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FEC

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		uthorized Con		Offic	ce Use Only
NAME OF     COMMITTEE (in	TYPE OR PRINT	•	xample: If typing, typ	e 12FE4M5	
BRIAN HERR	FOR SENATE				
ADDRESS (number an	d street)	STREET			
▼	2ND FLOOR				
Check if diff than previou reported. (A	ısly   BEVERLY			MA 019	15
2. <b>FEC IDENTIFIC</b>	CATION NUMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C0055632		3. IS THIS REPORT	NEW (N) OF	AMENDED (A)	STATE ▼ DISTRICT  MA  00  00
4. TYPE OF REI	PORT (Choose One)	(h) 40 D DD	• 5		
(a) Quarterly Re	eports:	(b) 12-Day <b>PRI</b>	E-Election Report for	the:	
X April 15	Quarterly Report (Q1)	Ш	Primary (12P)	General (12G)	Runoff (12R)
			Convention (12C)	Special (12S)	
July 15	Quarterly Report (Q2)		M M / D	D / Y Y Y Y	in the
October	15 Quarterly Report (Q3)	Election on			State of
January	31 Year-End Report (YE)	(c) 30-Day <b>POS</b>	ST-Election Report fo	or the:	
			General (30G)	Runoff (30R)	Special (30S)
Termina	tion Report (TER)	Election on		D / Y " Y " Y " Y	in the State of
5. Covering Period	M M / D D /	Y Y 2020 Y	through	M M / D D / Y 31	Y Y Y 2020
I certify that I have e	xamined this Report and to		nowledge and belief	it is true, correct and cor	mplete.
Type or Print Name of	CRATE, BRA	υ <b>ι</b> ΕΥ, Ι, ,			
Signature of Treasure	CRATE, BRADLEY, T, ,		[Electronically Filed]	Date 04 /	10 / Y Y Y Y Y Y 10 10 10 10 10 10 10 10 10 10 10 10 10
NOTE: Submission of	false, erroneous, or incomple	te information may	subject the person sig	gning this Report to the pe	enalties of 52 U.S.C. §30109
Office Use Only					FEC FORM 3 (Revised 05/2016)

### **SUMMARY PAGE**

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
BRIAN HERR FOR SENATE

2020 2020 03 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 115806.92 (other than loans) (from Line 11(e)) .... (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) ..... (c) Net Contributions (other than loans) 0.00 115806.92 (subtract Line 6(b) from Line 6(a)) ...... 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 116570.00 (from Line 17) ..... (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 0.00 116570.00 (subtract Line 7(b) from Line 7(a)) ...... Cash on Hand at Close of 6.61 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 90843.74 Schedule C and/or Schedule D).....

#### For further information contact:

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

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

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 05/2016)

PAGE 3 / 11

Write or Type Committee Name

### **BRIAN HERR FOR SENATE**

01 03 01 2020 31 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11. CONTRIBUTIONS (other than loans) FROM: Individuals/Persons Other Than Political Committees 0.00 78104.92 (i) Itemized (use Schedule A)..... 32802.00 0.00 (ii) Unitemized ..... (iii) TOTAL of contributions 0.00 110906.92 from individuals ..... 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 4650.00 (such as PACs) ..... 0.00 250.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 115806.92 (add Lines 11(a)(iii), (b), (c), and (d)).. 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES ..... 13. LOANS: (a) Made or Guaranteed by the 0.00 3100.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 3100.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 0.00 (Refunds, Rebates, etc.) ..... 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.) ..... 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) 0.00 118906.92 (Carry Total to Line 24, page 4).....

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 05/2016)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	116570.00
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
		0.00	
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
	(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)	0.00	116570.00
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	6.61
24	TOTAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		6.61
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		6.61

## SCHEDULE C (FEC Form 3) **LOANS**

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

**PAGE** FOR LINE NUMBER: (check only one)

5 OF

X	13a
	13b

11

Transaction ID: SC/10.4409 NAME OF COMMITTEE (In Full) BRIAN HERR FOR SENATE LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary HERR, BRIAN, , , General Mailing Address 138 CONANT STREET Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate MA 01915 **BEVERLY** 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: (If none, enter 0) 0.00 <sup>D</sup>10<sup>D</sup> M 02M ž014 Y12/31/2015 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code 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.

# SCHEDULE C (FEC Form 3) **LOANS**

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

PAGE 6 OF FOR LINE NUMBER: (check only one)

**X** 13a 13b

11

NAME OF COMMITTEE (In Full) BRIAN HERR FOR SE			Transa	ction ID : SC/10.4410		
LOAN SOURCE Full Name HERR, BRIAN, , ,	(Last, First, Mic	ddle Initial)	☐ Memo Item	Election: 2014  x Primary  General		
Mailing Address 138 CONANT STREET	Mailing Address 138 CONANT STREET					
City		State MA	ZIP Code	Personal Funds of the Candidate		
BEVERLY Original Amount of Loan		Cumulative Pa		ance Outstanding at Close of This Period		
, , ,	500.00	, ,	0.00	500.00		
TERMS Date Incurred	d	С	ate Due Interest Rat			
M03M / D07D / Y	ž014 <sup>Y</sup>	M M / D D	<sup>/</sup> 12/31/2015 <sup>°</sup>	% (apr) Yes X No		
List All Endorsers or Guar	antors (if any) to	o Loan Source				
1. Full Name (Last, First, M	Middle Initial)		Name of Employer			
Mailing Address			Occupation	Occupation  Amount		
			Amount			
City State ZIP Code			Guaranteed Outstanding:			
2. Full Name (Last, First, M	2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Guaranteed Outstanding:	y y y		
3. Full Name (Last, First, M	iddle Initial)		Name of Employer			
Mailing Address			Occupation			
			Amount			
City	State	ZIP Code	Outstanding:	Guaranteed Outstanding:		
4. Full Name (Last, First, M	iddle Initial)		Name of Employer			
Mailing Address		Occupation				
			Amount	Amount		
City	State	ZIP Code	Guaranteed Outstanding:	7		
			_			
SUBTOTALS This Period This	Page (optional)		······································	500.00		
TOTALS This Period (last page	e in this line only	y)	······	3100.00		
Carry outstanding balance onl	v to LINE 3, Sch	edule D, for this	s line. If no Schedule D, carry for	ward to appropriate line of Summary.		

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 7
FOR LINE NUMBER (check only one)

LINE NUMBER:		
k only one)		9
	×	10

OF

NAME OF COMMITTEE (In Full) **BRIAN HERR FOR SENATE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): REIMBURSEMENT HERR, BRIAN, , , Mailing Address 31 ELIZABETH State Zip Code City **HOPKINTON** MA 01748 Transaction ID: SD10.6139 Outstanding Balance Beginning This Period 120.55 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 120.55 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): JOHNSTON CONSULTING INC FINANCE CONSULTING Mailing Address 99 STATE STREET State Zip Code **MONTPELIER** 05602 VT Outstanding Balance Beginning This Period Transaction ID: SD10.6135 2000.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 2000.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **RED CURVE SOLUTIONS** COMPLIANCE CONSULTING Mailing Address 138 CONANT STREET 2ND FLOOR City State Zip Code MA BEVERLY 01915 Outstanding Balance Beginning This Period Transaction ID: SD10.6134 50000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 50000.00 0.00 1) SUBTOTALS This Period This Page (optional) ..... 52120.55 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

(Use separate schedule(s) for each numbered line)

PAGE OF FOR LIN (check o

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nly one)		9	
	Y	10	

#### NAME OF COMMITTEE (In Full) **BRIAN HERR FOR SENATE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): POSTAGE REIMBURSEMENT **RED CURVE SOLUTIONS** Mailing Address 138 CONANT STREET 2ND FLOOR City State Zip Code **BEVERLY** MA 01915 Transaction ID: SD10.6157 Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 18.72 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **RED CURVE SOLUTIONS COURIER SERVICES** Mailing Address 138 CONANT STREET 2ND FLOOR State Zip Code **BEVERLY** 01915 MA Outstanding Balance Beginning This Period Transaction ID: SD10.6158 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 15.95 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **RED CURVE SOLUTIONS COURIER SERVICES** Mailing Address 138 CONANT STREET 2ND FLOOR City State Zip Code MA BEVERLY 01915 Outstanding Balance Beginning This Period Transaction ID: SD10.6156 15.49 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 15 49 0.00 1) SUBTOTALS This Period This Page (optional) ..... 50.16 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 9 OF
FOR LINE NUMBER:
(check only one)

UMBER: 9

11

#### NAME OF COMMITTEE (In Full) **BRIAN HERR FOR SENATE** A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **COURIER SERVICES RED CURVE SOLUTIONS** Mailing Address 138 CONANT STREET 2ND FLOOR City State Zip Code **BEVERLY** MA 01915 Transaction ID: SD10.6164 Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 15.87 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **RED CURVE SOLUTIONS COURIER SERVICES** Mailing Address 138 CONANT STREET 2ND FLOOR State Zip Code **BEVERLY** 01915 MA Outstanding Balance Beginning This Period Transaction ID: SD10.6166 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 15.57 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **RED CURVE SOLUTIONS COURIER SERVICES** Mailing Address 138 CONANT STREET 2ND FLOOR City State Zip Code MA BEVERLY 01915 Outstanding Balance Beginning This Period Transaction ID: SD10.6169 10.80 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 10.80 0.00 1) SUBTOTALS This Period This Page (optional) ..... 2) TOTALS This Period (last page this line number only) ..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)-----4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

Exc

(Use separate schedule(s) for each

PAGE 10 OF FOR LINE NUMBER: (check only one)

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хс	luding Loans			numbered line)	<b>x</b> 10	
NA	ME OF COMMITTEE (In Full)					
Е	BRIAN HERR FOR S	ENAT	E			
	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor				Nature of Debt (Purpose):	
	RED CURVE SOLUTIONS			COURIER	SERVICES	
	Mailing Address 138 CONANT STREET 2ND FLOOR					
Ī	City	State	Zip Code			
	BEVERLY	MA	01915			
	Outstanding Balance Beginning This Period			Transacti	on ID : SD10.6171	
	20.12					
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
	0.00					
	0.00		0.0		20.12	
Ī	B. Full Name (Last, First, Middle Initial) of Deb	otor or Credito	r	Nature of D	Debt (Purpose):	
	RED CURVE SOLUTIONS				SERVICES	
Ī	Mailing Address 138 CONANT STREET					
ŀ	2ND FLOOR City	State	Zip Code			
	BEVERLY	MA	01915			
	Outstanding Balance Beginning This Period			Transacti	on ID : SD10.6173	
	10.67  Amount Incurred This Period Payment This Period					
				Outstandi	ng Balance at Close of This Period	
	0.00		0.0	00	10.67	
	, , , , ,		7		y y x	
Ī	C. Full Name (Last, First, Middle Initial) of De	btor or Credit	or	Nature of D	Debt (Purpose):	
	RED PRINT STRATEGY				S EXPENSE /	
Ī	Mailing Address 311 S FILLMORE STREET					
ŀ	City	State	Zip Code			
	ARLINGTON	VA	22204			
	Outstanding Balance Beginning This Period			Transact	ion ID : SD10.6141	
	9500.00					
	Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
	0.00		0.0	00	9500.00	
1)	SUBTOTALS This Period This Page (optional)	)		•	9530.79	
	TOTALS This Period (last page this line number only)			-	7	
	· · · ·				7	
	TOTAL OUTSTANDING LOANS from Schedule C (last page only)			_ ;=	7	
4)	ADD 2) and 3) and carry forward to appropri	ate line of Sui	mmary Page (last page or	nly) 🕨 📗		

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 11 OF
FOR LINE NUMBER:
(check only one)

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11

NAME OF COMMITTEE (In Full)

RRIAN HERR FOR SENIATE

BRIAN HERR FOR	SENA	TE		
A. Full Name (Last, First, Middle Initial) of TALANCY, MATT, , ,	Debtor or Cre	editor	Nature of Debt (Purpose): FIELD CONSULTING	
Mailing Address 445 MALDEN ST				
City HOLDEN	State MA	Zip Code 01520		
Outstanding Balance Beginning This Peri		01320	Transaction ID : SD10.6138	
9000.00				
Amount Incurred This Period	_	Payment This Period	Outstanding Balance at Close of This Period	
0.00		0.00	9000.00	
B. Full Name (Last, First, Middle Initial) of I		ditor	Nature of Debt (Purpose):	
WYLIE STRATEGY GROUP	,		STRATEGY CONSULTING	
Mailing Address 7 HOLLOW TREE RD				
City NORWALK	State CT	Zip Code 06854		
Outstanding Balance Beginning This Peri		1 1111	Transaction ID : SD10.6136	
17000.00  Amount Incurred This Period Payment This Period			Transaction is . Ob 10.0130	
			Outstanding Balance at Close of This Period	
0.00		0.00	17000.00	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):	
Mailing Address				
City	State	Zip Code		
Outstanding Balance Beginning This Peri	od			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period	
		7 7 7		
1) SUBTOTALS This Period This Page (option	nal)		26000.00	
2) TOTALS This Period (last page this line no	2) TOTALS This Period (last page this line number only)			
3) TOTAL OUTSTANDING LOANS from Sch	3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)			
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)			90843.74	