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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	uthorized Com	mittee			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		cample: If typing	, type	12FE4M5	
BRIAN HERR FOR	SENATE					I
ADDRESS (number and street)	138 CONANT S	STREET				
	2ND FLOOR					
Check if different than previously reported. (ACC)	BEVERLY				MA	01915
2. FEC IDENTIFICATION	I NUMBER ▼	CITY ▲		;	STATE A	ZIP CODE ▲
C C00556324		3. IS THIS REPORT	x NEW (N)	OR	AMENDI (A)	STATE ▼ DISTRICT MA 00 00
4. TYPE OF REPORT	(Choose One)	(h) 40 D D				
(a) Quarterly Reports:		(b) 12-Day PRE	-Election Repor	t for the:	-	
April 15 Quarte	rly Report (Ω1)	Ш	Primary (12P)	L	General (12	2G) Runoff (12R)
			Convention (12	2C)	Special (12	2S)
outy to quartor			M M /	D D /	YYYY	in the
October 15 Qua	arterly Report (Q3)	Election on				State of
January 31 Yea	r-End Report (YE)	(c) 30-Day POS	T-Election Repo	ort for the:		
			General (30G)		Runoff (30l	R) Special (30S)
Termination Rep	port (TER)	Election on	M M /	D D /	Y " Y " Y	in the State of
5. Covering Period	M M / D D /	Y Y Y Y Y 2020	through	M M 06	/ D D /	Y Y Y Y Y 2020
I certify that I have examined	CRATE, BRAI		nowledge and be	elief it is tr	ue, correct and	complete.
Type or Print Name of Treas	surer					
Signature of Treasurer	CRATE, BRADLEY, T, ,		[Electronically Fi	iled] [Date 07	13 / Y Y Y Y Y Y 2020
NOTE: Submission of false, er	roneous, or incomplet	te information may	subject the person	on signing t	his Report to the	e penalties of 52 U.S.C. §30109
Office Use Only						FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
BRIAN HERR FOR SENATE

2020 2020 06 30 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 115806.92 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 115806.92 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 116570.00 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 116570.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 6.61 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 90843.74 Schedule C and/or Schedule D).....

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name

BRIAN HERR FOR SENATE

04 01 2020 06 30 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 78104.92 (i) Itemized (use Schedule A)..... 32802.00 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 110906.92 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 4650.00 (such as PACs) 0.00 250.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 115806.92 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 3100.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 3100.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.)..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 0.00 118906.92 (Carry Total to Line 24, page 4).....

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	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
0.	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	0.00	0.00
	(such as PACs)		, , , , , ,
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
1.	OTHER DISBURSEMENTS	0.00	0.00
2.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	116570.00
	III. CASH SU	JMMARY	
3.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	6.61
4	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
5.	SUBTOTAL (add Line 23 and Line 24)		6.61
6.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	0.00
7.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)	G PERIOD	6.61

SCHEDULE C (FEC Form 3) **LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 5 FOR LINE NUMBER: **x** 13a (check only one)

OF

11

13b Transaction ID: SC/10.4409 NAME OF COMMITTEE (In Full) BRIAN HERR FOR SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary HERR, BRIAN, , , General Mailing Address 138 CONANT STREET Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MA 01915 **BEVERLY** 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: (If none, enter 0) 0.00 ^D10^D M 02M ž014 Y12/31/2015 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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.

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE

X 13a 13b

11

OF

Transaction ID: SC/10.4410 NAME OF COMMITTEE (In Full) BRIAN HERR FOR SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary HERR, BRIAN, , , General Mailing Address 138 CONANT STREET Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MA 01915 **BEVERLY** Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 500.00 0.00 500.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D07D M 03M ž014 Y12/31/2015 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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.

Excluding Loans

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

PAGE FOR LINE NUMBER:

(check only one)

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	ME OF COMMITTEE (In Full)					
В	BRIAN HERR FOR S	ENA ⁻	ΤE			
	A. Full Name (Last, First, Middle Initial) of Del	Nature of Debt (Purpose):				
	HERR, BRIAN, , ,			REIMBURSEMENT		
Ī	Mailing Address 31 ELIZABETH					
Ī	City	State	Zip Code			
ŀ	HOPKINTON	MA	01748			
	Outstanding Balance Beginning This Period			Transaction ID : SD10.6139		
	120.55					
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Clos	se of This Period	
	0.00		0.0	0	120.55	
ŀ	B. Full Name (Last, First, Middle Initial) of Deb	otor or Cred	ditor	Nature of Debt (Purpose):		
	JOHNSTON CONSULTING IN			FINANCE CONSULTING		
	Mailing Address 99 STATE STREET					
	City MONTPELIER	State VT	Zip Code 05602			
	Outstanding Balance Beginning This Period			Transaction ID : SD10.6135		
	2000.00					
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Clos	se of This Period	
	0.00		0.00		2000.00	
	3.00		y	, , , , , ,		
	C. Full Name (Last, First, Middle Initial) of De RED CURVE SOLUTIONS	ebtor or Creditor		Nature of Debt (Purpose): COMPLIANCE CONSULTING	Nature of Debt (Purpose): COMPLIANCE CONSULTING	
ŀ	Mailing Address 138 CONANT STREET 2ND FLOOR					
Ī	City	State	Zip Code			
ŀ	BEVERLY	MA	01915			
	Outstanding Balance Beginning This Period			Transaction ID : SD10.6134	l .	
	50000.00					
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Clos	se of This Period	
	0.00		0.00	0	50000.00	
1)	SUBTOTALS This Period This Page (optional))		>	52120.55	
2)	TOTALS This Period (last page this line numb	ber only) ····		··· •		
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	Dage only)······			
4)	ADD 2) and 3) and carry forward to appropri	iate line of	Summary Page (last page on	nlv) ▶		

Excluding Loans

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

PAGE 8 OF FOR LINE NUMBER: (check only one)

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ХC	luding Loans			namberea iine)	 		
NAI	ME OF COMMITTEE (In Full)						
В	RIAN HERR FOR S	ENA [®]	TE				
	A. Full Name (Last, First, Middle Initial) of De	btor or Cre	editor	Nature of D	Debt (Purpose):		
	RED CURVE SOLUTIONS			POSTAGE	REIMBURSEMENT		
L							
	Mailing Address 138 CONANT STREET						
ŀ	2ND FLOOR	01-1-	7. 0. 4.				
	City	State MA	Zip Code				
ŀ	BEVERLY	IVIA	01915				
	Outstanding Balance Beginning This Period			Transacti	on ID : SD10.6157		
	18.72						
	9 9 9						
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period		
	0.00		0.0	00	18.72		
	7 7		7		7		
ħ	B. Full Name (Last, First, Middle Initial) of Deb	otor or Cred	ditor	Nature of D	Pebt (Purpose):		
	RED CURVE SOLUTIONS				SERVICES		
	112 331112 3323 113113						
Ī	Mailing Address 138 CONANT STREET						
Į	2ND FLOOR						
	City	State	Zip Code				
L	BEVERLY	MA	01915				
	Outstanding Balance Beginning This Period			Transaction ID : SD10.6158			
				Transasti	511 12 1 62 1010 100		
	15.95						
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period		
	0.00		0.0	00	15.95		
	0.00		7		, , , ,		
⊦	C. Full Name (Last, First, Middle Initial) of De	htor or Cre	oditor				
	RED CURVE SOLUTIONS	biol of Ole	fultoi		Nature of Debt (Purpose): COURIER SERVICES		
	RED CORVE SOLUTIONS			COURIER	SERVICES		
ŀ	Mailing Address 138 CONANT STREET						
	2ND FLOOR						
Ī	City	State	Zip Code				
	BEVERLY	MA	01915				
ſ	Outstanding Balance Beginning This Period			Transact	tion ID : SD10.6156		
	Cutstanding Balance Beginning This Feriod			Halisaci	1011 10 . 3010.0130		
	15.49						
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period		
	0.00				15.49		
	0.00		0.0	10	13.49		
1)	SUBTOTALS This Period This Page (optional)		▶	50.16		
-,		,			30.10		
2)	TOTALS This Period (last page this line numl	ber only) ····					
	, , , , , ,				7 7		
3)	TOTAL OUTSTANDING LOANS from Schedu	ıle C (last p	page only)	•			
				_ ==	, , , , , , , , , , , , , , , , , , , ,		
4)	ADD 2) and 3) and carry forward to appropri	ate line of	Summary Page (last page or	nly) 🕨			

Excluding Loans

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

PAGE FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full) **BRIAN HERR FOR SENATE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **COURIER SERVICES RED CURVE SOLUTIONS** Mailing Address 138 CONANT STREET 2ND FLOOR City State Zip Code **BEVERLY** MA 01915 Transaction ID: SD10.6164 Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 15.87 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **RED CURVE SOLUTIONS COURIER SERVICES** Mailing Address 138 CONANT STREET 2ND FLOOR State Zip Code **BEVERLY** 01915 MA Outstanding Balance Beginning This Period Transaction ID: SD10.6166 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 15.57 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **RED CURVE SOLUTIONS COURIER SERVICES** Mailing Address 138 CONANT STREET 2ND FLOOR City State Zip Code MA BEVERLY 01915 Outstanding Balance Beginning This Period Transaction ID: SD10.6169 10.80 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 10.80 0.00 1) SUBTOTALS This Period This Page (optional) 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)

Excluding Loans

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

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NAME OF COMMITTEE (In Full) **BRIAN HERR FOR SENATE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **COURIER SERVICES RED CURVE SOLUTIONS** Mailing Address 138 CONANT STREET 2ND FLOOR City State Zip Code **BEVERLY** MA 01915 Transaction ID: SD10.6171 Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 20.12 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **RED CURVE SOLUTIONS COURIER SERVICES** Mailing Address 138 CONANT STREET 2ND FLOOR State Zip Code **BEVERLY** 01915 MA Outstanding Balance Beginning This Period Transaction ID: SD10.6173 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 10.67 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **RED PRINT STRATEGY** PRINTING EXPENSE Mailing Address 311 S FILLMORE STREET City State Zip Code VA ARLINGTON 22204 Outstanding Balance Beginning This Period Transaction ID: SD10.6141 9500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 9500.00 0.00 1) SUBTOTALS This Period This Page (optional) 9530.79 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)

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(Use separate schedule(s) for each

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Excluding Loans			numbered line)	 X 10	
NAME OF COMMITTEE (In Full)					
BRIAN HERR FOR S	ENA	ΓΕ			
A. Full Name (Last, First, Middle Initial) of De	ebtor or Cred	ditor	Nature of Debt		
TALANCY, MATT, , ,			FIELD CONSU	_TING	
Mailing Address 445 MALDEN ST					
City	State	Zip Code			
HOLDEN	MA	01520			
Outstanding Balance Beginning This Period	!		Transaction ID	: SD10.6138	
9000.00					
Amount Incurred This Period		Payment This Period	Outstanding B	alance at Close of This Period	
0.00		0.	00	9000.00	
B. Full Name (Last, First, Middle Initial) of De	btor or Cred	itor	Nature of Debt	Purpose):	
WYLIE STRATEGY GROUP				STRATEGY CONSULTING	
Mailing Address 7 HOLLOW TREE RD					
City	State	Zip Code			
NORWALK	СТ	06854			
Outstanding Balance Beginning This Period	l		Transaction ID	: SD10.6136	
17000.00					
Amount Incurred This Period	Payment This Period		Outstanding B	Outstanding Balance at Close of This Period	
0.00		7	00	17000.00	
C. Full Name (Last, First, Middle Initial) of D	ebtor or Cre	ditor	Nature of Debt (Purpose):	
Mailing Address					
City	State	Zip Code			
City	State	Zip Oode			
Outstanding Balance Beginning This Period	 				
Amount Incurred This Period		Payment This Period	Outstanding B	alance at Close of This Period	
7 7		7 7			
1) SUBTOTALS This Period This Page (optional	ıl)		}	26000.00	
2) TOTALS This Period (last page this line num	nber only) ·····			87743.74	
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last p	age only)	····· }	3100.00	
4) ADD 2) and 3) and carry forward to appropri	riate line of S	Summary Page (last page o	only) ►	90843.74	