

FEC FORM 1

STATEMENT OF ORGANIZATION

PAGE 1/4 RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

15 JUL 16 PM 2:03

Office Use Only

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

TODD WILCOX FOR US SENATE

ADDRESS (number and street) PO BOX 616308 (Check if address is changed) ORLANDO FL 32861 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS toddwilcox@redcurve.com (Check if address is changed) Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL) www.toddwilcox2016.com (Check if address is changed)

2. DATE 07 / 10 / 2015

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT X 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 (handwritten signature) Date 07 / 10 / 2015

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 08/2012)

201507160200198717

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 Todd Wilcox

Candidate Party Affiliation REP Office Sought: House Senate President State FL 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. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

201507160200196718

Write or Type Committee Name

TODD WILCOX FOR US 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 500 Cummings Center

Beverly MA 01915

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 617 303 6800

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 500 Cummings Center

Beverly MA 01915

Title or Position Treasurer Telephone number 617 303 6800

201507160200198719

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for 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

[Grid for Chain Bridge Bank Name]

Mailing Address

1445-A Laughlin Ave
[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

McLean VA 22101
[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

201507160200198720

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7/10/2015

FedEx Ship Manager - Print Your Label(s)

From: (617) 848-8887
Charles Gantt
Red Curve Solutions
500 Cummings Center
Suite 4400
Beverly, MA 01915

Origin ID: MXGA

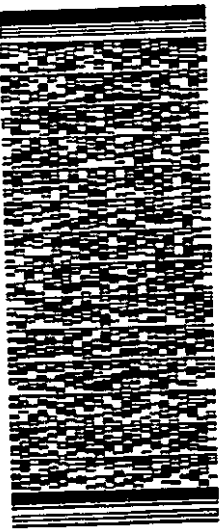


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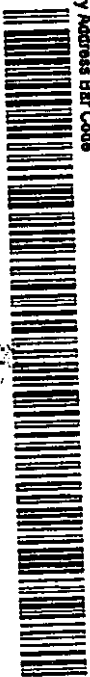
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Senate Office of Public Records
Senate Office of Public Records
232 HART SENATE OFFICE BUILDING
WASHINGTON, DC 20510



Ship Date: 10 JUL 15
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Senate Post Office

JUL 14 2015

MON - 13 JUL 10:30A
PRIORITY OVERNIGHT

TRK# 7740 2910 5303

0201

20510

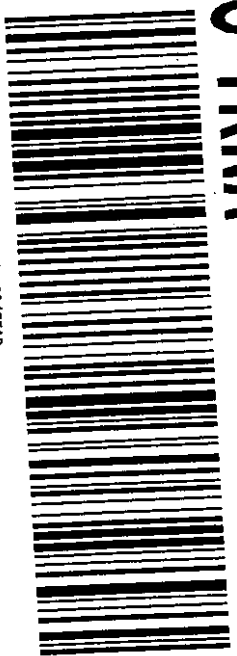
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TUE - 14 JUL 10:30A
PRIORITY OVERNIGHT

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	7/14/15	<input checked="" type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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Date of Receipt

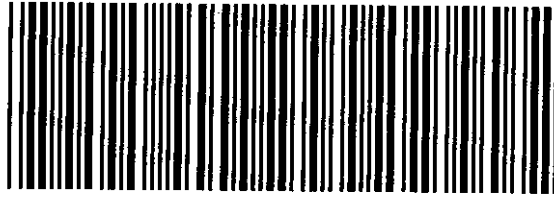
POSTMARK ILLEGIBLE POSTMARK

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Date of Receipt

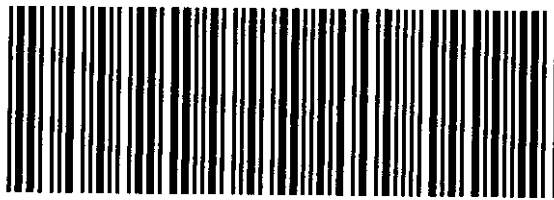
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 7-16-15

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