**FEC** 

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Maddux for Congress 4514 Stuart Ave. ADDRESS (number and street) (Check if address is changed) Richmond 23226 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS madduxforcongress@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2015 C00574996 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. Marsh Merriman Type or Print Name of Treasurer Marsh Merriman [Electronically Filed] 04 2015 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. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

FE	C Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	
Candi		e 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. (Cominformation below.)	plete the candidate
Name of Candida		Robert Maddux	
Candida	ate	Office	State
Party A	Affiliatio	on DEM Sought: X House Senate President	District 07
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candida			
Party	Con	nmittee:	
(d)		(National, State	(Democratic, Republican, etc.) Party.
Politic	cal A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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.)	
Joint F	Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name		<u>_</u>
Maddux for Cor	gress	
	rganization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
NONE		
Mailing Address		
Mailing / Nacioss		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Le	eadership PAC Sponsor
Custodian of Records: Iden books and records.	ify by name, address (phone number optional) and position of the person in po	ssession of committee
Lawrence I	H Framme	
Mailing Address	6800 Paragon Place	
aming /taaress	Suite 233	
	Richmond VA 23230	
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	
Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the nassistant treasurer).	ame and address of
Full Name Marsh Meri of Treasurer	iman	
Mailing Address	2318 Park Ave	
	Richmond VA 23220	
Title or Position Treasurer	CITY STATE  Telephone number	ZIP CODE

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Full Name of Designated				
Agent				
Mailing Address				
			1	1
		CITY	STATE	ZIP CODE
Title or Position		1	1	
		Telephone nu	ımber	
Banks or Other	Depositorie	s: List all banks or other depositories in which the commi	ittee deposits fi	funds, holds accounts, rents
		•		
safety deposit bo	oxes or main	ains funds.		
Name of Bank,	oxes or main	ains funds.		
-	oxes or main	ains funds.		
Name of Bank,	oxes or main Depository, e	ains funds.		
Name of Bank,	oxes or main Depository, e	ains funds.		
	oxes or main Depository, e	ains funds. c.  5707 Patterson Ave		.23226
Name of Bank,	oxes or main Depository, e	ains funds.	VA	23226
Name of Bank,	oxes or main Depository, e	ains funds. c.  5707 Patterson Ave	VA	23226 ZIP CODE
Name of Bank, Mailing Address	oxes or main	ains funds. c.  5707 Patterson Ave  Richmond  CITY		
Name of Bank, Mailing Address	Depository, e	ains funds. c.  5707 Patterson Ave  Richmond  CITY	STATE	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, e	ains funds. c.  5707 Patterson Ave  Richmond  CITY	STATE	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, e	ains funds. c.  5707 Patterson Ave  Richmond  CITY	STATE	ZIP CODE
Name of Bank,	Depository, e	ains funds. c.  5707 Patterson Ave  Richmond  CITY	STATE	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, e	ains funds. c.  5707 Patterson Ave  Richmond  CITY	STATE	ZIP CODE