PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Every Republican Is Crucial (ERICPAC) 25 E Main Street ADDRESS (number and street) Suite 200 (Check if address is changed) Richmond 23219-2109 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS melinda@creativedirect.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 03 2014 C00384701 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Melinda Fowler Allen Type or Print Name of Treasurer Melinda Fowler Allen [Electronically Filed] 10 03 2014 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. FEC FORM 1 (Revised 06/2012)

Office			For further information contact:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	i aye £
Can	ndidate	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	\times	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam		i age
Every Republic	an Is Crucial (ERICPAC)	
	Organization, Affiliated Committee, Joint Fundraising Representativ	re, or Leadership PAC Sponsor
Leadership Fund		
Mailing Address	25 E Main Street	
	Richmond VA CITY STATE	23219-2109 ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee X Joint Fundraising Represen	ntative Leadership PAC Sponsor
 Custodian of Records: Ide books and records. 	entify by name, address (phone number optional) and position of the	person in possession of committee
Melinda F Full Name	Fowler Allen	
Mailing Address	25 E Main Street	
Maining / Address	Suite 200	
	Richmond	23219-2109
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	804 - 278 - 9142
3. Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committe assistant treasurer).	ee; and the name and address of
Full Name Melinda For of Treasurer	owler Allen	
Mailing Address	25 E Main Street	
	Suite 200	
	Richmond	23219-2109
Title or Position Treasurer	CITY STATE	ZIP CODE 804 278 9142
<u> </u>	Telephone number	

1 2 7 011	m 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Tammy Babbs	
Mailing Address	25 E Main Street	
ag / .ua. eee	Suite 200	
	Richmond VA 23	219-2109
	CITY STATE	ZIP CODE
Title or Position Assistant Treas	surer 804 Telephone number	- 278 - 9142
		holds accounts routs
Banks or Other safety deposit be	r Depositories: List all banks or other depositories in which the committee deposits funds, loxes or maintains funds.	, noius accounts, rents
Banks or Other safety deposit be Name of Bank,	oxes or maintains funds.	, floids accounts, ferits
safety deposit be	oxes or maintains funds.	, nous accounts, rents
safety deposit be	Depository, etc. Suntrust Bank 1919 E Main Street	, nous accounts, rents
safety deposit be Name of Bank,	Depository, etc. Suntrust Bank 1919 E Main Street	, nous accounts, rents
safety deposit be Name of Bank,	Depository, etc. Suntrust Bank 919 E Main Street	219-4625
safety deposit be Name of Bank,	Depository, etc. Suntrust Bank 919 E Main Street	
safety deposit be Name of Bank,	Depository, etc. Suntrust Bank 919 E Main Street Richmond VA 23 CITY STATE	219-4625
safety deposit be Name of Bank, Mailing Address	Depository, etc. Suntrust Bank 919 E Main Street Richmond VA 23 CITY STATE	219-4625
safety deposit be Name of Bank, Mailing Address Name of Bank,	Depository, etc. Suntrust Bank 919 E Main Street Richmond CITY STATE Depository, etc. United Bank 4501 Daly Drive	219-4625
safety deposit be Name of Bank, Mailing Address	Depository, etc. Suntrust Bank 919 E Main Street Richmond CITY STATE Depository, etc. United Bank 4501 Daly Drive	219-4625
safety deposit be Name of Bank, Mailing Address Name of Bank,	Depository, etc. Suntrust Bank 919 E Main Street Richmond CITY STATE Depository, etc. United Bank 4501 Daly Drive	219-4625

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011) Page 5 List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ADDITIONAL] Name of Bank, Depository, etc. _l Wells Fargo Bank 801 E Main Street Mailing Address 23219-2901 Richmond CITY 🗖 ZIP CODE 🛕 STATE **△** [ADDITIONAL] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Eric Cantor 6004 Oxbury Court Mailing Address Glen Allen 23059-5455 **CITY** STATE 4 ZIP CODE Relationship: Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Connected Organization [ADDITIONAL] **Designated Agent** Full Name Mailing Address Title or Position CITY # **STATE** ZIP CODE Telephone number [ADDITIONAL] Joint Fundraiser Participant С FEC ID number