Image# 1193173566	3
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1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typying, type over the lines 12FE4M5 Every Republican Is Crucial (ERICPAC) Every Republican Is Crucial (ERICPAC) 12FE4M5 ADDRESS (number and street) 25 E Main Street 12FE4M5 (Check if address is changed) Suite 200 12FE4M5 Richmond VA 23219 CITY ▲ STATE ▲ ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) melinda@creativedirect.net (Check if address is changed) melinda@creativedirect.net 12FE4M5	
ADDRESS (number and street) (Check if address is changed) (Check if address (Check if address) (Check if address (Check if address) (Check if address (Check if address) (Check if address (Check if address) (Check if a	
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ADDRESS (number and street) (Check if address is changed) Richmond CITY STATE CITY STATE	
(Check if address is changed) Suite 200 Richmond VA 23219 CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) melinda@creativedirect.net (Check if address is changed) melinda@creativedirect.net	
is changed) Richmond CITY _ STATE _ ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) (Check if address is changed) melinda@creativedirect.net	1
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) (Check if address is changed) melinda@creativedirect.net	2109
(Check if address is changed)	
(Check if address is changed)	
is changed)	1
COMMITTEE'S WEB PAGE ADDRESS (URL)	
	1
is changed)	
 DATE M M / D D / Y Y Y Y 2 4 / 2 0 1 1 FEC IDENTIFICATION NUMBER C C00384701 	
4. IS THIS STATEMENT NEW (N) OR X 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 Type or Print Name of Treasurer Melinda Fowler Allen	
Type or Print Name of Treasurer Melinda Fowler Allen	
Signature of Treasurer Electronically Filed by Melinda Fowler Allen Date Date	^Y 2011
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437 ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS	ġ.

Office Use Only				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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5.	TYPE C	OF CC	MMITTEE (Check One)	
	Candid	ate C	ommittee:	
	(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. (Complete th information below.)	e candidate
	Name o Candida	-		
	Candida Party Al		on Office Sought: House Senate President	State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name o	of		
	Candida	ate		
	Party C	omm	ittee:	
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Politica	I Acti	on Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
	1		Corporation Corporation w/o Capital Stock	oor Organization
			Membership Organization Trade Association Co	operative
			In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	х	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	fund or party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			X In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
,	Joint Fu	ndrai	sing Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
		Comr	nittees Participating in Joint Fundraiser	
				· · · · ·

1.		FEC ID number	C
2.		FEC ID number	C
3.	[FEC ID number	C
4.		FEC ID number	C

ERICPAC) ion, Affiliated Committee, Joint Fundrai ittee 2011 228 S Washington Street Suite 115	sing Representative, or Lead	ership PAC Sponsor
ion, Affiliated Committee, Joint Fundrai ittee 2011 228 S Washington Street	sing Representative, or Lead	ership PAC Sponsor
ittee 2011 228 S Washington Street	sing Representative, or Lead	ership PAC Sponsor
228 S Washington Street		
Suite 115		
Alexandria		22314 _ 5404
CITY	STATE 🛦	ZIP CODE
Affiliated Committee X Joint F	undraising Representative	Leadership PAC Sponsor
	optional), and position of th	ne person in
25 E Main Street		
Suite 200		
Richmond	VA	23219 _ 2109
	STATE	
	Affiliated Committee X Joint Fu y name, address, (phone number and records. er Allen 25 E Main Street Suite 200	Affiliated Committee X Joint Fundraising Representative y name, address, (phone number optional), and position of th and records. er Allen 25 E Main Street Suite 200

Full Name of Treasurer	elinda Fowler Allen		
Mailing Address	25 E Main Street		
	Suite 200		
	Richmond	VA	23219 _ 2109
Title or Position ♥	CITY A	STATE	
Treas	surer	Telephone number	2789142

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Full Name of Designated Agent	Tammy Babbs		
Mailing Address	25 E Main Street		
	Suite 200		
	Richmond	VA	23219 – 2109
Title or Position ▼	CITY A	STATE 🛦	
Assista	ant Treasurer Tele	phone number	
Banks or Other Deposit safety deposit boxes or m Name of Bank, Depositor	naintains funds.	committee deposits funds, ho	olds accounts, rents
safety deposit boxes or m Name of Bank, Depositor	naintains funds.	committee deposits funds, ho	olds accounts, rents
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safety deposit boxes or m Name of Bank, Depositor	naintains funds. ry, etc. untrust Bank	committee deposits funds, ho	olds accounts, rents
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safety deposit boxes or m Name of Bank, Depositor Mailing Address	naintains funds. ry, etc. untrust Bank 1601 Willow Lawn Drive Richmond CITY A	· · · · · · · · · · · · · · · · · · ·	
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safety deposit boxes or m Name of Bank, Depositor Mailing Address Name of Bank, Depositor	naintains funds. ry, etc. 1601 Willow Lawn Drive 1601 Willow Lawn Drive Richmond CITY A ry, etc.	· · · · · · · · · · · · · · · · · · ·	
safety deposit boxes or m Name of Bank, Depositor Mailing Address Name of Bank, Depositor	naintains funds. ry, etc. 1601 Willow Lawn Drive 1601 Willow Lawn Drive Richmond CITY A ry, etc.	· · · · · · · · · · · · · · · · · · ·	

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.			[ADDITIONAL]
BB&T			
Mailing Address	1909 K Street NW		
	Washington	DC	20006
	CITY 🔺		ZIP CODE
Name of Any Connected Orga	nization, Affiliated Committee, Joint Fundraising Repre	esentative, or Leade	ADDITIONAL ership PAC Sponsor
Eric Cantor			
Mailing Address	6004 Oxbury Court		
	Gien Allen		23059 5455
Relationship:	CITY	STATE 🛦	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundraising Repre	esentative X Lea	adership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE	
	Telephon	e number	
Joint Fundraiser Participant			[ADDITIONAL]
1	FEC	D number	

Title or Position ¥

Joint Fundraiser Participant

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Banks or Other Depositorie safety deposit boxes or mainta		•	
Name of Bank, Depository, etc			[ADDITIONAL]
Mailing Address			
		STATE 2	ZIP CODE 🔺
Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Rep	presentative, or Leader	[ADDITIONAL ship PAC Sponsor
Cantor Victory Fund			
Mailing Address	25 E Main Street		
	Richmond		23219
elationship:	СІТҮ	STATE 🛦	ZIP CODE
Connected Organization	Affiliated Committee X Joint Fundraising Rep	presentative Lea	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
			_

STATE

С

Telephone number

FEC ID number

ZIP CODE 🛦

[ADDITIONAL]

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Banks or Other Depositories: safety deposit boxes or maintain Name of Bank, Depository, etc.	· · · · · · · · · · · · · · · · · · ·	e deposits funds, h	olds accounts, rents
Mailing Address	· · · · · · · · · · · · · · · · · · ·		
Maining Address			
	CITY 🔺	STATE	ZIP CODE
Name of Any Connected Orga	anization, Affiliated Committee, Joint Fundraising Repre	sentative, or Leac	[ADDITIONAL] lership PAC Sponsor
Cantor Young Guns Vict	oryFund		
Mailing Address	25 E Main Street		
	Richmond		23219 2109
	CITY	STATE 🛦	ZIP CODE
Relationship:			

esignated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE	
	T(elephone number	
int Fundraiser Participant			[ADDITIONAL]
		FEC ID number	

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