FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED SECRETARY OF STATE
14 APR 18 AM 10:42
Office Use Only

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

GABRIEL GOMEZ FOR SENATE

ADDRESS (number and street) ▼

C/O RED CURVE SOLUTIONS

138 CONANT STREET

☐ Check if different than previously reported. (ACC)

BEVERLY — CITY ▲ — MA — STATE ▲ — 01915 — ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼** C C00541540

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

STATE ▼ MA — DISTRICT 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 MM / DD / YYYY in the State of

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

☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period 01 / 01 / 2014 through 03 / 31 / 2014

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 04 / 15 / 2014

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)

FE5AN018

14020273460

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
GABRIEL GOMEZ FOR SENATE

Report Covering the Period: From: 01 / 01 / 2014 To: 03 / 31 / 2014

	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)) ...	-300.00	3648248.39
(b) Total Contribution Refunds (from Line 20(d)) ..	0.00	12500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ...	-300.00	3635748.39
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	12148.79	3772905.93
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	18.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	12148.79	3772887.93
8. Cash on Hand at Close of Reporting Period (from Line 27)...	44538.07	
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) ...	562100.00	

For further information contact:

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

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

14020273461

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 12/2003)

Write or Type Committee Name

GABRIEL GOMEZ FOR SENATE

Report Covering the Period: From: 01 / 01 / 2014 To: 03 / 31 / 2014

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)...	-300.00	2701128.62
(ii) Unitemized	0.00	721019.77
(iii) TOTAL of contributions from individuals ▶	-300.00	3422148.39
(b) Political Party Committees...	0.00	5000.00
(c) Other Political Committees (such as PACs)...	0.00	221100.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))...	-300.00	3648248.39
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES...	2454.02	171986.37
13. LOANS: (a) Made or Guaranteed by the Candidate...	0.00	900100.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	900100.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)...	0.00	18.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	5000.00	0.00
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)... ▶	7154.02	4720352.76

14020273462

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	12148.79	3772905.93
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES...	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	235000.00	0.00
(b) Of All Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	235000.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	0.00	12500.00
(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	12500.00
21. OTHER DISBURSEMENTS...	0.00	0.00
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	247148.79	3785405.93

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	284532.84
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	7154.02
25. SUBTOTAL (add Line 23 and Line 24)...	291686.86
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	247148.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	44538.07

14020273463

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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)
GABRIEL GOMEZ FOR SENATE

A.
Full Name (Last, First, Middle Initial): RICHARD ROZNOS
Mailing Address: P.O. BOX 5542
City: GARDEN GROVE State: CA Zip Code: 92846
FEC ID number of contributing federal political committee: C
Name of Employer: COLOR GRAPHICS
Occupation: PRINTER
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 01 / 13 / 2014
Transaction ID : SA11AI.36586
Amount of Each Receipt this Period: -100.00
CHARGEBACK

B.
Full Name (Last, First, Middle Initial): RICHARD ROZNOS
Mailing Address: P.O. BOX 5542
City: GARDEN GROVE State: CA Zip Code: 92846
FEC ID number of contributing federal political committee: C
Name of Employer: COLOR GRAPHICS
Occupation: PRINTER
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 400.00
Date of Receipt: 01 / 13 / 2014
Transaction ID : SA11AI.36587
Amount of Each Receipt this Period: -100.00
CHARGEBACK

C.
Full Name (Last, First, Middle Initial): RICHARD ROZNOS
Mailing Address: P.O. BOX 5542
City: GARDEN GROVE State: CA Zip Code: 92846
FEC ID number of contributing federal political committee: C
Name of Employer: COLOR GRAPHICS
Occupation: PRINTER
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 300.00
Date of Receipt: 01 / 13 / 2014
Transaction ID : SA11AI.36588
Amount of Each Receipt this Period: -100.00
CHARGEBACK

SUBTOTAL of Receipts This Page (optional) ..... -300.00

TOTAL This Period (last page this line number only) ..... -300.00

14020273464

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

A.
Full Name (Last, First, Middle Initial): GABRIEL GOMEZ VICTORY FUND 2013
Mailing Address: 138 CONANT STREET FIRST FLOOR
C/O RED CURVE SOLUTIONS
City: BEVERLY State: MA Zip Code: 01915
FEC ID number of contributing federal political committee: C C00544585
Name of Employer:
Occupation:
Receipt For: 2013
☐ Primary ☒ General
☐ Other (specify)
Election Cycle-to-Date: 2442.61
Date of Receipt: 01 / 13 / 2014
Transaction ID : SA12.36605
Amount of Each Receipt this Period: 2442.61
JFC TRANSFER: DONORS PREVIOUSLY DISCLOSED

B.
Full Name (Last, First, Middle Initial): GABRIEL GOMEZ VICTORY FUND 2013
Mailing Address: 138 CONANT STREET FIRST FLOOR
C/O RED CURVE SOLUTIONS
City: BEVERLY State: MA Zip Code: 01915
FEC ID number of contributing federal political committee: C C00544585
Name of Employer:
Occupation:
Receipt For: 2013
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 2454.02
Date of Receipt: 01 / 13 / 2014
Transaction ID : SA12.36606
Amount of Each Receipt this Period: 11.41
JFC TRANSFER: DONORS PREVIOUSLY DISCLOSED

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For:
☐ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date:
Date of Receipt: / /
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) 2454.02

TOTAL This Period (last page this line number only) 2454.02

14020273465

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

A.
Full Name (Last, First, Middle Initial): MARK FULLER
Mailing Address: 51 WATER STREET
City: WATERTOWN State: MA Zip Code: 02472
FEC ID number of contributing federal political committee: C
Name of Employer: GOMEZ FOR SENATE
Occupation: FINANCE
Receipt For: 2013
☐ Primary ☐ General
☒ Other (specify) Special-General
Election Cycle-to-Date: 5000.00

Date of Receipt: 03 / 31 / 2014
Transaction ID : SA15.36585
Amount of Each Receipt this Period: 5000.00
PRIOR PERIOD VOID 7/15/2013: OVER PAYMENT

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For:
☐ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date:

Date of Receipt: / /
Amount of Each Receipt this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For:
☐ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date:

Date of Receipt: / /
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) 5000.00

TOTAL This Period (last page this line number only) 5000.00

14020273466

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

A. Full Name (Last, First, Middle Initial)
CHAIN BRIDGE BANK

Mailing Address 1445-A LAUGHLIN AVE

City: MCLEAN State: VA Zip Code: 22101

Purpose of Disbursement: BANK FEE

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 01 / 13 / 2014

Amount of Each Disbursement this Period: 15.00

Transaction ID : SB17.36595

B. Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City: TYSONS CORNER State: VA Zip Code: 22182

Purpose of Disbursement: MERCHANT FEES

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 01 / 03 / 2014

Amount of Each Disbursement this Period: 114.38

Transaction ID : SB17.36598

C. Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 1593 SPRING HILL ROAD
SUITE 400

City: TYSONS CORNER State: VA Zip Code: 22182

Purpose of Disbursement: COMPLIANCE CONSULTING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 130.24

Transaction ID : SB17.36599

SUBTOTAL of Disbursements This Page (optional) 259.62

TOTAL This Period (last page this line number only) .....

14020273467

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

A. Full Name (Last, First, Middle Initial): CMDI
Mailing Address: 1593 SPRING HILL ROAD, SUITE 400
City: TYSONS CORNER State: VA Zip Code: 22182
Purpose of Disbursement: MERCHANT FEES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 03 / 03 / 2014
Amount of Each Disbursement this Period: 55.00
Transaction ID : SB17.36600

B. Full Name (Last, First, Middle Initial): CMDI
Mailing Address: 1593 SPRING HILL ROAD, SUITE 400
City: TYSONS CORNER State: VA Zip Code: 22182
Purpose of Disbursement: COMPLIANCE CONSULTING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 03 / 13 / 2014
Amount of Each Disbursement this Period: 5200.00
Transaction ID : SB17.36601

C. Full Name (Last, First, Middle Initial): CMDI
Mailing Address: 1593 SPRING HILL ROAD, SUITE 400
City: TYSONS CORNER State: VA Zip Code: 22182
Purpose of Disbursement: COMPLIANCE CONSULTING
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 03 / 18 / 2014
Amount of Each Disbursement this Period: 1250.00
Transaction ID : SB17.36602

SUBTOTAL of Disbursements This Page (optional) 6505.00

TOTAL This Period (last page this line number only) .....

14020273468

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

A. Full Name (Last, First, Middle Initial): CONNOLLY PRINTING
Mailing Address: 17B GILL STREET
City: WOBURN State: MA Zip Code: 01801
Purpose of Disbursement: PRINTING EXPENSE
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 01 / 13 / 2014
Amount of Each Disbursement this Period: 2019.84
Transaction ID : SB17.36597
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): EPAY BUSINESS SOLUTIONS INC
Mailing Address: 19 MIDSTATE DR
City: AUBURN State: MA Zip Code: 01501
Purpose of Disbursement: PAYROLL SERVICES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 02 / 18 / 2014
Amount of Each Disbursement this Period: 62.50
Transaction ID : SB17.36603

C. Full Name (Last, First, Middle Initial): GOOGLE INC.
Mailing Address: 1600 AMPHITHEATRE PKWY
City: MOUNTAIN VIEW State: CA Zip Code: 94043
Purpose of Disbursement: EMAIL SERVICES
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 01 / 31 / 2014
Amount of Each Disbursement this Period: 265.00
Transaction ID : SB17.36590

SUBTOTAL of Disbursements This Page (optional) 327.50

TOTAL This Period (last page this line number only) .....

14020273469

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

A. Full Name (Last, First, Middle Initial)
GOOGLE INC.

Mailing Address 1600 AMPHITHEATRE PKWY

City: MOUNTAIN VIEW State: CA Zip Code: 94043

Purpose of Disbursement: EMAIL SERVICES

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 02 / 28 / 2014

Amount of Each Disbursement this Period: 265.00

Transaction ID : SB17.36591

B. Full Name (Last, First, Middle Initial)
GOOGLE INC.

Mailing Address 1600 AMPHITHEATRE PKWY

City: MOUNTAIN VIEW State: CA Zip Code: 94043

Purpose of Disbursement: EMAIL SERVICES

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 03 / 31 / 2014

Amount of Each Disbursement this Period: 255.53

Transaction ID : SB17.36592

C. Full Name (Last, First, Middle Initial)
RED CURVE SOLUTIONS

Mailing Address 138 CONANT STREET

City: BEVERLY State: MA Zip Code: 01915

Purpose of Disbursement: COMPLIANCE CONSULTING

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)

Date of Disbursement: 03 / 03 / 2014

Amount of Each Disbursement this Period: 2516.30

Transaction ID : SB17.36604

SUBTOTAL of Disbursements This Page (optional) 3036.83

TOTAL This Period (last page this line number only) .....

14020273470

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

A.
Full Name (Last, First, Middle Initial): BRAD WILLIAMS
Mailing Address: 29 FURBUSH ROAD
City: WEST ROXBURY State: MA Zip Code: 02132
Purpose of Disbursement: PRINTING EXPENSE REIMBURSEMENT: SEE MEMO ENTRY
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2013 [ ] Primary [X] General [ ] Other (specify)
Date of Disbursement: 03 / 03 / 2014
Amount of Each Disbursement this Period: 2019.84
Transaction ID : SB17.36594

B.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City: State: Zip Code:
Purpose of Disbursement:
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: [ ] Primary [ ] General [ ] Other (specify)
Date of Disbursement: M M / D D / Y Y Y Y
Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) 2019.84

TOTAL This Period (last page this line number only) 12148.79

14020273471

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)
☐ 17 ☐ 18 ☒ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

A. Full Name (Last, First, Middle Initial)
GABRIEL GOMEZ

Mailing Address 59 HIGHLAND AVENUE

City: COHASSET State: MA Zip Code: 02025

Purpose of Disbursement: CANDIDATE LOAN REPAYMENT

Candidate Name

Category/Type

Office Sought: ☐ House ☒ Senate ☐ President
State: MA District: 00

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) Special-Primary

Date of Disbursement: 01 / 13 / 2014

Amount of Each Disbursement this Period: 147000.00

Transaction ID : SB19A.36610

B. Full Name (Last, First, Middle Initial)
GABRIEL GOMEZ

Mailing Address 59 HIGHLAND AVENUE

City: COHASSET State: MA Zip Code: 02025

Purpose of Disbursement: CANDIDATE LOAN REPAYMENT

Candidate Name

Category/Type

Office Sought: ☐ House ☒ Senate ☐ President
State: MA District: 00

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) Special-General

Date of Disbursement: 01 / 13 / 2014

Amount of Each Disbursement this Period: 53000.00

Transaction ID : SB19A.36611

C. Full Name (Last, First, Middle Initial)
GABRIEL GOMEZ

Mailing Address 59 HIGHLAND AVENUE

City: COHASSET State: MA Zip Code: 02025

Purpose of Disbursement: CANDIDATE LOAN REPAYMENT

Candidate Name

Category/Type

Office Sought: ☐ House ☒ Senate ☐ President
State: MA District: 00

Disbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) Special-General

Date of Disbursement: 03 / 06 / 2014

Amount of Each Disbursement this Period: 35000.00

Transaction ID : SB19A.36612

SUBTOTAL of Disbursements This Page (optional) 235000.00

TOTAL This Period (last page this line number only) 235000.00

14020273472

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

Transaction ID : SC/10.6654

LOAN SOURCE Full Name (Last, First, Middle Initial) ***[PERSONAL FUNDS]***
GABRIEL GOMEZ

Mailing Address
59 HIGHLAND AVENUE

Election: 2013
[ ] Primary
[ ] General
[X] Other (specify) ▼
Special-Primary

City	State	ZIP Code
COHASSET	MA	02025

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
230000.00	179900.00	50100.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 02 M / D 13 D / Y 2013 Y	M M / D D / Y 12/31/2013 Y	0.00 % (apr)	[ ] Yes [X] No

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

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

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

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

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

SUBTOTALS This Period This Page (optional) ▶ 50100.00

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.

14020273473

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one)
- [X] 13a
- [ ] 13b

NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

Transaction ID : SC/10.6655

LOAN SOURCE Full Name (Last, First, Middle Initial) ***[PERSONAL FUNDS]***
GABRIEL GOMEZ

Mailing Address
59 HIGHLAND AVENUE

City: COHASSET
State: MA
ZIP Code: 02025

Election: 2013
- [ ] Primary
- [ ] General
- [X] Other (specify) ▼ Special-Primary

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
150000.00	0.00	150000.00

TERMS

Date Incurred (MM / DD / YYYY)	Date Due (MM / DD / YYYY)	Interest Rate	Secured:
03 / 28 / 2013	12/31/2013	0.00 % (apr)	[ ] Yes [X] 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)... ▶ 150000.00

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.

14020273474

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

Transaction ID : SC/10.6656

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]*
GABRIEL GOMEZ

Mailing Address
59 HIGHLAND AVENUE

Election: 2013
[ ] Primary
[ ] General
[X] Other (specify) ▼
Special-General

City	State	ZIP Code
COHASSET	MA	02025

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
150000.00	88000.00	62000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 10 / Y 2013	M M / D D / Y 12/31/2013	0.00 % (apr)	[ ] Yes [X] 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)... ▶ 62000.00

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.

14020273475

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER: (check only one) [X] 13a [ ] 13b

NAME OF COMMITTEE (In Full)
GABRIEL GOMEZ FOR SENATE

Transaction ID : SC/10.20436

LOAN SOURCE Full Name (Last, First, Middle Initial) ***[PERSONAL FUNDS]***
GABRIEL GOMEZ

Election: 2013
[X] Primary
[ ] General
[ ] Other (specify) ▼

Mailing Address
59 HIGHLAND AVENUE

City	State	ZIP Code
COHASSET	MA	02025

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
300000.00	0.00	300000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
04 / 18 / 2013	/ /	0.00 % (apr)	[ ] Yes [X] 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)... ▶ 300000.00

TOTALS This Period (last page in this line only)... ▶ 562100.00

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

14020273476

Post Office

FOR INSPECTION

Post Office

FedEx Express

U.S. SENATE
TRACKING NUMBER
13-093336

FedEx Ship Manager - Print Your Label(s)

Gomez
c/o Red Curve Solutions
138 Conant Street

Beverly, MA 019

Origin ID: MXGA

FedEx Express

Ship Date: 15APR14
ActWgt: 0.5 LB
CAD: 105653717/INET3490

Delivery Address Bar Code

Ref # Gomez
Invoice #
PO #
Dept #

SHIP TO: (202) 224-8322 BILL SENDER

Senate Office of Public Records
Senate Office of Public Records
232 HART SENATE OFFICE BUILDING

WASHINGTON, DC 20510

WED - 16 APR 10:30A
PRIORITY OVERNIGHT

TRK# 7985 4964 8997
0201

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2. Fold the printed page along the horizo

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NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____ Date of Receipt

USPS FIRST CLASS MAIL _____ 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	4/15/14	☐
UPS	_____	☐
DHL	_____	☐
AIRBORNE EXPRESS	_____	☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____ Date of Receipt

POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX _____ Date of Receipt

OTHER _____ Date of Receipt or Postmark

PREPARER DH DATE PREPARED 4-18-14

14020273478

SEN PATCH

1402027347 9

SEN PATCH