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NOTIFICATION OF MULTICANDIDATE STATUS

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(See reverse side for instructions) This form should be filed after the Committee qualifies as a multicandidate committee.

N NUMBER E (check one) C FORM 1)		
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rough its		
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.):		
Date		
11/10/2008		
11/10/2008		
11/10/2008		
03/16/2009		
10/29/2009		
(b) Contributors: The committee received a contribution from its 51st contributor on: 09/22/2008		
(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:		
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		
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.		
FORM 1M		

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