

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		
RHODE ISLAND BROTHERHOOD OF CORRECTIONAL OFFICERS		
(b) Number and Street Address		2. FEC IDENTIFICATION NUMBER
PO BOX 8273		C00322362
(c) City, State and ZIP Code		3. TYPE OF COMMITTEE (check one)
CRANSTON RI 02920		☐ STATE PARTY
		☒ OTHER

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)	Sheldon Whitehouse			01/01/2000
(ii)	Jack Reed			01/01/2000
(iii)	Patrick Kennedy			01/01/2005
(iv)	Brendan Doherty			01/01/2012
(v)	James Langevin			03/30/2015

(b) **Contributors:** The committee received a contribution from its 51st contributor on: 03/31/2015.

(c) **Registration:** The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 03/31/2015.

(d) **Qualification:** The committee met the above requirements on: 03/31/2015.

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
Michael Hogan	Michael Hogan [Electronically Filed]	07/09/2015

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.