 04/07/2006 **Christine Jennings** House 13 (v) Coleen Rowley House MN 2 04/07/2006 Contributors: The committee received a contribution from its 51st contributor 09/28/2005 Registration: The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 05/11/2005 (d) Qualification: The committee met the above requirements on: 04/07/2006 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 05/19/2006 Trini Jimenez Trini Jimenez

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