PAGE 1/9

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. PERDUE FOR SENATE PO BOX 12077 ADDRESS (number and street) (Check if address is changed) ATLANTA 30355-2077 GA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PERDUE@REDCURVE.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.perduesenate.com (Check if address is changed) DATE 2019 C00547570 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. CRATE, BRADLEY, T, MR., Type or Print Name of Treasurer CRATE, BRADLEY, T, MR., [Electronically Filed] 80 2019 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

_			- 0
		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • 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. (Corinformation below.)	nplete the candidate
Name Candi		PERDUE, DAVID, , MR.,	1
Candi Party	idate Affiliati	on REP Office Sought: House X Senate President	State GA District 00
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Part	y Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Polit	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s committee. (i.e., nonconnected committee)	egregated 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	Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

	22/222	
FEC Form 1 (Revised (		Page 3
•		
PERDUE FOR		
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or L	_eadership PAC Sponsor
PERDUE VICTORY IN	1C	
Mailing Address	PO BOX 12077	
, and the second	ATLANTA GA 3 CITY STATE	30355 ZIP CODE
Relationship: Connected	d Organization Affiliated Committee X Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the perso	n in possession of committee
Full Name  CRATE, B  Mailing Address	BRADLEY, T, MR.,  C/O RED CURVE SOLUTIONS	
	138 CONANT STREET, 2ND FLOOR	
	BEVERLY	01915
Title or Position	CITY STATE	ZIP CODE
TREASURER	Telephone number	303 6800
3. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	I the name and address of
Full Name CRATE, B	RADLEY, T, MR.,	
Mailing Address	C/O RED CURVE SOLUTIONS	
	138 CONANT STREET, 2ND FLOOR	
	BEVERLY	01915
Title or Position	CITY STATE	ZIP CODE
TREASURER	617 Telephone number	

FEC Form	<b>n 1</b> (Revised 02/2009)	Page <b>4</b>
Full Name of Designated		
Agent Mailing Address		
Mailing Address		
	CITY STATE ZII	P CODE
Title or Position		1 1
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds, holds a oxes or maintains funds.  Depository, etc.	
safety deposit be	oxes or maintains funds.	
safety deposit be Name of Bank,	Depository, etc.  CHAIN BRIDGE BANK, N.A.  1445-A LAUGHLIN AVE  MCLEAN  VA 22101	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  CHAIN BRIDGE BANK, N.A.  1445-A LAUGHLIN AVE  MCLEAN  CITY  STATE  ZI	IP CODE
safety deposit be Name of Bank,	Depository, etc.  CHAIN BRIDGE BANK, N.A.  1445-A LAUGHLIN AVE  MCLEAN  CITY  STATE  ZI	IP CODE
safety deposit be Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  CHAIN BRIDGE BANK, N.A.  1445-A LAUGHLIN AVE  MCLEAN  CITY  STATE  ZI  Depository, etc.	IP CODE

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
TEAM PERDUE	l Organization, Affiliated Committee, Joint Fu	ndraising Hepresentative	e, or Leadership PAC Spons
Mailing Address	C/O RED CURVE SOLUTIONS		
<b>3</b>	138 CONANT STREET, 2ND FLOOR		
	BEVERLY	MA	01915
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identi	fy by name, address (phone number – optional)		
Pesignated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE  Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or market	CITY A	Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	CITY A  CITY A  Dries: List all banks or other depositories in whi aintains funds.  COF NORTH GEORGIA	Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite afety deposit boxes or make the same of Bank, Depository, etc.	CITY A  CITY A  Dries: List all banks or other depositories in whi aintains funds.  COF NORTH GEORGIA	Telephone Number	

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g) d	or(h). <b>Joint Fundraisin</b> g	y Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	С
	4		FEC ID number	C
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundrais	sing Representativ	e, or Leadership PAC Sponsor
	Mailing Address	228 S WASHINGTON STREET SUITE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint Fu	ındraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
	Mailing Address			
		CITY ▲	STATE A	ZIP CODE ▲
	TITLE OR POSITION	<b>*</b>	1	3322 _
		Telep	phone Number	
9.	Ranks or Other Denositor	ies: List all banks or other depositories in which the	e committee denosit	o friends holds assessments results
	safety deposit boxes or mai		o domininado doposi.	s runds, noids accounts, rents
	safety deposit boxes or mai			s runds, noids accounts, rents
	safety deposit boxes or mai			s runds, noids accounts, rents
	Name of Bank, Depository, etc.			s lunds, noids accounts, rents
	Name of Bank, Depository, etc.			s lunds, noids accounts, rents

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

			FEC II	O number	С
			FEC II	O number	С
			FEC II	O number	С
			FEC II	O number	С
Any Connected (	Organization, Affil	liated Committee. Joint	Fundraising Re	oresentativ	e. or Leadership PAC Spons
=	_				
ng Address	PO BOX 3986				
	WASHINGTON			DC	20027
tionship:		CITY ▲		STATE A	ZIP CODE ▲
d Agent: Identify	by name, address	s (phone number – option	nal)		
ame	by name, address	s (phone number – option	nal)		
	by name, address	s (phone number – option	nal)		
ame	by name, address	s (phone number – option	nal)		
ame	by name, address			STATE A	ZIP CODE A
ame		city A		STATE A	ZIP CODE A
r	IYN-PERDU	ng Address  PO BOX 3986  WASHINGTON	PO BOX 3986  WASHINGTON  CITY   CITY	Any Connected Organization, Affiliated Committee, Joint Fundraising Reply NYN-PERDUE VICTORY FUND  PO BOX 3986  WASHINGTON  CITY   CITY	PO BOX 3986  WASHINGTON  CITY  STATE   STATE

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:		
	1		FEC ID number	C
2	2		FEC ID number	C
;	3		FEC ID number	C
4	4		FEC ID number	C
		Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
_				
		PO BOX 60148		
	Mailing Address			
		WASHINGTON	DC DC	20039
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ignated Agent: Identify	by name, address (phone number – optional)		
		by name, address (phone number — optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name		STATE A	ZIP CODE A
	Full Name	CITY A	STATE A	ZIP CODE A
9. <b>Ban</b> safe Nam	Full Name	CITY   CITY   Tele  es: List all banks or other depositories in which th	phone Number	
9. <b>Ban</b> safe Nam	Full Name  Mailing Address  TITLE OR POSITION  ks or Other Depositority deposit boxes or main the of Bank, ository, etc.	CITY   CITY   Tele  es: List all banks or other depositories in which th	phone Number	
9. <b>Ban</b> safe Nam	Full Name  Mailing Address  TITLE OR POSITION  ks or Other Depositori ty deposit boxes or main	CITY   CITY   Tele  es: List all banks or other depositories in which th	phone Number	
9. <b>Ban</b> safe Nam	Full Name  Mailing Address  TITLE OR POSITION  ks or Other Depositority deposit boxes or main the of Bank, ository, etc.	CITY   CITY   Tele  es: List all banks or other depositories in which th	phone Number	

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	
	2.		FEC ID number	
	3.		FEC ID number	
	4.		FEC ID number	
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative, o	or Leadership PAC Sponsor
	JAMES-PERDUE	VICTORY FUND		
	Mailing Address	PO BOX 60148		
		WASHINGTON	500	20039
			DC DC	
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representative	e Leadership PAC Sponsor
8.		by name, address (phone number - optional)		ı
8.	Pull Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		
8.	Full Name	CITY A	STATE A	
	Full Name   _   _   _    Mailing Address  TITLE OR POSITION	CITY A  Cies: List all banks or other depositories in which	STATE A	ZIP CODE ▲
	Full Name	CITY   CITY   Tes: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE ▲
9.	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mathematical parts of Bank,	CITY   CITY   Tes: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits fu	ZIP CODE ▲
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mathematical mathematical deposition of Bank, Depository, etc.	CITY   CITY   Tes: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits fu	ZIP CODE ▲
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mathematical mathematical deposition of Bank, Depository, etc.	CITY   CITY   Tes: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits fu	ZIP CODE ▲