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. ABE FOR ARIZONA C/O RED CURVE SOLUTIONS ADDRESS (number and street) 138 CONANT ST SUITE 401 (Check if address is changed) **BEVERLY** 01915 MA CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address ABEFORAZ@REDCURVE.COM is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00853986 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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,, CRATE, BRADLEY, T,, Date 11 20 2023 Signature of Treasurer 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 | ate information below.) |
| (b) This committee is an authorized committee, and is NOT a principal camp information below.) | paign committee. (Complete the candidate |
| Name of Candidate HAMADEH, ABRAHAM, , , | |
| Candidate Party Affiliation REP Office Sought: House Sena | State AZ President District 08 |
| (c) This committee supports/opposes only one candidate, and is NOT an aut | thorized 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) | zation on line 6.) Its connected organization is a |
| Corporation Corporation w/o Capital S | Stock Labor Organization |
| Membership Organization Trade Association | Cooperative |
| In addition, this committee is a Lobbyist/Registrant PAC. | Соорыши |
| (f) This committee supports/opposes more than one Federal candidate, and committee. (i.e., nonconnected committee) | is NOT a separate segregated fund or party |
| In addition, this committee is a Lobbyist/Registrant PAC. | |
| In addition, this committee is a Leadership PAC. (Identify spons | sor on line 6.) |
| | |
| (g) This committee is an independent expenditure-only political committee (Signature) In addition, this committee is a Lobbyist/Registrant PAC. | uper 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 disk committees/organizations, at least one of which is an authorized committee | · |
| (j) This committee collects contributions, pays fundraising expenses and disk committees/organizations, none of which is an authorized committee of a | · |
| Committees Participating in Joint Fundraiser | |
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|----|--|---|--------------------------------|--|--|
| ٧ | Vrite or Type Committee Name | | | | |
| | ABE FOR ARIZO | ONA | | | |
| 6. | | Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor | | | |
| | ARIZONA FREEDOI | И JFC | | | |
| | | | | | |
| | Mailing Address | C/O RED CURVE SOLUTIONS | | | |
| | | 138 CONANT ST, STE 401 | | | |
| | | BEVERLY | 01915 | | |
| | | CITY ▲ STATE A | ▲ ZIP CODE ▲ | | |
| | Relationship: Connected | Organization Affiliated Organization X Joint Fundraising Represe | entative Leadership PAC Sponso | | |
| | _ | | _ | | |
| 7. | Custodian of Records: Identi books and records. | tify by name, address (phone number optional) and position of the pers | son in possession of committee | | |
| | CRATE, B | RADLEY, T, , | | | |
| | Full Name | | | | |
| | Mailing Address | C/O RED CURVE SOLUTIONS | | | |
| | | 138 CONANT ST SUITE 401 | | | |
| | | BEVERLY | 01915 | | |
| | | CITY ▲ STATE 4 | ▲ 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). | | | | |
| | | RADLEY, T, , | | | |
| | of Treasurer | IC/O RED CURVE SOLUTIONS | | | |
| | Mailing Address | | | | |
| | | 138 CONANT ST SUITE 401 | | | |
| | | BEVERLY | 01915 | | |
| | | CITY ▲ STATE 4 | ▲ ZIP CODE ▲ | | |
| | Title or Position ▼ | | | | |
| | TREASURER | Telephone number | 617 - 303 - 6800 | | |

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| Full Name of Designated Agent | | |
| Mailing Address | | |
| | | |
| | | |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ |
| Title or Position ▼ | | |
| | Telephone number | - |
| | epositories: List all banks or other depositories in which the committee deposits funds, s or maintains funds. | holds accounts, rents |
| Name of Bank, Dep | pository, etc. | |
| _(| CHAIN BRIDGE BANK | |
| Mailing Address | 1445A LAUGHLIN AVE | |
| | | |
| | MCLEAN VA 221 | 01 |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ |
| Name of Bank, Dep | pository, etc. | |
| L | | |
| Mailing Address | | |
| | | |
| | | |
| | CITY ▲ STATE ▲ | ZIP CODE ▲ |
| | | |