

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE

14 DEC -4 PM 3:13

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

BRIAN HERR FOR SENATE

ADDRESS (number and street)

138 CONANT STREET

C/O RED CURVE SOLUTIONS

Check if different than previously reported. (ACC)

BEVERLY

MA

01915

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00556324

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

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 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 MA

5. Covering Period

MM/DD/YYYY 10/16/2014

through

MM/DD/YYYY 11/24/2014

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

MM/DD/YYYY 12/01/2014

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)

14021333597

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 23

Write or Type Committee Name

BRIAN HERR FOR SENATE

Report Covering the Period: From:

MM / DD / YYYY
10 / 16 / 2014

To:

MM / DD / YYYY
11 / 24 / 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)) ...	14817.00	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)) ...	14817.00	115806.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ...	32789.77	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)) ...	32789.77	116570.00
8. Cash on Hand at Close of Reporting Period (from Line 27) ...	2322.00	
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) ...	3100.00	

For further information contact:

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

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

1402133598

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

BRIAN HERR FOR SENATE

Report Covering the Period: From: MM / DD / YYYY 10 / 16 / 2014 To: MM / DD / YYYY 11 / 24 / 2014

I. RECEIPTS

COLUMN A
Total this Period

COLUMN B
Election Cycle Total as of

COLUMN C
Total for

MM / DD / YYYY 11 / 04 / 2014
(date of general election)

MM / DD / YYYY 11 / 05 / 2014
(date after general election)

through

MM / DD / YYYY 11 / 24 / 2014
(last day of reporting period)

11. CONTRIBUTIONS

(other than loans) FROM:

- (a) Individuals/Persons Other than Political Committees
(i) Itemized (use Schedule A)

7707.00

78104.92

0.00

(ii) Unitemized

5610.00

32802.00

0.00

(iii) Total of contributions from individuals

13317.00

110906.92

0.00

(b) Political Party Committees

0.00

0.00

0.00

(c) Other Political Committees

1500.00

4650.00

50.00

1402133599

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	250.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
14817.00	115806.92	50.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	3100.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	3100.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
14817.00	118906.92	50.00

1402133600

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

BRIAN HERR FOR SENATE

Report Covering the Period: From:

10 / 16 / 2014

To:

11 / 24 / 2014

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
32789.77	116570.00	64.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

1402133601

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 23

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(c) Other Political Committees (such as PACs)		
0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))		
0.00	0.00	0.00
21. OTHER DISBURSEMENTS		
0.00	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)		
32789.77	116570.00	64.92

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

14817.00	115806.92	50.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

32789.77	116570.00	64.92
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	20294.77
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)...	14817.00
25. SUBTOTAL (add Line 23 and Line 24)...	35111.77
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	32789.77
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	2322.00

14021335602

**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)		PAGE 7 OF 23	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 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)
BRIAN HERR FOR SENATE

A. Full Name (Last, First, Middle Initial)
MR. CHARLES BAKER SR.

Mailing Address **865 CENTRAL AVE**
UNIT E-204

City **NEEDHAM** State **MA** Zip Code **02492**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : **SA11AI.6109**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
NELSON BALL

Mailing Address **7 ADAMS STREET**

City **WESTBORO** State **MA** Zip Code **01581**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **FINANCE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : **SA11AI.5862**

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
STEPHANIE BLUMENTHAL

Mailing Address **6 PHEASANT HOLLOW ROAD**

City **NATICK** State **MA** Zip Code **01760**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BNI** Occupation **OFFICE MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **502.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y Y Y
11 / 04 / 2014

Transaction ID : **SA11AI.6091**

Amount of Each Receipt this Period
152.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1652.00

1402133503

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 OF 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

Full Name (Last, First, Middle Initial)

KAREN CALTON

A.

Mailing Address 120 GARDEN ST

City State Zip Code
NEEDHAM MA 02492

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST. JOSEPH PARISH DEVELOPMENT DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM / DD / YYYY
10 / 28 / 2014

Transaction ID : SA11AI.6106

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MR. DAVID A CAPOBIANCO

B.

Mailing Address 205 NEWBURY ST

City State Zip Code
FRAMINGHAM MA 01701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ATLANTIC MANAGEMENT CORPORATION REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

MM / DD / YYYY
10 / 22 / 2014

Transaction ID : SA11AI.6097

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JOHN COUTINHO

C.

Mailing Address 1 DAVID JOSEPH RD

City State Zip Code
HOPKINTON MA 01748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MEDTECHNA ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
302.00

Date of Receipt

MM / DD / YYYY
10 / 30 / 2014

Transaction ID : SA11AI.6035

Amount of Each Receipt this Period

52.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

552.00

1402133604

**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)	PAGE 9 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

A. Full Name (Last, First, Middle Initial)
MS. JANICE CUSHING

Mailing Address **17 CHADBOURNE ROAD**

City LEXINGTON	State MA	Zip Code 02421
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FEC ID number of contributing federal political committee. **C**

Name of Employer CUSHING AND DOLAN	Occupation SECRETARY
--	--------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : **SA11AI.6104**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
GREG M DEVINE

Mailing Address **10 PILGRIM RD**

City WELLESLEY HILLS	State MA	Zip Code 02481
--------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer GOLDMAN SACHS	Occupation VICE PRESIDENT
--	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2014

Transaction ID : **SA11AI.6102**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
M SUSAN EARLE

Mailing Address **18 FRESH RIVER AVENUE**

City HINGHAM	State MA	Zip Code 02043
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer PUBLIC CONSULTING GROUP	Occupation BUSINESS ANALYST
--	---------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 26 / 2014

Transaction ID : **SA11AI.6066**

Amount of Each Receipt this Period
100.00

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

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

600.00

1402133605

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 10 OF 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

A. Full Name (Last, First, Middle Initial)
STEPHEN FURLONG

Mailing Address **8 CANTERBURY LANE**

City **HOPKINTON** State **MA** Zip Code **01748**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOLOGIC, INC** Occupation **SVP FINANCE AND SALES ADMINISTRATIO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **402.00**

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : **SA11AI.6011**

Amount of Each Receipt this Period
52.00

B. Full Name (Last, First, Middle Initial)
ROBERTA GAINSBORO

Mailing Address **20 HALE DRIVE**

City **DEDHAM** State **MA** Zip Code **02026**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DEDHAM HEALTH ATHLETIC** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 25 / 2014

Transaction ID : **SA11AI.6111**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
KEVIN GIBLIN

Mailing Address **259 TURNPIKE ROAD, SUITE 110**

City **SOUTHBOROUGH** State **MA** Zip Code **01772**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BRENDON HOMES, INC.** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : **SA11AI.6112**

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1052.00

1402133606

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 11 OF 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

A. Full Name (Last, First, Middle Initial)
STEVEN GLOVSKY

Mailing Address **36 SHAW DRIVE**

City **WAYLAND** State **MA** Zip Code **01778**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : **SA11AI.6100**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOHN GRAY

Mailing Address **2 LYN PATH**

City **HOPKINTON** State **MA** Zip Code **01748**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PWB, INC** Occupation **BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : **SA11AI.6113**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. TERRY L HENDRIX

Mailing Address **20 RAMBLEWOOD DRIVE**

City **ASHLAND** State **MA** Zip Code **01721**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : **SA11AI.6069**

Amount of Each Receipt this Period
100.00

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

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

850.00

1402133607

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 12 OF 23
(check only one)
 11a
 11b
 11c
 11d
 12
 13a
 13b
 14
 15

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

A. Full Name (Last, First, Middle Initial)
MARY JO HOGAN

Mailing Address **228 FOX HILL ST**

City **WESTWOOD** State **MA** Zip Code **02090**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TOWN OF WESTWOOD** Occupation **WESTWOOD HISTORICAL COMMISSION**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **295.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2014

Transaction ID : **SA11AI.6108**

Amount of Each Receipt this Period
295.00

B. Full Name (Last, First, Middle Initial)
SIOBHAN KOBAL

Mailing Address **1530 DRAKE DR**

City **ERIE** State **PA** Zip Code **16505**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ALLEGHANY HEALTH NETWORK** Occupation **NURSE PRACTITIONER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2014

Transaction ID : **SA11AI.6075**

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
STEPHEN METZ

Mailing Address **171 COVENTRY LANE**

City **LONGMEADOW** State **MA** Zip Code **01106**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **202.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : **SA11AI.6016**

Amount of Each Receipt this Period
52.00

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

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

447.00

14021335608

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 13 OF 23
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

A. Full Name (Last, First, Middle Initial)
MS. AMY M PORTER

Mailing Address **228 ROLLING MEADOW DR**

City **HOLLISTON** State **MA** Zip Code **01746**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TOWN OF HOLLISTON** Occupation **ASSISTANT LIBRARIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2014

Transaction ID : **SA11AI.6099**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
NANCY QUIMBY

Mailing Address **24 WAYSIDE ROAD**

City **WESTBOROUGH** State **MA** Zip Code **01581**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **302.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : **SA11AI.6017**

Amount of Each Receipt this Period
52.00

C. Full Name (Last, First, Middle Initial)
WILLIAM RYAN

Mailing Address **93 STONY BROOK ROAD**

City **WESTFORD** State **MA** Zip Code **01886**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CAMBRIDGE ISOTOPE LAB** Occupation **SCIENTIST**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **202.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : **SA11AI.6034**

Amount of Each Receipt this Period
52.00

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

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

354.00

1402133609

**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)	PAGE 14 OF 23
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

A. Full Name (Last, First, Middle Initial)
MICHAEL SHUCKEROW

Mailing Address **3 OAKDALE AVE**

City **WELLESLEY** State **MA** Zip Code **02482**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REALTY CAPITAL** Occupation **CCO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
10 / 24 / 2014

Transaction ID : **SA11AI.5858**

Amount of Each Receipt this Period
1200.00

B. Full Name (Last, First, Middle Initial)
JAY WILLIAMS Jr.

Mailing Address **19 SHAW DRIVE**

City **WAYLAND** State **MA** Zip Code **01778**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BROADCASTING UNLIMITED ONC** Occupation **CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : **SA11AI.5864**

Amount of Each Receipt this Period
1000.00

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
 M M M / D D D / Y Y Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2200.00

7707.00

1402133610

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 15 OF 23
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/>

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

A. Full Name (Last, First, Middle Initial)
ASHLAND REPUBLICAN TOWN COMMITTEE

Mailing Address **PO BOX 221**

City **ASHLAND** State **MA** Zip Code **01721**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : **SA11C.5913**

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
SUDBURY REPUBLICAN TOWN COMMITTEE

Mailing Address **51 WITHERELL RIVE**

City **SUDBURY** State **MA** Zip Code **01776**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : **SA11C.5923**

Amount of Each Receipt this Period
250.00

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
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

750.00

750.00

1402133611

**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)
BRIAN HERR FOR SENATE

A. BOSTON HERALD

Full Name (Last, First, Middle Initial)
Mailing Address 70 FARGO ST

City BOSTON State MA Zip Code 02210

Purpose of Disbursement PLACED MEDIA

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 30 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.5873

Category/Type

B. NATE BOUDREAU

Full Name (Last, First, Middle Initial)
Mailing Address 41 KORSHOLM AVENUE

City GARDNER State MA Zip Code 01440

Purpose of Disbursement FIELD CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 03 / 2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.5897

Category/Type

C. CBS RADIO

Full Name (Last, First, Middle Initial)
Mailing Address 40W 57TH STREET, 10TH FLOOR

City NEW YORK State NY Zip Code 10019

Purpose of Disbursement PLACED MEDIA

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2014

Amount of Each Disbursement this Period: 600.00

Transaction ID : SB17.5875

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 3100.00

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

1402133612

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

Full Name (Last, First, Middle Initial)
A. ENTERCOM COMMUNICATIONS CORP

Date of Disbursement

M M M	D D D	Y Y Y Y Y Y Y Y
10	24	2014

Mailing Address 20 GUEST STREET

Amount of Each Disbursement this Period

3000.00

City State Zip Code
BOSTON MA 02135

Purpose of Disbursement
PLACED MEDIA

--

Transaction ID : SB17.5890

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)
B. IHEART MEDIA

Date of Disbursement

M M M	D D D	Y Y Y Y Y Y Y Y
10	17	2014

Mailing Address 20880 STONE OAK PARKWAY

Amount of Each Disbursement this Period

3000.00

City State Zip Code
SAN ANTONIO TX 78258

Purpose of Disbursement
PLACED MEDIA

--

Transaction ID : SB17.5892

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)
C. JOHNSTON CONSULTING INC

Date of Disbursement

M M M	D D D	Y Y Y Y Y Y Y Y
10	24	2014

Mailing Address 99 STATE STREET

Amount of Each Disbursement this Period

1000.00

City State Zip Code
MONTPELIER VT 05602

Purpose of Disbursement
FINANCE CONSULTING

--

Transaction ID : SB17.5893

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

7000.00

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

--

14021335613

**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
 PAGE 18 OF 23

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

A. JOHNSTON CONSULTING INC
 Full Name (Last, First, Middle Initial)
 Mailing Address 99 STATE STREET
 City MONTPELIER State VT Zip Code 05602
 Purpose of Disbursement FINANCE CONSULTING
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify)
 State: District:

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014
 Amount of Each Disbursement this Period
 2000.00
 Transaction ID : SB17.5894
 Category/ Type

B. RED CURVE SOLUTIONS
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 CUMMINGS CENTER SUITE 4400
 City BEVERLY State MA Zip Code 01915
 Purpose of Disbursement COMPLIANCE CONSULTING
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify)
 State: District:

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 10 / 17 / 2014
 Amount of Each Disbursement this Period
 71.80
 Transaction ID : SB17.5898
 Category/ Type

C. RED CURVE SOLUTIONS
 Full Name (Last, First, Middle Initial)
 Mailing Address 500 CUMMINGS CENTER SUITE 4400
 City BEVERLY State MA Zip Code 01915
 Purpose of Disbursement COMPLIANCE CONSULTING
 Candidate Name
 Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify)
 State: District:

Date of Disbursement
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014
 Amount of Each Disbursement this Period
 5000.00
 Transaction ID : SB17.5899
 Category/ Type

SUBTOTAL of Disbursements This Page (optional).....
TOTAL This Period (last page this line number only).....

7071.80

14021333614

**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)
BRIAN HERR FOR SENATE

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

Mailing Address 500 CUMMINGS CENTER
SUITE 4400

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 28 / 2014

Amount of Each Disbursement this Period
55.00

Transaction ID : SB17.5900

Category/Type

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

Mailing Address 500 CUMMINGS CENTER
SUITE 4400

City BEVERLY State MA Zip Code 01915

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
10 / 30 / 2014

Amount of Each Disbursement this Period
196.60

Transaction ID : SB17.5901

Category/Type

Full Name (Last, First, Middle Initial)
C. MATT TALANCY

Mailing Address 445 MALDEN ST

City HOLDEN State MA Zip Code 01520

Purpose of Disbursement
FIELD CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
11 / 03 / 2014

Amount of Each Disbursement this Period
3000.00

Transaction ID : SB17.5895

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 3251.60

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

1402133615

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: PAGE 20 OF 23
(check only one)
 17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

Full Name (Last, First, Middle Initial)
A. WBOQ/NORTHSHORE 104.9

Mailing Address **8 ENON STREET**

City **BEVERLY** State **MA** Zip Code **01915**

Purpose of Disbursement
PLACED MEDIA

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 27 / 2014

Amount of Each Disbursement this Period
1121.25

Transaction ID : **SB17.5903**

Category/
Type

Full Name (Last, First, Middle Initial)
B. WCRN-AM830/CARTER BROADCASTING

Mailing Address **82 FRANKLIN STREET**

City **WORCESTER** State **MA** Zip Code **01608**

Purpose of Disbursement
PLACED MEDIA

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 23 / 2014

Amount of Each Disbursement this Period
2170.00

Transaction ID : **SB17.5905**

Category/
Type

Full Name (Last, First, Middle Initial)
C. WSAR RADIO

Mailing Address **ONE HOME STREET**

City **SOMERSET** State **MA** Zip Code **02725**

Purpose of Disbursement
PLACED MEDIA

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
10 / 29 / 2014

Amount of Each Disbursement this Period
835.00

Transaction ID : **SB17.5907**

Category/
Type

SUBTOTAL of Disbursements This Page (optional).....

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

4126.25

14021335616

**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)	PAGE 21 OF 23
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

A. WYLIE STRATEGY GROUP

Full Name (Last, First, Middle Initial)
Mailing Address 7 HOLLOW TREE RD

City NORWALK State CT Zip Code 06854

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 23 / 2014

Amount of Each Disbursement this Period: 5000.00

Transaction ID : SB17.5908

B. WYLIE STRATEGY GROUP

Full Name (Last, First, Middle Initial)
Mailing Address 7 HOLLOW TREE RD

City NORWALK State CT Zip Code 06854

Purpose of Disbursement STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 11 / 03 / 2014

Amount of Each Disbursement this Period: 3000.00

Transaction ID : SB17.5909

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) 8000.00

TOTAL This Period (last page this line number only) 32549.65

1402133617

SCHEDULE C (FEC Form 3)
LOANS

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

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

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

LOAN SOURCE Full Name (Last, First, Middle Initial) **BRIAN HERR** [PERSONAL FUNDS] Election: 2014
 Primary
 General
 Other (specify) ▼

Mailing Address
138 CONANT STREET

City State ZIP Code
BEVERLY MA 01915

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:
 M 02 / D 10 / Y 2014 M M / D D / Y 12/31/2014 0.00 % (apr) Yes 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)..... ▶ 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.

14021333618

SCHEDULE C (FEC Form 3)
LOANS

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

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

NAME OF COMMITTEE (In Full)
BRIAN HERR FOR SENATE

Transaction ID : SC/10.4410

LOAN SOURCE Full Name (Last, First, Middle Initial)

BRIAN HERR

[PERSONAL FUNDS]

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address
138 CONANT STREET

City State ZIP Code
BEVERLY MA 01915

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

TERMS

Date Incurred: M 03 / D 07 / Y 2014
Date Due: M M / D D / Y 12/31/2014
Interest Rate: 0.00 % (apr)
Secured: Yes 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)..... ▶

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.

14021333619



12/1/2014

From: (617) 303-6800
Brad Grate
Red Curve Solutions
500 Cummings Center
Suite 4400
Beverly, MA 01915

Origin ID: MXGA



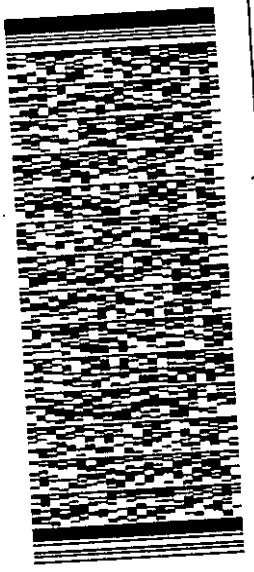
J142140223030W

BILL SENDER

SHIP TO: (202) 224-0322
Senate Office of Public Records
Senate Office of Public Records
232 HART SENATE OFFICE BUILDING
WASHINGTON, DC 20510

Screened by
Senate Post Offices

DEC 02 2014



FedEx Ship Manager - Print Your Label(s)

Ship Date: 01DEC14
ActWgt: 0.5 LB
CAD: 105653717/NET3550

Delivery Address Bar Code



Ref #
Invoice #
PO #
Dept #

Screened by
Senate Post Offices

DEC 02 2014

7720 4189 0638

TUE - 02 DEC AA
STANDARD OVERNIGHT

EP YKNA

20510
DC-US
IAD



U. S. SENATE
TRACKING NUMBER



13-056650

Insert shipping document here.

729
FZ
0638
12.02

INSPECTION

United States
Post Office

02955512071

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	12/1/14	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

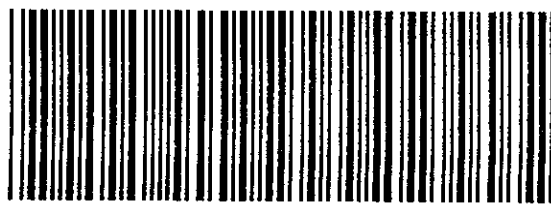
POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

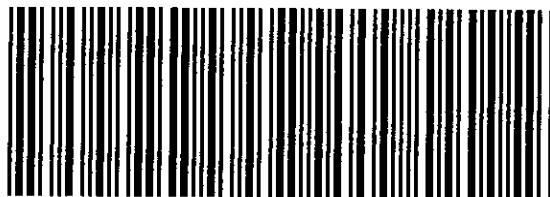
OTHER _____
Date of Receipt or Postmark

PREPARER MN DATE PREPARED 12/4/14

14021333621



SEN PATCH



SEN PATCH

14021335622