

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

SunTrust Bank Good Government Group - Mid-Atlantic

ADDRESS (Number and street)

919 East Main Street

(Check if address is changed)

Richmond

VA

23219

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

sherry.wright@suntrust.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

0-

2. DATE 03 / 08 / 2004

3. FEC IDENTIFICATION NUMBER C C00214965

4. 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

Type or Print Name of Treasurer Brenda L. Skidmore

Signature of Treasurer Electronically Filed by Brenda L. Skidmore Date 03 / 08 / 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only				
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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-894-1100

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (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 the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a _____ (National, State (or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Suntrust Bank Good Government Group-Georgia _____

Mailing Address _____ PO Box 4655 _____

Atlanta _____ GA _____ 30302 - _____

CITY A STATE A ZIP CODE A

Relationship _____

Type of Connected Organization:

- Corporation
- Membership Organization
- Corporation w/o Capital Stock
- Trade Association
- Labor Organization
- Cooperative

Write or Type Committee Name

SunTrust Bank Good Government Group - Mid-Atlantic

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name _____

Mailing Address _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 0 - -

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **Brenda L. Skidmore**

Mailing Address _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 0 - -

Full Name of Designated Agent **Sherry Wright**

Mailing Address **919 East Main Street**

Richmond CITY ▲ **VA** STATE ▲ **23219** ZIP CODE ▲ -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

PAC Administrator Telephone number **804** - **782** - **7008**

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.

SunTrust Bank

Mailing Address

919 East Main Street

Richmond

VA

23219 -

CITY Δ

STATE Δ

ZIP CODE Δ

We need to change the name of our PAC in order to reflect uniformity throughout the SunTrust Corporation.