

FEC
FORM 1STATEMENT OF
ORGANIZATION

Office Use Only

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

12FE4M5

JOHN KING FOR SENATE

ADDRESS (number and street)

PO BOX 12077

 (Check if address
is changed)

ATLANTA

CITY ▲

GA

30355

ZIP CODE ▲

-

COMMITTEE'S E-MAIL ADDRESS

 (Check if address
is changed)

KINGFORSENATE@REDCURVE.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

 (Check if address
is changed)

WWW.VOTEJOHNKING.COM

2. DATE

M M / D D / Y Y Y Y
05 / 12 / 2025

3. FEC IDENTIFICATION NUMBER ►

C C00904870

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.,

Signature of Treasurer CRATE, BRADLEY, T.,

Date M M / D D / Y Y Y Y
05 / 12 / 2025NOTE: 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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100FEC FORM 1
(Revised 06/2012)

Write or Type Committee Name

JOHN KING 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 Organization 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.,

Mailing Address

C/O RED CURVE SOLUTIONS

138 CONANT ST STE 401

BEVERLY

MA

01915

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

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.,

Mailing Address

C/O RED CURVE SOLUTIONS

138 CONANT ST STE 401

BEVERLY

MA

01915

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

TREASURER

Telephone number

617 - 303 - 6800

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 NA

1445A LAUGHLIN AVE

MCLEAN

VA

22101

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

VA

22101

CITY ▲

STATE ▲

ZIP CODE ▲