FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY
16 OCT 19
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) ▼ Check if different than previously reported. (ACC)

C/O RED CURVE SOLUTIONS
138 CONANT STREET, 2ND FLOOR

CITY ▲	STATE ▲	ZIP CODE ▲
BEVERLY	MA	01915 -

SECRETARY OF THE SENATE 16 OCT 19 AM 11:26

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

3. IS THIS REPORT [x] 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)
- [x] 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 in the State of

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

[ ] General (30G) [ ] Runoff (30R) [ ] Special (30S)

Election on M M / D D / Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2016 through 09 / 30 / 2016

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. ,* Bradley T. Crate Date 10 / 14 / 2016

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							

FEC FORM 3
(Revised 05/2016)

201610210200512579

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
GABRIEL GOMEZ FOR SENATE

Report Covering the Period: From: 07 / 01 / 2016 To: 09 / 30 / 2016

	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	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))..	0.00	3635748.39
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)..	0.00	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))...	0.00	3772887.93
8. Cash on Hand at Close of Reporting Period (from Line 27)...	41758.07	
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

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DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

GABRIEL GOMEZ FOR SENATE

Report Covering the Period: From: 07 / 01 / 2016 To: 09 / 30 / 2016

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	2701128.62
(ii) Unitemized	0.00	721019.77
(iii) TOTAL of contributions from individuals ▶	0.00	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))...	0.00	3648248.39
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES..	0.00	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.)	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	4720352.76

201610210200512581

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	0.00	3772905.93
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	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) ▶	0.00	3785405.93

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	41758.07
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	0.00
25. SUBTOTAL (add Line 23 and Line 24)...	41758.07
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)...	41758.07

2016102100051258 2

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)
GOMEZ, GABRIEL,

[ ] Memo Item

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

Mailing Address
59 HIGHLAND AVENUE

City	State	ZIP Code
COHASSET	MA	02025

[x] Personal Funds of the Candidate

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 (If none, enter 0)	Secured:
M02M	D13D 2013	M	Y12/31/2013Y	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)... ▶	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.

2016102005125583

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)
GOMEZ, GABRIEL,

[ ] Memo Item

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

Mailing Address
59 HIGHLAND AVENUE

City	State	ZIP Code
COHASSET	MA	02025

[x] Personal Funds of the Candidate

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

TERMS

Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
M 03 M / D 28 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)... ▶	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.

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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)
GOMEZ, GABRIEL,

[ ] Memo Item

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

Mailing Address
59 HIGHLAND AVENUE

City	State	ZIP Code
COHASSET	MA	02025

[x] Personal Funds of the Candidate

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 (If none, enter 0)	Secured:
M04M	D10D 2013 M	Y12/31/2013Y	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) ... ▶ 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.

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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)
GOMEZ, GABRIEL,

[ ] Memo Item

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

Mailing Address
59 HIGHLAND AVENUE

City	State	ZIP Code
COHASSET	MA	02025

[x] Personal Funds of the Candidate

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

TERMS Date Incurred: M 04 M / D 18 D / Y 2013 Y

Date Due: M M / D D / Y 12/31/13 Y

Interest Rate (If none, enter 0): 0.00 % (apr)

Secured: [ ] 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)... ▶ 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.

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BEVERLY, MA 01915
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Page 1 of 1

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JULIE E. ADAMS
SECRETARY

DANA K. MACCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232

WASHINGTON, DC 20510-7116

PHONE(202) 224-0322

United States Senate

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