

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

SECRETARY OF THE SENATE

14 AUG 28 PM 1:22

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

09

09

2014

in the State of

MA

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



General (30G)



Runoff (30R)



Special (30S)

Election on

in the State of

5. Covering Period

07

01

2014

through

08

20

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

Handwritten signature of Bradley T. Crate

Date

08

25

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)

14020683656

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

BRIAN HERR FOR SENATE

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2014

To:

MM / DD / YYYY
08 / 20 / 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)) ...	5545.00	53351.92
(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)) ...	5545.00	53351.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) ..	9329.70	51454.31
(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)) ...	9329.70	51454.31
8. Cash on Hand at Close of Reporting Period (from Line 27) ...	4997.61	
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

14020683657

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 12

Write or Type Committee Name

BRIAN HERR FOR SENATE

Report Covering the Period: From:

M	M
07	

 /

D	D
01	

 /

Y	Y	Y	Y	Y	Y
2	0	1	4		

 To:

M	M
08	

 /

D	D
20	

 /

Y	Y	Y	Y	Y	Y
2	0	1	4		

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)...	4500.00	41097.92
(ii) Unitemized	1045.00	11804.00
(iii) TOTAL of contributions from individuals .	5545.00	52901.92
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	450.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	5545.00	53351.92
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)...	5545.00	56451.92

14020683658

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES...	9329.70	51454.31
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	0.00	0.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	9329.70	51454.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	8782.31
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	5545.00
25. SUBTOTAL (add Line 23 and Line 24)...	14327.31
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	9329.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	4997.61

14020683659

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

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

FOR LINE NUMBER: PAGE 5 OF 12
(check only one)

<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
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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)
MRS. CAROLINE ALMGREN ELLIS

Mailing Address **PO BOX 368**

City **SIASCONSET** State **MA** Zip Code **02564**

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 **1000.00**

Date of Receipt
07 / 31 / 2014

Transaction ID : **SA11AI.4660**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. LLOYD 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 ATHLETIC COMPLEX** Occupation **DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 04 / 2014

Transaction ID : **SA11AI.4664**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. RICHARD R GREEN

Mailing Address **22 VILLAGE RD**

City **PEPPERELL** State **MA** Zip Code **01463**

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

Name of Employer **1A AUTO INC.** Occupation **BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 12 / 2014

Transaction ID : **SA11AI.4672**

Amount of Each Receipt this Period
500.00

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

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

2000.00

14020683660

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

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

FOR LINE NUMBER: PAGE 6 OF 12
(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)
HANNAH KANE

Mailing Address **32 MAIN CIRCLE**

City **SHREWSBURY** State **MA** Zip Code **01545**

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

Name of Employer **BEATON KANE CONSTRUCTION** Occupation **CO-OWNER, MANAGING PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
08 / 14 / 2014

Transaction ID : **SA11AI.4674**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. FREDERICK MUZI

Mailing Address **10 POWISSET STREET**

City **DOVER** State **MA** Zip Code **02030**

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

Name of Employer **MUZI MOTORS** Occupation **SALESMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
08 / 08 / 2014

Transaction ID : **SA11AI.4666**

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. KURT SARACENO

Mailing Address **30 PLEASANT STREET**

City **DOVER** State **MA** Zip Code **02030**

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

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
07 / 02 / 2014

Transaction ID : **SA11AI.4636**

Amount of Each Receipt this Period
250.00

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

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

1000.00

14020683661

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

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

FOR LINE NUMBER: PAGE 7 OF 12
(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

A. Full Name (Last, First, Middle Initial)
EDITH SNIDER

Mailing Address **11 DUXBURY RD**

City **WELLESLEY** State **MA** Zip Code **02481**

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

Name of Employer **GBCVB** Occupation **VP TECHNOLOGY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
08 / 20 / 2014

Transaction ID : **SA11AI.4677**

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. P. J. TOWNSEND

Mailing Address **34 PROCTOR STREET**

City **MANCHESTER** State **MA** Zip Code **01944**

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
07 / 18 / 2014

Transaction ID : **SA11AI.4640**

Amount of Each Receipt this Period
500.00

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

Amount of Each Receipt this Period

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

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

1500.00

4500.00

14020683662

**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 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

Full Name (Last, First, Middle Initial) A. RED CURVE SOLUTIONS		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address 500 CUMMINGS CENTER SUITE 4400		Amount of Each Disbursement this Period 82.84 Transaction ID : SB17.4685
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SCM ASSOCIATES, INC.		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 1283 MAIN STREET PO BOX 254		Amount of Each Disbursement this Period 756.41 Transaction ID : SB17.4680
City DUBLIN State NH Zip Code 03444	Purpose of Disbursement DIRECT MAIL PRINTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SPECTRUM MARKETING COMPANIES		Date of Disbursement MM / DD / YYYY 08 / 15 / 2014
Mailing Address 95 EDDY ROAD SUITE 101		Amount of Each Disbursement this Period 1714.65 Transaction ID : SB17.4688
City MANCHESTER State NH Zip Code 03102	Purpose of Disbursement DIRECT MAIL PRINTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

2553.90

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

14020683663

**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 9 OF 12
	<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

Full Name (Last, First, Middle Initial) A. MATT TALANCY		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 445 MALDEN ST		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4679
City HOLDEN	State MA	
Zip Code 01520	Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MATT TALANCY		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address 445 MALDEN ST		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.4684
City HOLDEN	State MA	
Zip Code 01520	Purpose of Disbursement COMMUNICATIONS CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. JAKE WARSHAWSKY		Date of Disbursement MM / DD / YYYY 07 / 01 / 2014
Mailing Address 10 MORGAN ST		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.4678
City SOMERVILLE	State MA	
Zip Code 02143	Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3500.00
TOTAL This Period (last page this line number only).....	

14020683664

**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. JAKE WARSHAWSKY

Full Name (Last, First, Middle Initial)

Mailing Address 10 MORGAN ST

City SOMERVILLE State MA Zip Code 02143

Purpose of Disbursement FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 07 / 2014

Amount of Each Disbursement this Period: 1250.00

Transaction ID : SB17.4683

B. WYLIE STRATEGY GROUP

Full Name (Last, First, Middle Initial)

Mailing Address 701 S LEE ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement STRATGEY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY
08 / 07 / 2014

Amount of Each Disbursement this Period: 2000.00

Transaction ID : SB17.4686

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: MM / DD / YYYY

Amount of Each Disbursement this Period:

SUBTOTAL of Disbursements This Page (optional) 3250.00

TOTAL This Period (last page this line number only) 9303.90

14020683665

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 2600.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2600.00
------------------------------------	------------------------------------	--

TERMS

Date Incurred: M 02 / D 10 / 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)...

2600.00

TOTALS This Period (last page in this line) ...

[]

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

14020683666

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)

Transaction ID : SC/10.4410

BRIAN HERR FOR SENATE

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

[PERSONAL FUNDS]

BRIAN HERR

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

500.00

0.00

500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM / DD / YYYY
03 / 07 / 2014

MM / DD / YYYY
07 / 07 / 2014

MM / DD / YYYY
03 / 07 / 2014

MM / DD / YYYY
03 / 07 / 2014

MM / DD / YYYY
03 / 07 / 2014

MM / DD / YYYY
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)...

500.00

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

3100.00

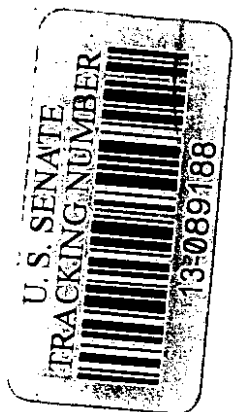
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

14020683667

RT 0
FZ 0

4953
08.26

®
press



Extremely Urgent

8/25/2014

From: (617) 303-6800
Bradley T. Crate
Red Curve Solutions
500 Cummings Center
Suite 4400
BEVERLY, MA 01915

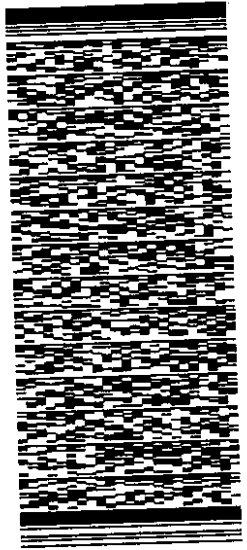
Origin ID: MXGA



SHIP TO: (202) 224-3121

BILL SENDER

Secretary of the Senate
Office of Public Records
232 SENATE HART OFFICE BUILDING
OFFICE OF PUBLIC RECORDS
WASHINGTON, DC 20013



FedEx Ship Manager - Print Your Label(s)

Ship Date: 25AUG14
ActWgt: 0.1 LB
CAD: 105853717IN/E13550

Delivery Address Bar Code

Ref # Shays FEC Forms
Invoice #
PO #
Dept #



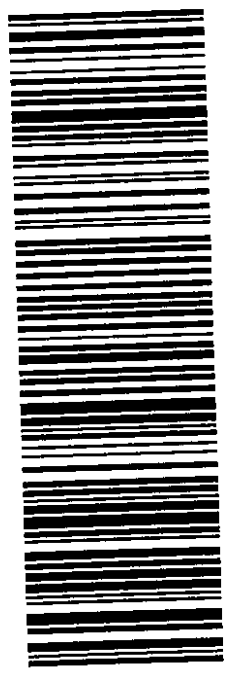
ASMA
AUG 26 2014
Sent by Office Post
AUG 26 2014

TRK# 7709 3299 4953
0201

STANDARD OVERNIGHT

EP WA39A

20013
DC-US
IAD



5ZG1E0F28A09

89958902071

ONS

ily
1e

United States Senate

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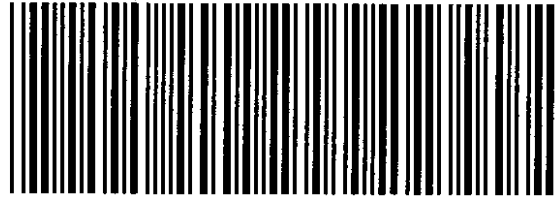
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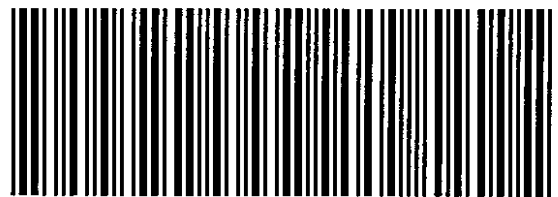
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