

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE
15 APR -6 AM 11:58
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

BRIAN HERR FOR SENATE

ADDRESS (number and street) ▼

500 CUMMINGS CENTER

SUITE 4400



Check if different than previously reported. (ACC)

BEVERLY

MA

01915

2. FEC IDENTIFICATION NUMBER ▼

C C00556324

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

MA

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y
01 / 01 / 2015

M M / D D / Y Y Y Y
01 / 01 / 2015

M M / D D / Y Y Y Y
01 / 01 / 2015

through

M M / D D / Y Y Y Y
03 / 31 / 2015

M M / D D / Y Y Y Y
03 / 31 / 2015

M M / D D / Y Y Y Y
03 / 31 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer BRADLEY T CRATE

Signature of Treasurer BRADLEY T CRATE

Date

M M / D D / Y Y Y Y
04 / 02 / 2015

M M / D D / Y Y Y Y
04 / 02 / 2015

M M / D D / Y Y Y Y
04 / 02 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

15020126165

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 11

Write or Type Committee Name
BRIAN HERR FOR SENATE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	0.00	115806.92
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	0.00	115806.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	1717.32	116570.00
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	1717.32	116570.00
8. Cash on Hand at Close of Reporting Period (from Line 27)...	6.61	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)...	92897.97	

For further information contact:

Federal Election Commission
 999 E Street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

15020126166

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 11

Write or Type Committee Name
BRIAN HERR FOR SENATE

Report Covering the Period: From:

MM	DD	YYYY
01	01	2015

 To:

MM	DD	YYYY
03	31	2015

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)...

0.00

78104.92

(ii) Unitemized

0.00

32802.00

(iii) TOTAL of contributions from individuals .

0.00

110906.92

(b) Political Party Committees...

0.00

0.00

(c) Other Political Committees (such as PACs) ...

0.00

4650.00

(d) The Candidate

0.00

250.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

0.00

115806.92

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

0.00

0.00

13. LOANS:

(a) Made or Guaranteed by the Candidate...

0.00

3100.00

(b) All Other Loans...

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

0.00

3100.00

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines

11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)...

0.00

118906.92

15020126167

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	1717.32	116570.00
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	0.00	0.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	1717.32	116570.00

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	1723.93
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	0.00
25. SUBTOTAL (add Line 23 and Line 24)...	1723.93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	1717.32
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	6.61

15020126168

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 11	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

Full Name (Last, First, Middle Initial) A. CHRONOS CREATIVE		Date of Disbursement
Mailing Address 2 NOTTINGHAM ROAD GRAFTON		<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2015"/>
City	State	Zip Code
GRAFTON	MA	01519
Purpose of Disbursement DIGITAL CONSULTING	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="600.00"/>
Office Sought:	Disbursement For: 2014	Transaction ID : SB17.6147
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement
Mailing Address 240 ANDOVER STREET		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code
PEABODY	MA	01960
Purpose of Disbursement RED CURVE SOLUTIONS REIMBURSEMENT:POSTAGE	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="15.30"/>
Office Sought:	Disbursement For: 2014	Transaction ID : SB17.6150
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. RED CURVE SOLUTIONS		Date of Disbursement
Mailing Address 500 CUMMINGS CENTER SUITE 4400		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2015"/>
City	State	Zip Code
BEVERLY	MA	01915
Purpose of Disbursement REIMBURSEMENT:SEE MEMO ENTRY	<input type="text"/>	Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="15.30"/>
Office Sought:	Disbursement For: 2014	Transaction ID : SB17.6149
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="615.30"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

1502012010

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

Full Name (Last, First, Middle Initial) A. SCM ASSOCIATES, INC.		Date of Disbursement
Mailing Address 1283 MAIN STREET PO BOX 254		MM / DD / YYYY 01 / 09 / 2015
City DUBLIN	State NH	Zip Code 03444
Purpose of Disbursement DIRECT MAIL PRINTING/POSTAGE	Category/Type	Amount of Each Disbursement this Period 937.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	Transaction ID : SB17.6152

Full Name (Last, First, Middle Initial) B. SCM ASSOCIATES, INC.		Date of Disbursement
Mailing Address 1283 MAIN STREET PO BOX 254		MM / DD / YYYY 03 / 26 / 2015
City DUBLIN	State NH	Zip Code 03444
Purpose of Disbursement DIRECT MAIL PRINTING/POSTAGE	Category/Type	Amount of Each Disbursement this Period 152.12
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	Transaction ID : SB17.6153

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		MM / DD / YYYY
City	State	Zip Code
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	1089.12
TOTAL This Period (last page this line number only)	1704.42

15020126170

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **BRIAN HERR FOR SENATE** Transaction ID : **SC/10.4409**

LOAN SOURCE Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2014
BRIAN HERR Primary
 Mailing Address General
 138 CONANT STREET Other (specify) ▼

City State ZIP Code
 BEVERLY MA 01915

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
 2600.00 0.00 2600.00

TERMS Date Incurred Date Due Interest Rate Secured:
 02 / 10 / 2014 M M / D D / 12/31/2015 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)... ▶ 2600.00

TOTALS This Period (last page in this line only) .. ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

15020126171

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **BRIAN HERR FOR SENATE** Transaction ID : **SC/10.4410**

LOAN SOURCE Full Name (Last, First, Middle Initial) **BRIAN HERR** [PERSONAL FUNDS] Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
 138 CONANT STREET

City State ZIP Code
 BEVERLY MA 01915

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
500.00	0.00	500.00

TERMS

Date Incurred: M 03 / D 07 / Y 2014
 Date Due: M M / D D / Y 12/31/2015
 Interest Rate: 0.00 % (apr)
 Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)...	500.00
TOTALS This Period (last page in this line only) ..	3100.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

271921020215020126172

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

BRIAN HERR FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
BRIAN HERR

Nature of Debt (Purpose):
 REIMBURSEMENT

Mailing Address 31 ELIZABETH

City State Zip Code
 HOPKINTON MA 01748

Outstanding Balance Beginning This Period
 120.55

Transaction ID : SD10.6139

Amount Incurred This Period
 0.00

Payment This Period
 0.00

Outstanding Balance at Close of This Period
 120.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JAKE WARSHAWSKY

Nature of Debt (Purpose):
 FIELD CONSULTING

Mailing Address 10 MORGAN ST

City State Zip Code
 SOMERVILLE MA 02143

Outstanding Balance Beginning This Period
 2177.42

Transaction ID : SD10.6140

Amount Incurred This Period
 0.00

Payment This Period
 0.00

Outstanding Balance at Close of This Period
 2177.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JOHNSTON CONSULTING INC

Nature of Debt (Purpose):
 FINANCE CONSULTING

Mailing Address 99 STATE STREET

City State Zip Code
 MONTPELIER VT 05602

Outstanding Balance Beginning This Period
 2000.00

Transaction ID : SD10.6135

Amount Incurred This Period
 0.00

Payment This Period
 0.00

Outstanding Balance at Close of This Period
 2000.00

1) **SUBTOTALS** This Period This Page (optional) ...

4297.97

2) **TOTALS** This Period (last page this line number only) ...

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)...

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

15020126175

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED CURVE SOLUTIONS	Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 500 CUMMINGS CENTER SUITE 4400	
City State Zip Code BEVERLY MA 01915	

Outstanding Balance Beginning This Period 50000.00	Transaction ID : SD10.6134
Amount Incurred This Period 0.00	Outstanding Balance at Close of This Period 50000.00
Payment This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED PRINT STRATEGY	Nature of Debt (Purpose): PRINTING EXPENSE
Mailing Address 311 S FILLMORE STREET	
City State Zip Code ARLINGTON VA 22204	

Outstanding Balance Beginning This Period 9500.00	Transaction ID : SD10.6141
Amount Incurred This Period 0.00	Outstanding Balance at Close of This Period 9500.00
Payment This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MATT TALANCY	Nature of Debt (Purpose): FIELD CONSULTING
Mailing Address 445 MALDEN ST	
City State Zip Code HOLDEN MA 01520	

Outstanding Balance Beginning This Period 9000.00	Transaction ID : SD10.6138
Amount Incurred This Period 0.00	Outstanding Balance at Close of This Period 9000.00
Payment This Period 0.00	

1) SUBTOTALS This Period This Page (optional) ...	68500.00
2) TOTALS This Period (last page this line number) ...	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)...	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

15020126174

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

BRIAN HERR FOR SENATE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

WYLIE STRATEGY GROUP

Nature of Debt (Purpose):

STRATEGY CONSULTING

Mailing Address 7 HOLLOW TREE RD

City State

NORWALK

Zip Code

CT 06854

Outstanding Balance Beginning This Period

17000.00

Transaction ID : SD10.6136

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

17000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ...

17000.00

2) **TOTALS** This Period (last page this line number) ...

89797.97

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)...

3100.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

92897.97

15020126175



Express

4/2/2015

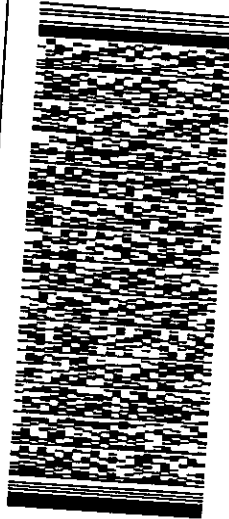
From: (617) 848-8887
Bradley T. Crete
Red Curve Solutions
500 Cummings Center
Suite 4400
BEVERLY, MA 01915

Origin ID: MXGA



JIS1215022303W

SHIP TO: (617) 303-6800
BILL SENDER
Senate Office of Public Records
Senate Office of Public Records
232 HART SENATE OFFICE BUILDING
WASHINGTON, DC 20510



After printing this label:



Extremely Urgent

04:03 8672
15:00

RT 129

FedEx Ship Manager - Print Your Label(s)

Ship Date: 02APR15
ActWgt: 0.5 LB
CAD: 105653717/NET3610

Delivery Address Bar Code



Ref #
Invoice #
PO #
Dept #

Screened by
Senate Post Office
APR 03 2015

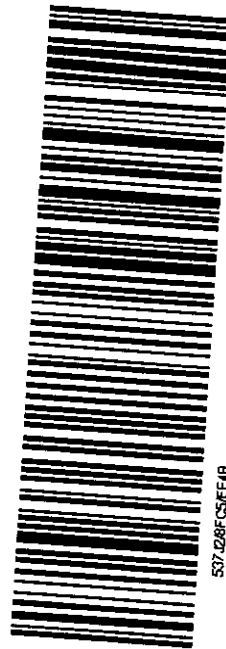
Screened by
Senate Post Office
APR 03 2015

TRK# 7732 8327 8672
0201

FRI - 03 APR AA
STANDARD OVERNIGHT

EP YKNA

20510
DC-US
IAD



537428FCSJEE1B

Insert shipping document here

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	4-2-15	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

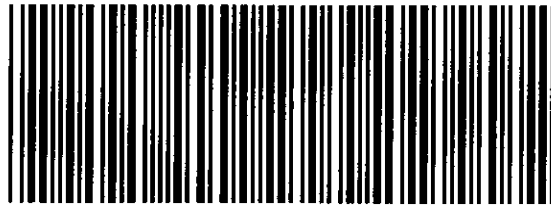
POSTMARK ILLEGIBLE POSTMARK

FAX _____
Date of Receipt

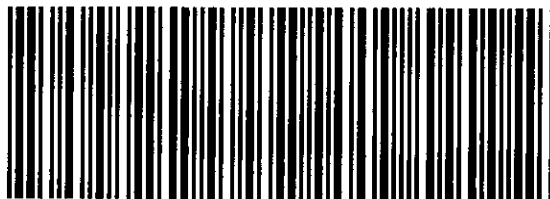
OTHER _____
Date of Receipt or Postmark

PREPARER **DA** DATE PREPARED **4-6-15**

15020126177



SEN PATCH



SEN PATCH

8/197102051