| FEC<br>FORM 1   | STATEME<br>ORGANIZ            |  | RECEIVED<br>FEC MAIL CENTER<br>2008 JUL / 1 AM 9: 12<br>Office Use Only |                                 |  |  |  |  |  |  |  |  |  |
|---|-------------------------------|--|---|---------------------------------|--|--|--|--|--|--|--|--|--|
| 1. NAME OF<br>COMMITTEE (in full)                               | (Check if name<br>is changed) | Example if typing, type over the lines.  | 12FE4M5   |                                 |  |  |  |  |  |  |  |  |  |
| $M_{U_1L_1T_1I_1M_1A_1X_{1-1}I_1}$                              | NCORPORATE                    | PAC LILL   |   |                                 |  |  |  |  |  |  |  |  |  |
|   |                               | <u>┡╼┞╶┟╸</u> ╽╶╢╶╢╌┞╶╢╴┞╶┼╴   | ╘╾╹╌╉╴╽╌╹╴┚   |                                 |  |  |  |  |  |  |  |  |  |
| ADDRESS (number and street)                                     | 7799 LEES                     | BURGPIKE   |   |                                 |  |  |  |  |  |  |  |  |  |
| (Check if address   | SUNTE 700                     | N  |   |                                 |  |  |  |  |  |  |  |  |  |
| is changed)   | FALLS GHU                     | RCH  | VA  | 829431-[]                       |  |  |  |  |  |  |  |  |  |
|   |                               | CITY   | STATE   | ZIP CODE                        |  |  |  |  |  |  |  |  |  |
| COMMITTEE'S E-MAIL ADDRE<br>$[M_1S_1T_1M_1A_1R_1Y_1 C_1H_1A_1]$ |                               |  | • .   | I                               |  |  |  |  |  |  |  |  |  |
| יו מייז א נא א נאוייא דו בואיי                                  |                               |  |   |                                 |  |  |  |  |  |  |  |  |  |
|   |                               |  |   |                                 |  |  |  |  |  |  |  |  |  |
| COMMITTEE'S WEB PAGE AD   |                               |  |   |                                 |  |  |  |  |  |  |  |  |  |
| Wy HI I I I I I I   |                               | <u>1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 +</u>   |   |                                 |  |  |  |  |  |  |  |  |  |
|   | <u>iiiii</u>                  | <u>┦╷╎╶┧╶┧╶┦╶┨╴</u> ┨╶┨╶   | <u>I. I. I. I. I.</u>   |                                 |  |  |  |  |  |  |  |  |  |
| COMMITTEE'S FAX NUMBER  | 2.<br>2.                      |  |   |                                 |  |  |  |  |  |  |  |  |  |
| [9,0,3]-[6,1,0]-[4,3]   |                               |  |   |                                 |  |  |  |  |  |  |  |  |  |
| 2. DATE 0.6   | 7 2008                        |  |   |                                 |  |  |  |  |  |  |  |  |  |
| 3. FEC IDENTIFICATION N   |                               | 0393751  |   |                                 |  |  |  |  |  |  |  |  |  |
| 4. IS THIS STATEMENT  | NEW (N) <b>OR</b>             | AMENDED (A)  |   |                                 |  |  |  |  |  |  |  |  |  |
| I certify that I have examined to                               | his Statement and to the bes  | t of my knowledge and belief it  | is true, correct  | and complete.                   |  |  |  |  |  |  |  |  |  |
| Type or Print Name of Treasure                                  | Michele 7                     | - St. Mary   |   |                                 |  |  |  |  |  |  |  |  |  |
| Signature of Treasurer  | <u>M. T. St. M</u>            | my .   | Date  | 2'87'2008                       |  |  |  |  |  |  |  |  |  |
| NOTE: Submission of false, erron                                | -                             | may subject the person signing to<br>ON SHOULD BE REPORTED W   |   |                                 |  |  |  |  |  |  |  |  |  |
| Office<br>Use<br>Only<br>FE3AN042.PDF                           |                               | For further information c<br>Federal Election Commissi<br>Toll Free 800-424-9530<br>Local 202-694-1100 |   | FEC FORM 1<br>(Revised 12/2007) |  |  |  |  |  |  |  |  |  |

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FEC Form 1 (Revised 12/2007)

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5. TYPE OF COMMITTEE Candidate Committee:

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| Candidate | Commiπe |
|-----------|---------|
|           |         |

| (a)               | $\Box$             | This committee is a principal campaign committee. (Complete the candidate information below.)   |
|-------------------|--------------------|---|
| (b)               | D                  | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)   |
| Name<br>Candid    | -                  |   |
| Candid<br>Party / | date<br>Affiliatio | on Office State State State<br>Sought: [] House [] Senate [] President<br>District  |
| (c)               |                    | This committee supports/opposes only one candidate, and is NOT an authorized committee.   |
| Name<br>Candic    | -                  |   |
| Party             | Com                | imittee:  |
| (d)               | 0                  | This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Party.   |
| Politi            | cal A              | ction Committee (PAC):  |
| (e)               | $\nabla$           | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:   |
|                   |                    |   |
|                   |                    | Corporation Corporation w/o Capital Stock Labor Organization  |
|                   |                    |   |
| (f)               |                    | Corporation Corporation w/o Capital Stock Labor Organization  |
| (f)               |                    | Corporation   Corporation w/o Capital Stock   Labor Organization     Membership Organization   Trade Association   Cooperative     This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party  |
|                   | E<br>D<br>Fund     | Image: Corporation   Image: Corporation w/o Capital Stock   Image: Labor Organization     Image: Membership Organization   Image: Trade Association   Image: Cooperative     This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)  |
|                   | C<br>Fund          | Corporation   Corporation w/o Capital Stock   Labor Organization     Membership Organization   Trade Association   Cooperative     This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)   In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)   |
| Joint             | E<br>Fund          | Image: Corporation   Image: Corporation w/o Capital Stock   Image: Labor Organization     Image: Membership Organization   Image: Trade Association   Image: Cooperative     This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)   Image: Cooperative is a Leadership PAC. (Identify sponsor on line 6.)     Traising Representative:     This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political |

| 1. | Į |          |   |   | _ | ł |   |   |   |   |   |  | L |   |   |  | FEC | ; 10 | ) numl |     |
|----|---|----------|---|---|---|---|---|---|---|---|---|--|---|---|---|--|-----|------|--------|-----|
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| 3. | l |          |   |   |   |   |   | 1 |   |   |   |  | 1 |   |   |  | FEC | ; IC | numi   | ber |
| 4. | L |          |   |   |   |   |   | 1 |   |   |   |  |   |   |   |  | FEC | ID   | numt   |     |
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|---|---|
| FEC Form 1 (Revised   | 12/2007) Page 3   |
| Write or Type Committee Nam                                   |   |
| MULTIMA   | X INCORPORATED PAC  |
| 6. Name of Any Connected                                      | Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative  |
| HARRIIS COR   | PORIAITIIONI POILIITIICIAILI AICITIIONI COMMITTIEE  |
|   |   |
| Mailing Address   | 1023 MASA BOULEVARD   |
|   |   |
|   | MELBOURNE FL BRODE  |
| Relationship:   |   |
| Connected Organization  | Affiliated Committee  |
| 7. Custodian of Records: Ide books and records.               | ntify by name, address (phone number optional) and position of the person in possession of committee  |
| Full Name $M_{1,c_1}$   | HELEST. MARY  |
| Mailing Address   | 17,7,9,9, LEESBURG PIKE   |
|   | $S_{M_{I},T_{I}E_{I}} 7_{0} 0 N_{I} 1 1 1 1 1 1 1 $   |
|   | PALLS CHURCH VA BRANKS  |
| Title or Position   | CITY STATE ZIP CODE   |
| COUNSEL   |   |
| 8. Treasurer: List the name ar<br>any designated agent (e.g., | nd address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).   |
| Full Name<br>of Treasurer                                     | $\mathcal{L}_{\mathcal{H},\mathcal{E},\mathcal{L},\mathcal{L}_{\mathcal{L}}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}_{\mathcal{L}}_{\mathcal{L}_{\mathcal{L}}_{\mathcal{L}}_{\mathcal{L}}_{\mathcal{L}_{\mathcal{L}}_{\mathcal{L}}_{\mathcal{L}_{\mathcal{L}}_{\mathcal{L}}_{\mathcal{L}}_{\mathcal{L}}}}}}}}}}$ |
| Mailing Address   | 7799 LIEESBURG PIKE   |
|   | Suite 700 M   |
|   | IFA_44S_6H_4RCH IVA 22043-6   CITY STATE ZIP CODE   |
| Title or Position   |   |
|   |   |
| FE3AN042.PDF  | L_  |

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| Full Name of<br>Designated<br>Agent | MICHLE ST. MARY    |       | 1. <u>1. i 1 1., 1</u> 1., .                    |  |
|-------------------------------------|--------------------|-------|---|--|
| Mailing Address                     | 10000 LETEDURE DUR |       |   |  |
|                                     | SUITE 700N         |       |   |  |
|                                     | FAILILIS CHIURCH   | VA    | 622143-L  |  |
|                                     | CITY               | STATE | ZIP CODE  |  |
| Title or Position $AS_S_T_1$ .      | TREPhone nu        | mber  | <u>∟</u> ┛╼┠ <sub>╼┚</sub> ╾┙╼┠ <sub>╼</sub> ╶┎ |  |

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

|                 | Sun         | Tik               | 20 | ر <sub>ا</sub> ح | 7                | 1           | B        | <u>А</u> , | N'i | K        | 1  |    | I | 1        | 1 | 1        | 1        | 1   | 1  | L          | 1        | <u> </u> | 1 | ł | 1                | 1. | 1 | 1  | 1  | L  |    |  | Ц |
|-----------------|-------------|-------------------|----|------------------|------------------|-------------|----------|------------|-----|----------|----|----|---|----------|---|----------|----------|---|----|------------|----------|----------|---|---|------------------|----|---|----|----|----|----|--|---|
| Mailing Address |             | [P. 19. BOX 62227 |    |                  |                  |             |          |            |     |          |    |    | I | .1       | _ | L        | <u> </u> | I   | ப  |            |          | ⊥        |   |   |                  |    |   |    |    |    |    |  |   |
|                 |             | L                 |    |                  |                  |             |          |            |     |          |    |    |   |          | L | <u> </u> | 1        | I   | I  | <u>I I</u> |          |          |   |   |                  |    |   |    |    |    |    |  |   |
|                 |             | Ľ                 | 21 | 4 <u></u> 2      | - <sub>1</sub> A | 1, <b>N</b> | 12       | <u>0</u>   |     | _1_      | 1  |    |   | 1        | 1 | 1        | 1        |   | J  |            | P        | ΓL       | - |   | 13ଟ୍ରାହାଟୋ-ବାସାସ |    |   |    |    |    | £1 |  |   |
|                 |             |                   |    |                  |                  |             |          |            | CI  | ТΥ       |    |    |   |          |   |          |          |   |    | S          | TA       | ΓE       |   |   | ZIP CODE         |    |   |    |    |    |    |  |   |
| Name of Bank, I | Depository, | etc.              |    |                  |                  |             |          | _          |     |          |    |    |   |          |   |          |          |   |    |            |          |          |   |   |                  |    |   |    |    |    |    |  |   |
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| Mailing Address |             | L                 |    |                  | .1               |             |          |            |     | _1       |    |    |   | 1        | I | 1        | 1        | <u>ــــــــــــــــــــــــــــــــــــ</u> | L  | L          | <u> </u> | L        | 1 | L |                  |    |   | 1  | 1  |    |    |  | ┙ |
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