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PAGE 1 / 11

FEC FORM 3	AND D		ECEIPTS EMENTS Committee		Office Use Only
1. NAME OF COMMITTEE (in	TYPE OR PF	RINT V	Example: If typing, to over the lines.	type 12FE4M	15
ADDRESS (number and		NT STREET			
Check if diff than previou reported. (Al	ISIY BEVERLY	R 			01915
	ATION NUMBER V	CITY	▲	STATE A	ZIP CODE
C C0055632		3. IS THI REPOR	~	OR (A)	NDED STATE ▼ DISTRICT
(a) Quarterly Re April 15 ✓ July 15 October January	PORT (Choose One) eports: Quarterly Report (Q1) Quarterly Report (Q2) 15 Quarterly Report (Q3) 31 Year-End Report (YE) tion Report (TER)	Electio	POST-Election Report General (30G)	C) General Special	(12S) Y in the State of
5. Covering Period	M M / D D D D D D D D D D D D D D D D D	/ ¥ ¥ ¥ 2022	Y through	M M / D D 06 30	/ Y Y Y Y 2022
I certify that I have e. Type or Print Name c	xamined this Report and CRATE, B of Treasurer	to the best of r RADLEY, , ,	my knowledge and beli	ief it is true, correct a	nd complete.
Signature of Treasure	<i>CRATE, BRADLEY,</i>	, ,	[Electronically File	d] Date	M / D D / Y Y Y Y 15 / 2022
	false, erroneous, or incom	plete information	may subject the person	signing this Report to	the penalties of 52 U.S.C. §30109
Office Use Only					FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

		FEC Form 3 (Revised 05/2016)	of Receipts and Disbursements	PAGE 2 / 11
		or Type Committee Name AN HERR FOR SENATE		
R	eport	Covering the Period: From:	04 / D D / Y Y Y Y 01 / 2022 To:	M06 ^M / D D / Y Y Y Y 30 ^D / 2022 ^Y
			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)	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
8.		h on Hand at Close of porting Period (from Line 27)	6.61	
9.	the	ots and Obligations Owed TO Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on edule C and/or Schedule D)	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

Γ	FEC Form 3 (Revised 05/2016)	TAILED SUMMARY PAGE of Receipts	PAGE 3 / 11
	rite or Type Committee Name		
-E	BRIAN HERR FOR SENATE		
R	eport Covering the Period: From:	/ D D / Y Y Y Y 01 2022 To	: 06 / D D / Y Y Y Y 06 2022
	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	0.00	7010100
	(i) Itemized (use Schedule A)	0.00	78104.92
	(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 (e) TOTAL CONTRIBUTIONS	0.00	250.00
	(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	, , , , , , , , , , , , , , , , , , , ,

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DETAILED SUMMARY PAGE of Disbursements FEC Form 3 (Revised 05/2016) COLUMN A **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 0.00 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 by the Candidate..... 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 Than Political Committees 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 (add Lines 20(a), (b), and (c)).....

21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d),

			,			7			0.00
	_	_	_	_	_	_	_	_	
and 21) 🕨	L.,		7			7			0.00

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7		7	-	6.61
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)		7		7	-	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		7		,	-	6.61
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		7		7	-	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		7	-	6.61

116570.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

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COLUMN B

0.00

0.00

116570.00

• • • • • • • • •				F	PAGE 5 OF 11			
CHEDULE C OANS	(FEC Form 3)		Use separate schedule(s) for each category of the Detailed Summary Page					
IAME OF COMMITTE BRIAN HERR F	(<i>'</i>			Transac	tion ID : SC/10.4409			
LOAN SOURCE HERR, BRIA	Full Name (Last, First, Mic ${\sf N},$, ,	ddle Initial)		🗌 Memo Item	Election: 2014 Primary General			
Mailing Address 138 CONANT STR	EET				Other (specify) ▼			
City BEVERLY		State MA	ZIP Code 01915	e	X Personal Funds of the Candidate			
Original Amount	of Loan 2600.00	Cumulative Pa	yment To D	Date Bala	ance Outstanding at Close of This Perio			
TERMS Data M02 ^M / P10	ate Incurred	M M / D D	Date Due	51/2015				
	s or Guarantors (if any) t st, First, Middle Initial)	o Loan Source		Name of Employer				
Mailing Addre	SS			Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
2. Full Name (Las	t, First, Middle Initial)			Name of Employer				
Mailing Addres	S			Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
3. Full Name (Las	t, First, Middle Initial)			Name of Employer				
Mailing Addres	S			Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
4. Full Name (Las	t, First, Middle Initial)			Name of Employer				
Mailing Addres	S			Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y			
	eriod This Page (optional). (last page in this line only			H	2600.00			
Carry outstanding b	alance only to LINE 3, Sch	nedule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.			

CHEDULE C (FE	C Form 3)				PAGE 6 OF 11			
OANS				Use separate schedule for each category of th Detailed Summary Pag	^{1e} (check only one) × 13a			
IAME OF COMMITTEE (IN BRIAN HERR FOR				Transac	tion ID : SC/10.4410			
HERR, BRIAN, ,	•	dle Initial)		Memo Item	Election: 2014 Primary General			
Mailing Address 138 CONANT STREET					Other (specify) ▼			
City BEVERLY		State MA	ZIP Code 01915	9	X Personal Funds of the Candidate			
Original Amount of Loa	an 500.00	Cumulative Pa	yment To D	Date Bala	nce Outstanding at Close of This Period			
TERMS Date Inc. M03 ^M / D07 ^D /	Y Ž014 Y		Date Due	Interest Rate (If none, enter 31/2015 ^Y 0.0				
List All Endorsers or (1. Full Name (Last, Fir		Loan Source		Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
2. Full Name (Last, Firs	st, Middle Initial)	ł		Name of Employer				
Mailing Address				Occupation Amount				
City	State	ZIP Code		Guaranteed Outstanding:				
3. Full Name (Last, Firs	st, Middle Initial)			Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:				
4. Full Name (Last, Firs	st, Middle Initial)	•		Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:	y 1 y 1 x 1			
SUBTOTALS This Period	This Page (optional)		I	······	500.00			
TOTALS This Period (last	page in this line only)			Ē	3100.00			
Carry outstanding balance	e only to LINE 3, Sch	edule D, for this	s line. If no	o Schedule D, carry forw	vard to appropriate line of Summary.			

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full) BRIAN HERR FOR S			(Use separate schedule(s) for each numbered line)	PAGE 7 OF 11 FOR LINE NUMBER: (check only one) 9 X 10		
A. Full Name (Last, First, Middle Initial) of De HERR, BRIAN, , ,			Nature of D REIMBUR	ebt (Purpose): SEMENT		
Mailing Address 31 ELIZABETH						
City HOPKINTON	State MA	Zip Code 01748				
Outstanding Balance Beginning This Period	Transacti	on ID : SD10.6139				
120.55 Amount Incurred This Period		Payment This Period		ng Balance at Close of This Period 120.55		
B. Full Name (Last, First, Middle Initial) of Deb JOHNSTON CONSULTING IN		ebt (Purpose): CONSULTING				
Mailing Address 99 STATE STREET						
City MONTPELIER	State VT	Zip Code 05602				
Outstanding Balance Beginning This Period 2000.00						
Amount Incurred This Period 0.00						
C. Full Name (Last, First, Middle Initial) of De RED CURVE SOLUTIONS	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED CURVE SOLUTIONS					
Mailing Address 138 CONANT STREET 2ND FLOOR						
City BEVERLY	State MA	Zip Code 01915				
Outstanding Balance Beginning This Period 50000.00			Transact	ion ID : SD10.6134		
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period		
0.00		0.0	00	50000.00		
1) SUBTOTALS This Period This Page (optional)		··· •	52120.55		
2) TOTALS This Period (last page this line numl	per only)					
3) TOTAL OUTSTANDING LOANS from Schedu	ile C (last paç	ge only)	··· •	7 7 7		
4) ADD 2) and 3) and carry forward to appropri	nly) 🕨	7 7 7				

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full)	 N I A -		(Use separate schedule(s) for each numbered line)	PAGE 8 OF 11 FOR LINE NUMBER: (check only one) 9 X 10
A. Full Name (Last, First, Middle Initial) of De RED CURVE SOLUTIONS				ebt (Purpose): REIMBURSEMENT
Mailing Address 138 CONANT STREET 2ND FLOOR				
City BEVERLY	State MA	Zip Code 01915		
Outstanding Balance Beginning This Period			Transacti	on ID : SD10.6157
18.72 Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0		18.72
B. Full Name (Last, First, Middle Initial) of Del RED CURVE SOLUTIONS		ebt (Purpose): SERVICES		
Mailing Address 138 CONANT STREET 2ND FLOOR	Otota	Zie Oode		
City BEVERLY	State MA	Zip Code 01915		
Outstanding Balance Beginning This Period 15.95 Amount Incurred This Period 0.00		Payment This Period	Outstandi	on ID : SD10.6158 ng Balance at Close of This Period 15.95
C. Full Name (Last, First, Middle Initial) of De	btor or Cre	9 9 9 9		bebt (Purpose):
RED CURVE SOLUTIONS				SERVICES
Mailing Address 138 CONANT STREET 2ND FLOOR				
City BEVERLY	State MA	Zip Code 01915		
Outstanding Balance Beginning This Period 15.49	I		Transact	ion ID : SD10.6156
Amount Incurred This Period 0.00		Payment This Period		ng Balance at Close of This Period 15.49
, , , ,		, , ,		
1) SUBTOTALS This Period This Page (optional)		···· • •	, , , , , , , , , , , , , , , , , , , ,
2) TOTALS This Period (last page this line num	ber only) ·····		···· • •	
3) TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	age only)	··· •	, , , , , , , , , , , , , , , , , , , ,
4) ADD 2) and 3) and carry forward to appropr	iate line of S	Summary Page (last page o	nly) 🕨	- 7 ×

EC Schedule) D	(Form	3)	(Revised	05/2016)
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DEI Excl	HEDULE D (FEC Form 3) BTS AND OBLIGATIONS uding Loans //E OF COMMITTEE (In Full)			(Use separate schedule(s) for each numbered line)	PAGE9OF11FOR LINE NUMBER: (check only one)9X10
	RIAN HERR FOR S A. Full Name (Last, First, Middle Initial) of De RED CURVE SOLUTIONS				ebt (Purpose): SERVICES
	Mailing Address 138 CONANT STREET 2ND FLOOR				
	City BEVERLY	State MA	Zip Code 01915		
	Outstanding Balance Beginning This Period 15.87	1			on ID : SD10.6164
	Amount Incurred This Period 0.00		Payment This Period		ng Balance at Close of This Period
	3. Full Name (Last, First, Middle Initial) of Del RED CURVE SOLUTIONS		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 15.57			Transactio	on ID : SD10.6166
	Amount Incurred This Period		Payment This Period		ng Balance at Close of This Period 15.57
(C. Full Name (Last, First, Middle Initial) of De RED CURVE SOLUTIONS	ebtor or Cred	itor		ebt (Purpose): SERVICES
	Mailing Address 138 CONANT STREET 2ND FLOOR				
	City BEVERLY	State MA	Zip Code 01915		
	Outstanding Balance Beginning This Period 10.80			Transact	ion ID : SD10.6169
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
	0.00		0.0	00	10.80
1)	SUBTOTALS This Period This Page (optional)		▶	42.24
2)	TOTALS This Period (last page this line num	ber only)			3
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last pa	ge only)	···· ▶	
					7 7 7

DEBTS AND OBLIGATIONS					
		Nature of D	ebt (Purpose):		
			SERVICES		
State MA	Zip Code 01915				
d		Transactio	on ID : SD10.6171		
	Payment This Period	Outstandi	ng Balance at Close of This Period		
			20.12		
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED CURVE SOLUTIONS					
State MA	Zip Code 01915				
Outstanding Balance Beginning This Period 10.67					
	Payment This Period	Outstandi	ng Balance at Close of This Period		
	0.0	00	10.67		
Debtor or Cre	editor		ebt (Purpose): i EXPENSE		
State	Zip Code				
	22204	Transact	ion ID : SD10.6141		
		Tansact			
	Payment This Period	Outstandi	ng Balance at Close of This Period		
			9500.00		
al)		···· •	9530.79		
nber only)…			7 7 7		
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oriate line of	Summary Page (last page o	nly) 🕨	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
	Debtor or Creater MA	State Zip Code MA 01915 d Payment This Period ebtor or Creditor 0. ebtor or Creditor 0. Bayment This Period 0. Payment This Period 0. Debtor or Creditor 0. Debtor or Creditor 0. State Zip Code Obstar 0. Payment This Period 0. Debtor or Creditor 0. Debtor or Oly 0. Debtor or Oly 0. Debtor or Oly 0.	Debtor or Creditor Nature of D State Zip Code MA 01915 d Transacti Payment This Period Outstandi oligitation 0.00 ebtor or Creditor Nature of D State Zip Code MA 01915 d Transacti Outstandi Outstandi State Zip Code MA 01915 d Transacti Payment This Period Outstandi Debtor or Creditor 0.00 State Zip Code MA 0.00 Va 2204 d Transacti		

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full)			(Use separate schedule(s) for each numbered line)	PAGE11OF11FOR LINE NUMBER: (check only one)9X10	
A. Full Name (Last, First, Middle Initial) of TALANCY, MATT, , ,			Nature of D FIELD CO	ebt (Purpose): NSULTING	
Mailing Address 445 MALDEN ST					
City	State	Zip Code			
HOLDEN	MA	01520	Transactiv	on ID : SD10.6138	
Outstanding Balance Beginning This Peri 9000.00	od		Transactio		
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00		0.0		9000.00	
	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor WYLIE STRATEGY GROUP				
Mailing Address 7 HOLLOW TREE RD					
City NORWALK	State CT	Zip Code 06854			
Outstanding Balance Beginning This Peri 17000.00	od		Transactio	on ID : SD10.6136	
	od	Payment This Period		on ID : SD10.6136	
17000.00		Payment This Period	Outstandi		
17000.00 Amount Incurred This Period		0.0	Outstandi	ng Balance at Close of This Period	
17000.00 Amount Incurred This Period 0.00		0.0	Outstandi	ng Balance at Close of This Period 17000.00	
Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of		0.0	Outstandi	ng Balance at Close of This Period 17000.00	
17000.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Mailing Address	Debtor or Cre	0.0	Outstandi	ng Balance at Close of This Period 17000.00	
17000.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Mailing Address City Outstanding Balance Beginning This Period	Debtor or Cre	0.0 editor Zip Code	Outstandii Nature of D	ebt (Purpose):	
17000.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Mailing Address City	Debtor or Cre	0.0	Outstandii Nature of D	ng Balance at Close of This Period 17000.00	
17000.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Mailing Address City Outstanding Balance Beginning This Period	Debtor or Cree	0.0 2 ditor Zip Code Payment This Period	Outstandii Nature of D	ebt (Purpose):	
17000.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period	Debtor or Cree State od nal)	0.0 Payment This Period	Outstandii Nature of D	ng Balance at Close of This Period 17000.00 ebt (Purpose):	
17000.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Mailing Address City Outstanding Balance Beginning This Period Amount Incurred This Period 1 SUBTOTALS This Period This Page (option)	Debtor or Cree State od nal)	0.0 editor Zip Code Payment This Period	Outstandii Nature of D	ng Balance at Close of This Period 17000.00 ebt (Purpose):	