FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. JASON LEWIS FOR SENATE C/O RED CURVE SOLUTIONS ADDRESS (number and street) 138 CONANT ST, STE 401 (Check if address is changed) **BEVERLY** 01915 MA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address JASONLEWISFORSENATE@REDCURVE.COM is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00716860 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. Type or Print Name of Treasurer CRATE, BRADLEY, , , CRATE, BRADLEY, , , 11 01 2023 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

Local 202-694-1100

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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					
					Candidate Office Party Affiliation Sought: House Senate
(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) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or procommittee. (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	9 6.)				
(g) This committee is an independent expenditure-only political committee (Super PAC).				
In addition, this committee is a Lobbyist/Registrant PAC.					
(h) This committee is a political committee with both contribution and non-contribution	accounts (Hybrid PAC).				
In addition, this committee is a Lobbyist/Registrant PAC.					
Joint Fundraising Representative:					
(i) This committee collects contributions, pays fundraising expenses and disburses ne committees/organizations, at least one of which is an authorized committee of a fe	•				
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.	C				
2.	C				

TREASURER

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ı	FEC Form 1 (Revised 0)	2/2009)		Page 3	
٧	Irite or Type Committee Name			1911	
	JASON LEWIS F	OR SENATE			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	JUST LEAD PAC				
	Mailing Address	C/O RED CURVE SOLUTIONS			
		138 CONANT ST, STE 401			
		BEVERLY	MA 01915	1 1	
	_	CITY ▲	STATE ▲	ZIP CODE ▲	
	Relationship: Connected	Organization X Affiliated Organization Joint Fu	undraising Representative	Leadership PAC Sponso	
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. 					
	CRATE, BF	RADLEY,,,			
	Full Name	C/O DED CHIDVE SOLUTIONS			
	Mailing Address	C/O RED CURVE SOLUTIONS			
		138 CONANT ST, STE 401			
		BEVERLY	MA 01915		
		CITY ▲	STATE ▲	ZIP CODE ▲	
	Title or Position ▼				
	TREASURER	Teleph	none 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 CRATE, BF of Treasurer	RADLEY, , ,			
	Mailing Address	C/O RED CURVE SOLUTIONS			
		138 CONANT ST, STE 401			
		BEVERLY	MA 01915		
	Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲	
	THE OF TOSILION ¥				

303

Telephone number

6800

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	Full Name of Designated Agent			
N	Mailing Address			
_	Fialo ou Docition e	CITY ▲	STATE ▲	ZIP CODE ▲
	Fitle or Position	1		
Ĺ		Telephone nui	mber	
. E	Banks or Other afety deposit bo	Depositories: List all banks or other depositories in which the committ xes or maintains funds.	ee deposits funds, ho	olds accounts, rents
Ν	lame of Bank, [pepository, etc.		
		CHAIN BRIDGE BANK, N.A.		
Ν	Mailing Address	1445-A LAUGHLIN AVENUE		
		MCLEAN	VA 2210	1
		CITY A	STATE ▲	ZIP CODE ▲
N	lame of Bank, [epository, etc.		
Ν	Mailing Address			
		CITY A	STATE ▲	ZIP CODE ▲