



Filing ID #10067531

# FINANCIAL DISCLOSURE REPORT

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## FILER INFORMATION

**Name:** Hon. Eric A. "Rick" Crawford  
**Status:** Member  
**State/District:** AR01

## FILING INFORMATION

**Filing Type:** Annual Report  
**Filing Year:** 2024  
**Filing Date:** 05/06/2025

## SCHEDULE A: ASSETS AND "UNEARNED" INCOME

None disclosed.

## SCHEDULE B: TRANSACTIONS

None disclosed.

## SCHEDULE C: EARNED INCOME

Source	Type	Amount
Empower Healthcare	Spouse salary	N/A

## SCHEDULE D: LIABILITIES

None disclosed.

## SCHEDULE E: POSITIONS

None disclosed.

## SCHEDULE F: AGREEMENTS

None disclosed.

## SCHEDULE G: GIFTS

None disclosed.

## **SCHEDULE H: TRAVEL PAYMENTS AND REIMBURSEMENTS**

None disclosed.

## **SCHEDULE I: PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA**

None disclosed.

## **EXCLUSIONS OF SPOUSE, DEPENDENT, OR TRUST INFORMATION**

**IPO:** Did you purchase any shares that were allocated as a part of an Initial Public Offering?

☐ Yes ☒ No

**Trusts:** Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

☐ Yes ☒ No

**Exemption:** Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?

☐ Yes ☒ No

## **CERTIFICATION AND SIGNATURE**

☒ I CERTIFY that the statements I have made on the attached Financial Disclosure Report are true, complete, and correct to the best of my knowledge and belief.

**Digitally Signed:** Hon. Eric A. "Rick" Crawford , 05/06/2025