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PAGE 1 / 11

FEC FORM 3		ND DI		SEN	/ENTS			Office Use Only
1. NAME OF COMMITTEE (in t		TYPE OR PRI	NT 🔻		mple: If typin the lines.	ig, type	12FE4M5	5
ADDRESS (number and	d street)							
Check if different than previous reported. (AC	sly	BEVERLY						01915
2. FEC IDENTIFIC		IMBER V	CI	TY 🔺			STATE	ZIP CODE
C C00556324			3. IS T REP	'HIS PORT	× NEW (N)	OR	AMENE (A)	DED STATE ▼ DISTRICT
July 15 October January	ports: Quarterly R Quarterly Re 15 Quarterl	eport (Q1) eport (Q2) y Report (Q3) d Report (YE)	Elec (c) 30-D	tion on	Election Repo Primary (12P Convention () 12C) D D D D D D D D D D D D D D D D D D D	General (1 Special (1	2S) in the State of
5. Covering Period	M 04	M / D D 01	/ Y Y Y 2019	Y	through	M Of	6 / D D / 30	Y Y Y Y 2019
I certify that I have ex Type or Print Name o			to the best c RADLEY, T, ,	of my kno	owledge and	belief it is	true, correct and	d complete.
Signature of Treasurer		TE, BRADLEY, T	, , ,		[Electronically	Filed]	Date	/ D D / Y Y Y Y 12 / 2019
	alse, errone	ous, or incomp	lete informatio	on may s	ubject the per	son signin	g this Report to th	ne penalties of 52 U.S.C. §30109.
Office Use Only								FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

		FEC Form 3 (Revised 05/2016)	of Receipts and Disbursements	PAGE 2 / 11
		or Type Committee Name AN HERR FOR SENATE		
R	eport	t Covering the Period: From:	4 / D D / Y Y Y Y 2019 To:	M 06 / D 0 / Y Y Y Y 30 / 2019
			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	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))	0.00	115806.92
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	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))	0.00	116570.00
8.		sh on Hand at Close of porting Period (from Line 27)	6.61	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	90843.74	

For further information contact:

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

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

Γ	FEC Form 3 (Revised 05/2016)	TAILED SUMMARY PAGE of Receipts	PAGE 3 / 11
W	rite or Type Committee Name		
E	BRIAN HERR FOR SENATE		
R	eport Covering the Period: From:	/ D D / Y Y Y Y 01 / 2019 T	o: 06 / 0 / Y Y Y Y 06 2019
	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	78104.92
		0.00	32802.00
	(ii) Unitemized (iii) TOTAL of contributions	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
	from individuals	0.00	110906.92
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	4650.00
	(d) The Candidate	0.00	250.00
	(e) TOTAL CONTRIBUTIONS		
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	115806.92
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)	0.00	118906.92

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FEC Form 3 (Revised 05/2016)

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4 / 11

II. DISBURSEMENTS	DISBURSEMENTS COLUMN A Total This Period			
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(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(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)	0.00	116570.00		

III. CASH SUMMARY

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD	6.61
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)	6.61
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)	6.61

CHEDULE C (FEC Form 3) DANS		Use separate schedule(s) for each category of the Detailed Summary Page	OF 11 X 13a 13b
AME OF COMMITTEE (In Full) BRIAN HERR FOR SENATE		Transaction ID : SC/10.4409	<u> </u>
LOAN SOURCE Full Name (Last, First, HERR, BRIAN, , ,	Middle Initial)	Memo Item Election: 2014	
Mailing Address 138 CONANT STREET		Other (specify)	
City BEVERLY	State MA	ZIP Code 01915 Personal Funds of the C	Candidat
Original Amount of Loan 2600.00	Cumulative Pa	ment To Date Balance Outstanding at Close of T 0.00 2600	
TERMS Date Incurred M02 ^M / P10 ^D / ¥ Ž014 Y	M M / D I	ate Due Interest Rate (If none, enter 0) Secured / Y12/31/2015Y 0.00 % (apr)	
List All Endorsers or Guarantors (if an 1. Full Name (Last, First, Middle Initial)	y) to Loan Source	Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	e ZIP Code	Amount Guaranteed Outstanding:	
UBTOTALS This Period This Page (option	nal)		.00
OTALS This Period (last page in this line		line. If no Schedule D, carry forward to appropriate line of Su	

I

					PAGE 6 OF 11
CHEDULE C (FEC Form 3) OANS				Use separate schedu for each category of Detailed Summary Pa	le(s) the (check only one) × 13a
ME OF COMMITTEE (In Fu RIAN HERR FOR SI	,			Transa	action ID : SC/10.4410
LOAN SOURCE Full Nam HERR, BRIAN, , ,	ie (Last, First, Mic	ddle Initial)		Memo Item	x Primary
Mailing Address 138 CONANT STREET					General Other (specify)
City BEVERLY		State MA	ZIP Code 01915	9	Personal Funds of the Candidat
Original Amount of Loan		Cumulative Pa	ayment To D	Date Ba	Iance Outstanding at Close of This Perio
<u> </u>	500.00			0.00	500.00
TERMS Date Incurre	ed	I	Date Due	Interest Ra (If none, ente	
M03M / D07D / Y	2014	M M / D C		š1/2Ŏ15 [×]	0.00 % (apr) Yes 🗴 No
List All Endorsers or Gua		o Loan Source		Name of Employer	
1. Full Name (Last, First,	Middle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
2. Full Name (Last, First, M	Viddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y y
3. Full Name (Last, First, N	viddle Initial)			Name of Employer	
Mailing Address				Occupation	
City	State	ZIP Code		Amount Guaranteed Outstanding:	y
4. Full Name (Last, First, M	viddle Initial)			Name of Employer	
				Occupation	
Mailing Address				Amount	
Mailing Address City	State	ZIP Code		Guaranteed Outstanding:	y
-				Outstanding:	500.00

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans			(Use separate schedule(s) for each numbered line)	PAGE7OF11FOR LINE NUMBER: (check only one)9X10	
BRIAN HERR FOR S	SENA [®]	TE			
A. Full Name (Last, First, Middle Initial) of D HERR, BRIAN, , ,	ebtor or Cre	ditor	Nature of D REIMBUR	lebt (Purpose): SEMENT	
Mailing Address 31 ELIZABETH					
City HOPKINTON	State MA	Zip Code 01748			
Outstanding Balance Beginning This Period	b		Transacti	on ID : SD10.6139	
120.55					
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00		0.(00	120.55	
B. Full Name (Last, First, Middle Initial) of De JOHNSTON CONSULTING II		lebt (Purpose): CONSULTING			
Mailing Address 99 STATE STREET					
City MONTPELIER	State VT	Zip Code 05602			
Outstanding Balance Beginning This Period	Transactio	on ID : SD10.6135			
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00		0.0	00	2000.00	
C. Full Name (Last, First, Middle Initial) of D RED CURVE SOLUTIONS	C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED CURVE SOLUTIONS				
Mailing Address 138 CONANT STREET 2ND FLOOR					
City	State	Zip Code			
BEVERLY Outstanding Balance Beginning This Period	AM	01915	Transact	ion ID : SD10.6134	
50000.00	1		Tansacı	101110 . 3010.0134	
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00				50000.00	
1) SUBTOTALS This Period This Page (optional	al)		··· •	52120.55	
2) TOTALS This Period (last page this line nur	nber only) ····		···· •		
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last p	bage only)	···· •		
4) ADD 2) and 3) and carry forward to approp	riate line of	Summary Page (last page o		y	

FEC Schedule D (Form 3) (Revised 05/2016)

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full)			(Use separate schedule(s) for each numbered line)	PAGE 8 OF 11 FOR LINE NUMBER: (check only one) 9 X 10
BRIAN HERR FOR S	ENA	TE		
A. Full Name (Last, First, Middle Initial) of De RED CURVE SOLUTIONS	ebtor or Cre	ditor		ebt (Purpose): REIMBURSEMENT
Mailing Address 138 CONANT STREET 2ND FLOOR				
City BEVERLY	State MA	Zip Code 01915		
Outstanding Balance Beginning This Period	l		Transactio	on ID : SD10.6157
18.72				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	18.72
B. Full Name (Last, First, Middle Initial) of De RED CURVE SOLUTIONS		ebt (Purpose): SERVICES		
Mailing Address 138 CONANT STREET 2ND FLOOR				
City BEVERLY	State MA	Zip Code 01915		
Outstanding Balance Beginning This Period 15.95			Transactio	on ID : SD10.6158
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	15.95
C. Full Name (Last, First, Middle Initial) of De RED CURVE SOLUTIONS	ebtor or Cre	ditor		ebt (Purpose): SERVICES
Mailing Address 138 CONANT STREET				
2ND FLOOR City BEVERLY	State MA	Zip Code 01915		
Outstanding Balance Beginning This Period			Transact	ion ID : SD10.6156
15.49				
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.0	00	15.49
1) SUBTOTALS This Period This Page (optiona	l)			50.16
2) TOTALS This Period (last page this line num	iber only)		•••• •	, , ,
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last p	bage only)	… ▶	
4) ADD 2) and 3) and carry forward to appropr	iate line of	Summary Page (last page o		7

FEC	Schedule	D	(Form	3)	(Revised	05/2016)

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full)			(Use separate schedule(s) for each numbered line)	PAGE 9 OF 11 FOR LINE NUMBER: (check only one) 9 X 10	
BRIAN HERR FOR S	ENA ⁻	ГЕ			
A. Full Name (Last, First, Middle Initial) of De RED CURVE SOLUTIONS	ebtor or Cree	ditor		ebt (Purpose): SERVICES	
Mailing Address 138 CONANT STREET 2ND FLOOR					
City BEVERLY	State MA	Zip Code 01915			
Outstanding Balance Beginning This Period	1		Transactio	on ID : SD10.6164	
15.87					
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00			00	15.87	
B. Full Name (Last, First, Middle Initial) of Del RED CURVE SOLUTIONS	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED CURVE SOLUTIONS				
Mailing Address 138 CONANT STREET 2ND FLOOR					
City BEVERLY	State MA	Zip Code 01915			
Outstanding Balance Beginning This Period 15.57 Amount Incurred This Period		Payment This Period		on ID : SD10.6166 ng Balance at Close of This Period	
0.00		0.0	00	15.57	
C. Full Name (Last, First, Middle Initial) of De RED CURVE SOLUTIONS Mailing Address 138 CONANT STREET		ebt (Purpose): SERVICES			
2ND FLOOR City	State	Zip Code			
BEVERLY	MA	01915			
Outstanding Balance Beginning This Period			Transact	ion ID : SD10.6169	
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period	
0.00			00	10.80	
1) SUBTOTALS This Period This Page (optiona)		···· •	42.24	
2) TOTALS This Period (last page this line num	ber only) ·····		···· •	7 7 7 7	
3) TOTAL OUTSTANDING LOANS from Sched	ule C (last p	age only)		7 7	
4) ADD 2) and 3) and carry forward to appropr	iate line of S	Summary Page (last page o		7 7 7	

FEC	Schedule	D	(Form	3)	(Revised	05/2016)

		(Use separate schedule(s) for each numbered line)	PAGE 10 OF 11 FOR LINE NUMBER: (check only one) 9 X 10		
		Nature of D	ebt (Purpose):		
RED CURVE SOLUTIONS					
State MA	Zip Code 01915				
d		Transactio	on ID : SD10.6171		
	Payment This Period	Outstandi	ng Balance at Close of This Period		
0.00 0.00					
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED CURVE SOLUTIONS					
State MA	Zip Code 01915				
Outstanding Balance Beginning This Period 10.67					
Amount Incurred This Period Payment This Period			ng Balance at Close of This Period		
	0.0	00	10.67		
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RED PRINT STRATEGY					
State	Zip Code				
	22204	Transact	ion ID : SD10.6141		
		Tansact			
Amount Incurred This Period Payment This Period					
			9500.00		
al)		···· •	9530.79		
2) TOTALS This Period (last page this line number only)					
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)					
oriate line of	Summary Page (last page o	nly) 🕨	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		
	Debtor or Creater MA	MA 01915 d Payment This Period State Zip Code MA 01915 d Payment This Period d Payment This Period Debtor or Creditor 0. State Zip Code MA 01915 d Payment This Period Debtor or Creditor 0. State Zip Code VA 22204 d Payment This Period al) 0. nber only) 0.	Schedule(s) for each numbered line) SENATE Debtor or Creditor State Zip Code MA 0.00 Payment This Period Outstandi Bate Zip Code MA 0.00 Payment This Period Outstandi COURIER State Zip Code MA 01915 d Transaction Outstandi Question YA Zip Code VA Zip Code VA Zip Code Outstandi Payment This Period <		

FEC Schedule D (Form 3) (Revised 05/2016)

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans NAME OF COMMITTEE (In Full)			(Use separate schedule(s) for each numbered line)	PAGE 11 OF 11 FOR LINE NUMBER: 9 9 (check only one) 9 10		
A. Full Name (Last, First, Middle Initial) of De				Debt (Purpose): NSULTING		
TALANCY, MATT, , ,						
Mailing Address 445 MALDEN ST						
City HOLDEN	State MA	Zip Code 01520				
Outstanding Balance Beginning This Period			Transacti	on ID : SD10.6138		
9000.00						
Amount Incurred This Period	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 Debtor or Creditor WYLIE STRATEGY GROUP				Nature of Debt (Purpose): STRATEGY CONSULTING		
Mailing Address 7 HOLLOW TREE RD						
City NORWALK	State CT	Zip Code 06854				
Outstanding Balance Beginning This Period 17000.00						
Amount Incurred This Period	Amount Incurred This Period Payment This Period			Outstanding Balance at Close of This Period		
0.00		0.0	00	17000.00		
C. Full Name (Last, First, Middle Initial) of De	Nature of D	Debt (Purpose):				
Mailing Address						
City	State	Zip Code				
Outstanding Balance Beginning This Period	I					
Amount Incurred This Period		Payment This Period	Outstandi	ng Balance at Close of This Period		
				y		
1) SUBTOTALS This Period This Page (optional)				26000.00		
2) TOTALS This Period (last page this line number only)				87743.74		
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				3100.00		
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				90843.74		

FEC	Schedule	D	(Form	3)	(Revised	05/2016)
		_	(· • · · · ·	-,	(00,20.0)