FEC FORM 1	STATEMEN ORGANIZA		PAGE 1 / 8 -
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
		′ FUND	
	C/O RED CURVE SOLUTION	S	
ADDRESS (number and street) (Check if address is changed)	138 CONANT ST, 2ND FL		01015
			MA     01915       STATE ▲     ZIP CODE ▲
COMMITTEE'S E-MAIL ADDR	ESS		
(Check if address is changed)			
	Optional Second E-Mail Add	Iress	
COMMITTEE'S WEB PAGE AI	DDRESS (URL)		
	15 / Y Y Y Y 2022		
3. FEC IDENTIFICATION N	NUMBER ► C co	00796300	
4. IS THIS STATEMENT	NEW (N) OR	X 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 Treasur	er CRATE, BRADLEY, T, MR.,		
Signature of Treasurer	ATE, BRADLEY, T, MR.,	[Electronically Filed]	Date 04 / 15 / 2022
NOTE: Submission of false, erro		may subject the person signing t DN SHOULD BE REPORTED W	his Statement to the penalties of 2 U.S.C. §437g
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

Image# 202204159496942998

04/15/2022 19 : 20

FE	C For	m 1 (Revised 02/2009)	Page <b>2</b>
TYPE	OF CO	DMMITTEE	
Cand	idate	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. (Complinformation below.)	ete the candidate
Name Candid			
Candid Party A		n Office Sought: House Senate President	State
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	Com	mittee:	
(d)			emocratic, epublican, etc.) Party.
Politie	cal Ac	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected 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 seg committee. (i.e., nonconnected committee)	regated 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 two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Comr	nittees Participating in Joint Fundraiser	
	1.	KAT FOR CONGRESS	30895
	2.	JEFF DUNCAN FOR CONGRESS	0550
	3.	FEENSTRA FOR CONGRESS	3663
	4.	LANCE GOODEN FOR CONGRESS COMMITTEE	2601

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## FOUNDING FATHERS VICTORY FUND

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address			
			-
	CITY	STATE ZIP CC	DDE
Relationship: Connected	Organization Affiliated Committee Joint F	undraising Representative Leadership	o 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.

CRATE, B	RADLEY, T, MR.,		
Full Name			
Mailing Address			
	138 CONANT ST, 2ND FL		
	BEVERLY	MA 01915	
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	303

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	C/O RED CURVE SOLUTIONS
	138 CONANT ST, 2ND FL
	BEVERLY
	CITY STATE ZIP CODE
Title or Position	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of       Designated       Agent	ASON, , ,			
Mailing Address				
	138 CONANT ST, 2ND FL			
		MA	01915	
	BEVERLY CITY		01915	

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.

CHA															
Mailing Address	1445-A LAUGHLIN AVE														
		VA 2210	1												
	CITY	STATE	ZIP CODE												
Name of Bank, Deposito	pry, etc.														
Mailing Address															
	CITY	STATE	ZIP CODE												

FEC Form 1S (Revised 02/2017	7) Optional Supplemental In for Lines 5(g) or (h), 6, 8		Page _5 of 8
3. GUY FOR CONGR	GRESS OR CONGRESS FOR CONGRESS FOR CONGRESS	FEC ID number FEC ID number FEC ID number FEC ID number	<ul> <li>C C00636092</li> <li>C C00663914</li> <li>C C00633610</li> <li>C C00657833</li> </ul>
6. Name of Any Connected Org	ganization, Affiliated Committee, Joint Fund		
Mailing Address			
L			
Relationship:			
Connected Or	rganization Affiliated Committee Join	t Fundraising Representa	tive Leadership PAC Sponsor
8. Designated Agent: Identify by	r name, address (phone number – optional)		
Full Name			
Mailing Address			
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TITLE OR POSITION ▼	CITY 🔺	STATE A	ZIP CODE
	т	elephone 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.																						
Mailing Address																						
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FEC Form 1S (Revised 02/2017)	Optional Supplemental Info for Lines 5(g) or (h), 6, 8 a		Page _6_ of 8
5(g) or (h). Joint Fundraising Participant: MIKE ROGERS FOR CON 1. JASON SMITH FOR CONC 2. JASON SMITH FOR CONC 3. JOBS, ENERGY AND OUR FOUND 3. DELIVERS PAC 4. JULIA DELIVERS PAC	GRESS	FEC ID number FEC ID number FEC ID number FEC ID number	<ul> <li>C 000367862</li> <li>C 000541862</li> <li>C 000516724</li> <li>C 000756825</li> </ul>
6. Name of Any Connected Organization,	Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Mailing Address			

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Relationship:								C	ITY									ST/						7	IP	co			
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Mailing Address																													

8. Designated Agent: Identify by name, address (phone number - optional)

Full Name																										
Mailing Address																										
TITLE OR POSITION	•				С	ΥT	∕▲								S	TAT	E				ZIP	С	DDE	Ξ 🔺		
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Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents 9. safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.																														
Mailing Address	L																													
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FEC Form 1S (Revised 02/201	7) Optional Supplemental Info for Lines 5(g) or (h), 6, 8 a		Page of 8
1. HELP ELECT RE 2. HELP ELECT RE 3. DELIVER. EXCENT	DWN DYNAMIC ECONOMY NOW         PUBLICANS NOW	FEC ID number FEC ID number FEC ID number FEC ID number	<ul> <li>C C00685115</li> <li>C C00692715</li> <li>C C00681643</li> <li>C C00781740</li> </ul>
6. Name of Any Connected On	rganization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
Mailing Address Relationship:			
Connected C	Drganization Affiliated Committee Joint	Fundraising Represent	
8. Designated Agent: Identify b	y name, address (phone number – optional)		
Mailing Address			

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.

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Name of Bank, Depository, etc.																																	
Mailing Address																																	
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STATE A

Telephone Number

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FEC Form 1S (Revised 02/20	Optional Supplemental Ir for Lines 5(g) or (h), 6, 8		Page _8 of 8
g)or(h). Joint Fundraising	9 Participant:		
		FEC ID number	C C00689208
AMERICAN SEC		FEC ID number	C C00439521
	MISSOURIAN IN THE HOUSE PAC	FEC ID number	C C00563726
		FEC ID number	C C00756551
Name of Any Connected (	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponsor
Mailing Address			
Relationship:	CITY 🔺	STATE 🔺	ZIP CODE
Connected	Organization Affiliated Committee Join	nt Fundraising Representa	ative Leadership PAC Sponsor
Designated Agent: Identify	by name, address (phone number - optional)		
Full Name			
Mailing Address			
	CITY ▲		
TITLE OR POSITION	•		

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. 9.

Name of Bank, Depository, etc.	<u> </u>																														
Mailing Address	L																														
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	CITY A													STATE A								ZIP CODE									

Telephone Number