

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼

Example: If typing, type over the lines.

1 2 F E 4 M 5

BRIAN HERR FOR SENATE

ADDRESS (number and street)

138 CONANT STREET

2ND FLOOR

Check if different than previously reported. (ACC)

BEVERLY

MA

01915

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER** ▼

C C00556324

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

STATE ▼ DISTRICT

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  
07 / 01 / 2020

M M / D D / Y Y Y Y  
09 / 30 / 2020

M M / D D / Y Y Y Y  
07 / 01 / 2020

through

M M / D D / Y Y Y Y  
09 / 30 / 2020

M M / D D / Y Y Y Y  
09 / 30 / 2020

M M / D D / Y Y Y Y  
09 / 30 / 2020

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 CRATE, BRADLEY, T.,

Signature of Treasurer

CRATE, BRADLEY, T.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y  
10 / 14 / 2020

M M / D D / Y Y Y Y  
10 / 14 / 2020

M M / D D / Y Y Y Y  
10 / 14 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office Use Only							
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**FEC FORM 3**  
(Revised 05/2016)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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
<b>6. Net Contributions (other than loans)</b>		
(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
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	0.00	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)).....	0.00	116570.00
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	6.61	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	90843.74	

**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)

Write or Type Committee Name

**BRIAN HERR FOR SENATE**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(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
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	0.00	118906.92

**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
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. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	0.00	116570.00

**III. CASH SUMMARY**

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

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

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

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) HERR, BRIAN, , , <input type="checkbox"/> Memo Item		Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 138 CONANT STREET		<input checked="" type="checkbox"/> Personal Funds of the Candidate
City BEVERLY	State MA	

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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 02 / D 10 / Y 2014	M M / D D / Y 12/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	2600.00
<b>TOTALS</b> 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**

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

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) HERR, BRIAN, , , <input type="checkbox"/> Memo Item		Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 138 CONANT STREET		<input checked="" type="checkbox"/> Personal Funds of the Candidate
City BEVERLY	State MA	

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

<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M 03 / D 07 / Y 2014	M M / D D / Y 12/31/2015	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	500.00
<b>TOTALS</b> 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.

**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 <b>HERR, BRIAN, , ,</b>			Nature of Debt (Purpose): REIMBURSEMENT
Mailing Address 31 ELIZABETH			
City HOPKINTON	State MA	Zip Code 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 <b>JOHNSTON CONSULTING INC</b>			Nature of Debt (Purpose): FINANCE CONSULTING
Mailing Address 99 STATE STREET			
City MONTPELIER	State VT	Zip Code 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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RED CURVE SOLUTIONS</b>			Nature of Debt (Purpose): COMPLIANCE CONSULTING
Mailing Address 138 CONANT STREET 2ND FLOOR			
City BEVERLY	State MA	Zip Code 01915	

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	52120.55
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	

**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 <b>RED CURVE SOLUTIONS</b>			Nature of Debt (Purpose): POSTAGE REIMBURSEMENT
Mailing Address 138 CONANT STREET 2ND FLOOR			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period <input type="text" value="18.72"/>	<b>Transaction ID : SD10.6157</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="18.72"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RED CURVE SOLUTIONS</b>			Nature of Debt (Purpose): COURIER SERVICES
Mailing Address 138 CONANT STREET 2ND FLOOR			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period <input type="text" value="15.95"/>	<b>Transaction ID : SD10.6158</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15.95"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RED CURVE SOLUTIONS</b>			Nature of Debt (Purpose): COURIER SERVICES
Mailing Address 138 CONANT STREET 2ND FLOOR			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period <input type="text" value="15.49"/>	<b>Transaction ID : SD10.6156</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15.49"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="50.16"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 11
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**BRIAN HERR FOR SENATE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RED CURVE SOLUTIONS</b>			Nature of Debt (Purpose): COURIER SERVICES
Mailing Address 138 CONANT STREET 2ND FLOOR			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period <input type="text" value="15.87"/>	<b>Transaction ID : SD10.6164</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15.87"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RED CURVE SOLUTIONS</b>			Nature of Debt (Purpose): COURIER SERVICES
Mailing Address 138 CONANT STREET 2ND FLOOR			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period <input type="text" value="15.57"/>	<b>Transaction ID : SD10.6166</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="15.57"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RED CURVE SOLUTIONS</b>			Nature of Debt (Purpose): COURIER SERVICES
Mailing Address 138 CONANT STREET 2ND FLOOR			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period <input type="text" value="10.80"/>	<b>Transaction ID : SD10.6169</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10.80"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="42.24"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**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 <b>RED CURVE SOLUTIONS</b>			Nature of Debt (Purpose): COURIER SERVICES
Mailing Address 138 CONANT STREET 2ND FLOOR			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period <input type="text" value="20.12"/>	<b>Transaction ID : SD10.6171</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="20.12"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>RED CURVE SOLUTIONS</b>			Nature of Debt (Purpose): COURIER SERVICES
Mailing Address 138 CONANT STREET 2ND FLOOR			
City BEVERLY	State MA	Zip Code 01915	

Outstanding Balance Beginning This Period <input type="text" value="10.67"/>	<b>Transaction ID : SD10.6173</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="10.67"/>

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

Outstanding Balance Beginning This Period <input type="text" value="9500.00"/>	<b>Transaction ID : SD10.6141</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="9500.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="9530.79"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 11
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)

**BRIAN HERR FOR SENATE**

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

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>WYLIE STRATEGY GROUP</b>			Nature of Debt (Purpose): STRATEGY CONSULTING
Mailing Address 7 HOLLOW TREE RD			
City NORWALK	State CT	Zip Code 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

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	Transaction ID :	
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	26000.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	87743.74
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	3100.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	90843.74