FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE
13 JUN 28 PM 1:30
Office Use Only

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

GABRIEL GOMEZ FOR SENATE

ADDRESS (number and street) ☐ ◀ (Check if address is changed)

C/O RED CURVE SOLUTIONS
138 CONANT STREET

BEVERLY (CITY ▲) MA (STATE ▲) 01915 - (ZIP CODE ▲)

COMMITTEE'S E-MAIL ADDRESS

☐ ◀ (Check if address is changed)

GOMEZ@REDCURVE.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ ◀ (Check if address is changed)

2. DATE MM 05 / DD 01 / YYYY 2013

3. FEC IDENTIFICATION NUMBER ▶ C C00541540

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 BRADLEY T CRATE

Signature of Treasurer *BRADLEY T CRATE* Date MM 06 / DD 25 / YYYY 2013

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 Use Only				

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

FEC FORM 1
(Revised 06/2012)

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5. TYPE OF COMMITTEE

Candidate 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. (Complete the candidate information below.)

Name of Candidate: GABRIEL GOMEZ

Candidate Party Affiliation: ☐ Office Sought: ☐ House ☒ Senate ☐ President State: MA District: 00

(c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate:

Party Committee:

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

Political Action Committee (PAC):

(e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party committee. (i.e., nonconnected committee)

☐ In addition, this committee is a Lobbyist/Registrant PAC.

☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

(g) ☒ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. GOMEZ VICTORY 2013 FEC ID number C C00544536
2. GABRIEL GOMEZ VICTORY FUND 2013 FEC ID number C C00544585
3. FEC ID number C
4. FEC ID number C

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Write or Type Committee Name

GABRIEL GOMEZ FOR SENATE

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

NONE

Mailing Address

CITY STATE ZIP CODE

Relationship: ☐ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

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: BRADLEY T CRATE

Mailing Address: 138 CONANT ST
1ST FLOOR
BEVERLY MA 01915

CITY STATE ZIP CODE

Title or Position: TREASURER

Telephone number: 617 - 848 - 8887

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: BRADLEY T CRATE

Mailing Address: 138 CONANT ST
1ST FLOOR
BEVERLY MA 01915

CITY STATE ZIP CODE

Title or Position: TREASURER

Telephone number: 617 - 848 - 8887

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Full Name of Designated Agent

Mailing Address

CITY STATE ZIP CODE

Title or Position

Telephone number

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.

CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

MCLEAN VA 22101

CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY STATE ZIP CODE

13020270373

1302027037 4

U. S. SENATE
TRACKING NUMBER
13-030899

Extremely Urgent

FedEx Express

RT 702
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8322
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6/25/13 5:04 PM

From: (617) 848-8887
Bradley T. Crate
Red Curve Solutions
138 Conant Street

Beverly, MA 01915

Origin ID: MXGA

FedEx Express

J1311130212032 6

Ship Date: 25JUN13
ActWgt: 0.5 LB
CAD: 2710479/INET3370

Delivery Address Bar Code

Ref # Sullivan
Invoice #
PO #
Dept #

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JUN 26 2013

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SHIP TO: (202) 224-0322 BILL SENDER

Senate Office of Public Records
Senate Office of Public Records
232 HART SENATE OFFICE BUILDING

WASHINGTON, DC 20510

WED - 26 JUN 10:30A
PRIORITY OVERNIGHT

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20510
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DCA

EP YKNA

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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Postmark

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Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	6-26-13	☐
UPS		☐
DHL		☐
AIRBORNE EXPRESS		☐

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Date of Receipt

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FAX _____
Date of Receipt

OTHER _____
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PREPARER DH DATE PREPARED 6-28-13

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