

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED PAGE 1 / 4
SECRETARY OF THE SENATE
PUBLIC RECORDS

2018 FEB 14 AM 11:50

Office Use Only

1. NAME OF
COMMITTEE (in full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

JOHN KINGSTON FOR SENATE, INC.

ADDRESS (number and street)

331 MONTVALE AVE

☒

(Check if address
is changed)

WOBURN

CITY ▲

MA

STATE ▲

01801

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐

(Check if address
is changed)

KINGSTON@REDCURVE.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address
is changed)

WWW.JOHNKINGSTON.COM

2. DATE

02 / 01 / 2018

3. FEC IDENTIFICATION NUMBER ►

C

C00650820

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 CRATE, BRADLEY, T., MR.,

Signature of Treasurer

CRATE, BRADLEY, T., MR.,

Bradley T. Crate

Date

02 / 01 / 2018

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)

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

KINGSTON, JOHN, , MR.,

Candidate Party Affiliation

REP

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.	<input type="text"/>	FEC ID number	<input type="text"/>
2.	<input type="text"/>	FEC ID number	<input type="text"/>
3.	<input type="text"/>	FEC ID number	<input type="text"/>
4.	<input type="text"/>	FEC ID number	<input type="text"/>

Write or Type Committee Name

JOHN KINGSTON FOR SENATE, INC.**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 CRATE, BRADLEY, T., MR.,

Mailing Address P.O. BOX 1021

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 CRATE, BRADLEY, T., MR.,

Mailing Address P.O. BOX 1021

BEVERLY

MA

01915

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 617 - 303 - 6800

Full Name of
Designated
Agent

Mailing Address

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 AVENUE

MCLEAN

VA

22101

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

FIRST VIRGINIA COMMUNITY BANK

Mailing Address

11325 RANDOM HILLS RD

FAIRFAX

VA

22030

CITY

STATE

ZIP CODE



United States Senate
Post Office

ORIGIN ID:MXGA (617) 303-6800
JOHN KINGSTON FOR SENATE
C/O RED CURVE SOLUTIONS
138 CONANT STREET
2ND FLOOR
BEVERLY, MA 01915
UNITED STATES US

SHIP DATE: 08FEB18
ACTWGT: 0.10 LB
CAD: 105653717/NET3980

BILL SENDER

TO SENATE OFFICE OF PUBLIC RECORDS

232 HART SENATE OFFICE BUILDING

WASHINGTON DC 20510

(202) 224-0758

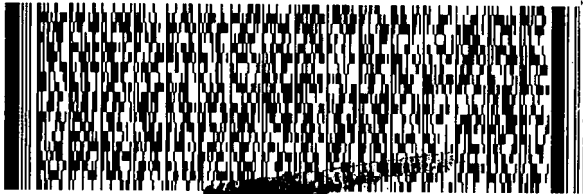
REF:

INV:

PO:

DEPT:

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FedEx
Express



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TRK#

0201

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FEB 12 2018

Senate Post

TUE - 13 FEB 4:30P

EXPRESS SAVER

SK YKNA

20510

DC-US IAD



Extremely Urgent

Post Office

RT 729
FZ
2-2018
16:30
7433
02:12

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	2/18/18	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

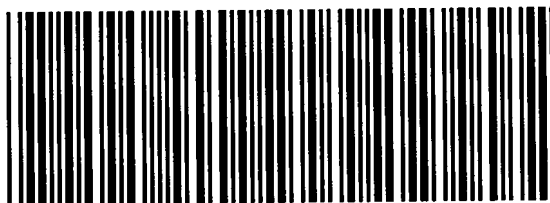
RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

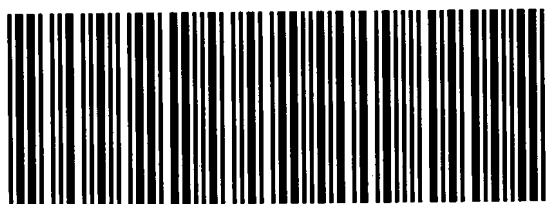
FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER **BP** DATE PREPARED **2/14/18**



SEN PATCH



SEN PATCH

2025-01-01 10:00:00