PAGE 1 / 11

REPORT OF RECEIPTS **AND DISBURSEMENTS**

For An	Authorized Comn	nittee	C	ffice Use Only
NAME OF COMMITTEE (in full) TYPE OR PRIN		mple: If typing, type r the lines.	12FE4M5	
Committee to Elect Dan Shores			1 1 1 1 1 1 1	
. 44 D A.				
ADDRESS (number and street)	Э. 			
Check if different than previously Sandwich			MA 02	2563
reported. (ACC)	CITY A		STATE ▲	ZIP CODE ▲
C C00556217	3. IS THIS REPORT	× NEW (N) OR	AMENDEI (A)	STATE ▼ DISTRICT MA 09
4. TYPE OF REPORT (Choose One)	(b) 12-Day PRE -l	Election Report for the	:	
(a) Quarterly Reports:		Primary (12P)	General (120	G) Runoff (12R)
April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2)		Convention (12C)	Special (129	3)
October 15 Quarterly Report (Q3)	Election on	M M / D D	/ Y Y Y Y	in the State of
January 31 Year-End Report (YE)	(c) 30-Day POST	-Election Report for th	e:	
		General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election on	M M / D D	/	in the State of
5. Covering Period 10 01	/ Y Y Y Y Y 2017	through 12	M / D D /	Y Y Y Y Y 2017
I certify that I have examined this Report and t Shores, Jam Type or Print Name of Treasurer		wledge and belief it is	true, correct and o	complete.
Shores, James, L, Mr., Signature of Treasurer		[Electronically Filed]	Date 01	/ D D / Y Y Y Y Y 15 2018
NOTE: Submission of false, erroneous, or incompl	ete information may so	ubject the person signin	g this Report to the	penalties of 52 U.S.C. §30109
Office Use Only				FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 11

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Committee to Elect Dan Shores

Report Covering the Period: From: M 10 / 01 / 2017 To: M 12 / 31 / 2017	Y
---	---

		COLUMN A This Period	COLUMN B Election Cycle-to-Date
3.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(e))	0.00	0.00
	(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	0.00
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	0.00	1837.34
	(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	745.85
	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	1091.49
3.	Cash on Hand at Close of Reporting Period (from Line 27)	927.56	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	218351.85	

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

745.85

Write or Type Committee Name

16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4).....

Committee to Elect Dan Shores

10 2017 12 01 31 2017 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 0.00 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized (iii) TOTAL of contributions 0.00 0.00 from individuals 0.00 0.00 Political Party Committees..... Other Political Committees 0.00 0.00 (such as PACs)..... 0.00 0.00 The Candidate..... (d) TOTAL CONTRIBUTIONS (other than loans) 0.00 (add Lines 11(a)(iii), (b), (c), and (d)).. 0.00 12. TRANSFERS FROM OTHER 0.00 0.00 AUTHORIZED COMMITTEES 13. LOANS: (a) Made or Guaranteed by the 0.00 0.00 Candidate..... 0.00 0.00 (b) All Other Loans..... TOTAL LOANS 0.00 0.00 (add Lines 13(a) and (b))..... 14. OFFSETS TO OPERATING **EXPENDITURES** 0.00 745.85 (Refunds, Rebates, etc.) 15. OTHER RECEIPTS 0.00 0.00 (Dividends, Interest, etc.)

0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 11

	II. DISBUR	SEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date					
17.	OPERATING EXP	ENDITURES	0.00	1837.34					
18.	TRANSFERS TO AUTHORIZED CO	OTHER DMMITTEES	0.00	0.00					
19.	LOAN REPAYMEN	_							
	()	ade or Guaranteed idate	0.00	0.00					
	` '	Loans	0.00	0.00					
	` '	N REPAYMENTS 9(a) and (b))	0.00	0.00					
20.		ONTRIBUTIONS TO:							
	()	ersons Other al Committees	0.00	0.00					
		y Committeesal Committees	0.00	0.00					
	` '	Cs)	0.00	0.00					
	` '	TRIBUTION REFUNDS 0(a), (b), and (c))	0.00	0.00					
21.	OTHER DISBURS	SEMENTS	0.00	0.00					
22.	TOTAL DISBURS (add Lines 17, 18	SEMENTS 3, 19(c), 20(d), and 21)	0.00	1837.34					
		III. CASH SU	JMMARY						
23.	CASH ON HAND	AT BEGINNING OF REPO	RTING PERIOD	927.56					
24	TOTAL RECEIPTS	S THIS PERIOD (from Line	16, page 3)	0.00					
25.	SUBTOTAL (add	Line 23 and Line 24)		927.56					
26.	6. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)								
27.		AT CLOSE OF REPORTING from Line 25)	g Period	927.56					

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

PAGE 5
FOR LINE NUMBER: (check only one)

: **X** 13a

			Detailed Summary	Page	13b			
NAME OF COMMITTEE (In Full)			Transaction ID : 759-10					
Committee to Elect Dan Shores								
Shores, Daniel, L, ,	ddle Initial)		☐ Memo Ite	em Election: 2014 x Primary General				
Mailing Address 14 Dewey Avenue				Other (specify)				
City	State	ZIP Code	•	V Demand Fords of the	200d!d-1-			
Sandwich	MA	02563		Y Personal Funds of the	Jandidate			
Original Amount of Loan 4000.00	Cumulative Payment To 4000.00			Balance Outstanding at Close of T				
TERMS Date Incurred		Date Due	Interest F	Rate Secured	l:			
M09M / D12D / Y Z014 Y		(If none, e		× No				
List All Endorsers or Guarantors (if any) t	o 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					
011	710.6		Amount Guaranteed		7			
City	ZIP Code		Outstanding:	7 7 7				
3. Full Name (Last, First, Middle Initial)			Name of Employer					
Mailing Address			Occupation					
City	ZIP Code		Amount Guaranteed Outstanding:					
4. Full Name (Last, First, Middle Initial)	I	1	Name of Employer					
Mailing Address		Occupation						
			Amount		_			
City	ZIP Code		Guaranteed Outstanding:	7 7 7 7				
SUBTOTALS This Period This Page (optional).			······	4000	0.00			
TOTALS This Period (last page in this line only	/)			7 7 7 7				
Carry outstanding balance only to LINE 3, Scl	nedule D, for this	s line. If no	Schedule D, carry 1	forward to appropriate line of Su	ımmary.			

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

PAGE 6
FOR LINE NUMBER: (check only one)

13a

				Detailed C	diffillary i	agc				13b
AME OF COMMITTEE (In Full) Committee to Elect Dan Sho			Trans	action II	D : 655-9					
		alla Insitial\				Fire				
Shores, Daniel, L, , Mailing Address			Memo Iter	×	tion: 2014 Primary General Other (spec					
14 Dewey Avenue							(-			
City		State	ZIP Cod	le		×	Porconal E	unds of the	Can	didata
Sandwich		MA	02563				1 ersonar r		——	Jidale
Original Amount of Loan Cumulative Payment To 15000.00			yment To	Date 0.00		alance O	utstanding a	at Close of 1500	This I	Period
TERMS Date Incurred		D	ate Due		Interest Ra			Secure	ed:	
M09M / D03D / Y 2014	Y	/ M / D D	/ Y	YNA Y	(If none, en	0.00	% (apr)	Ye	es x	€ No
List All Endorsers or Guarantors		Loan Source								
1. Full Name (Last, First, Middle Ir	nitial)			Name of Emp	oloyer					
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		,	- ,			
2. Full Name (Last, First, Middle Ini	tial)	1		Name of Employer						
Mailing Address				Occupation						
	la			Amount Guaranteed					\neg	
City	State	ZIP Code		Outstanding:		7	7			
3. Full Name (Last, First, Middle Ini	tial)			Name of Employer						
Mailing Address				Occupation						
O'th.	04-4-	7ID 0- 1-		Amount Guaranteed						
City	State	ZIP Code		Outstanding:		7	7	-	_	
4. Full Name (Last, First, Middle Initial)				Name of Emp	oloyer					
Mailing Address				Occupation						
C:h	Ctata	ZID Code		Amount Guaranteed					\neg	
City	State	ZIP Code		Outstanding:		7	7		_	
SUBTOTALS This Period This Page (c	ptional)							1500	00.00	
FOTALS This Period (last page in this	line only))			▶		7	,	-	
Carry outstanding balance only to LIN	NE 3, Sch	edule D, for this	s line. If n	o Schedule I	D, carry fo	rward t	appropria	te line of §	Summ	narv.

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

FOR LINE NUMBER: (check only one)

PAGE

13a

		l BC	anca outfillary r ag	,	13b		
AME OF COMMITTEE (In Full) Committee to Elect Dan Shores		•	Transac	tion ID : 653-7			
Committee to Elect Dan Shores							
LOAN SOURCE Full Name (Last, First, Mi Shores, Daniel, L, ,	ddle Initial)		☐ Memo Item	Election: 2014 x Primary			
Mailing Address 14 Dewey Avenue				General Other (specify) ▼			
City	State	ZIP Code		Personal Funds of the	Candidata		
Sandwich	MA	02563		Fersonal Funds of the			
Original Amount of Loan	Cumulative Pay	yment To Date	Bala	ance Outstanding at Close of T	his Period		
30000.00	2	7	0.00	30000	0.00		
TERMS Date Incurred	Г	Date Due	Interest Rate (If none, enter		:t:		
M08M / D29D / Y Ž014 Y	M M / D D	/ Y YNAY	Y 0.0	00 % (apr) Yes	s 🗶 No		
List All Endorsers or Guarantors (if any)	to Loan Source						
1. Full Name (Last, First, Middle Initial)		Name	of Employer				
Mailing Address		Occup	Occupation				
		Amour			$\overline{}$		
City	ZIP Code	Guarar Outsta		y y w			
2. Full Name (Last, First, Middle Initial)		Name	Name of Employer				
Mailing Address		Occup	ation				
		Amour					
City	ZIP Code	Guarar Outsta		7 7			
3. Full Name (Last, First, Middle Initial)		Name	Name of Employer				
Mailing Address		Occup	ation				
		Amour Guarar			$\overline{}$		
City	ZIP Code	Outsta		y	_		
4. Full Name (Last, First, Middle Initial)	4. Full Name (Last, First, Middle Initial)						
Mailing Address	Occup	ation					
		Amour					
City	ZIP Code	Guarar Outsta		y			
SUBTOTALS This Period This Page (optional)		·					
				30000	J.00		
FOTALS This Period (last page in this line onl	y)		·······				
Carry outstanding balance only to LINE 3, Sc	hadula D. for this	s line If no Sobo	adula D. carry for	ward to appropriate line of St	ımmanı		
Jany Julistanumy Dalance Ully to Line 3. 30	neuure D, IUI liik	, mic. ii iiu oune	Judie D. Cally IUIW	raid to applopliate lille of St	arriiriai y.		

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

PAGE 8
FOR LINE NUMBER: (check only one)

13a

							130
AME OF COMMITTEE (In Full) Committee to Elect Dan Sho	res				Transa	ction ID : 103-4	
LOAN SOURCE Full Name (Last,	First, Mid	ddle Initial)			Memo Item	Election: 2014	
Shores, Daniel, L, ,		,			ivienio item	x Primary	
						General	
Mailing Address 14 Dewey Avenue						Other (specify)	
City		State	ZIP Cod	de			
Sandwich		MA	02563			Personal Funds of the Car	ididate
Original Amount of Loan Cumulative Payment			yment To	Date	Bala	ance Outstanding at Close of This	Period
150000	.00	7		0.00)	150000.00)
TERMS Date Incurred		D	ate Due		Interest Rate (If none, ente		
^M 03 ^M / ^D 25 ^D / Y Ž014	Υ	M M / D D	/ Y	YNA Y		.00	x No
List All Endorsers or Guarantors	(if any) t	o Loan Source					
1. Full Name (Last, First, Middle II	,			Name of Em	ployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:			
2. Full Name (Last, First, Middle In	itial)	'		Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:			
3. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7 7	
4. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		y y y	
SUBTOTALS This Period This Page (o	optional)						$\overline{}$
TO THE THIS I GIVE THIS FAYE (C	יףווטוומו).					150000.00	,
TOTALS This Period (last page in this	line only	/)			▶		
Carry outstanding balance only to LIF	NE 3, Scl	nedule D, for this	s line. If	no Schedule	D, carry for	ward to appropriate line of Sumr	mary.

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

PAGE 9
FOR LINE NUMBER: (check only one)

X 13a

				Detailed of	arriiriary r ag	C		13b
AME OF COMMITTEE (In Full) Committee to Elect Dan Sh				Transact	tion ID : 102-4			
LOAN SOURCE Full Name (Last		ddo Initial)			<u> </u>	Floation: 004		
Shores, Daniel, L, , Mailing Address 14 Dewey Avenue	dule Illitial)			Memo Item	Primary General Other (spec			
		I	T					
City Sandwich		State MA	2IP Coc 02563	le		x Personal	Funds of the Ca	andidate
Original Amount of Loan Cumulative Payment To			yment To	Date 0.00	Balar	nce Outstanding	at Close of Thi	
TERMS Date Incurred		D	ate Due		nterest Rate If none, enter		Secured:	
^M 02 ^M / ^D 02 ^D / Y Ž014	Y	M M / D D	/ Y	YNA Y	0.0		Yes	x No
List All Endorsers or Guarantors		o Loan Source						
1. Full Name (Last, First, Middle	Initial)			Name of Emp	loyer			
Mailing Address				Occupation				
City	City State ZIP Code			Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Middle	nitial)	'		Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		7 7]
3. Full Name (Last, First, Middle	nitial)	<u>.</u>		Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		7 7]
4. Full Name (Last, First, Middle	nitial)	'		Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		7 7]
SUBTOTALS This Period This Page	(optional)				· [5000.0	00
FOTALS This Period (last page in th	is line only	/)				, , , ,	7	
Carry outstanding balance only to L	INE 3, Sch	nedule D, for this	s line. If n	o Schedule D	, carry forw	ard to appropri	ate line of Sun	nmary.

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

FOR LINE NUMBER: (check only one)

PAGE 10

13a

OF

		100
NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores		Transaction ID : 101-2
LOAN SOURCE Full Name /Last First M	iddle Initial)	
Shores, Daniel, L, ,	☐ Memo Item	
Mailing Address 14 Dewey Avenue	Other (specify) ▼	
City	State	ZIP Code Personal Funds of the Candidate
Sandwich	MA	02563
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
2000.00		0.00 2000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
^M 01 ^M / ^D 05 ^D / ^Y Ž01 ^Ž ^Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		2000.00
TOTALS This Period (last page in this line on	ly)	206000.00
Carry outstanding balance only to LINE 3, So	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3) **DEBTS AND OBLIGATIONS**

Excluding Loans

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

PAGE 11 OF FOR LINE NUMBER:

11 (check only one) 9 **X** 10

	ridding Edding			7 10		
NA	ME OF COMMITTEE (In Full)					
\mathbf{C}	Committee to Elect D	an Sl	hores			
Ť	A. Full Name (Last, First, Middle Initial) of De			Nature of Debt (Purpose):		
	Plymouth Bay Consulting	Compliance Consulting (Contract Bonus				
	yg			Agreement)		
	Mailing Address 7 Alvin Rd					
ł	City	State	Zin Codo	_		
	Plymouth	MA	Zip Code 02360			
ł			32333	Transaction ID : 764-		
	Outstanding Balance Beginning This Period			Transaction ib . 764-		
	10200.00					
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
	0.00		0.00	10200.00		
	7		, , ,	10200.00		
Ì	B. Full Name (Last, First, Middle Initial) of Del	otor or Cred	ditor	Nature of Debt (Purpose):		
	Shores, Daniel, L, ,			Miscellaneous Expenses (FaceBook Boosts &		
				Fuel)		
	Mailing Address 14 Dewey Avenue					
ŀ	City	State	Zip Code			
	Sandwich	MA	02563			
Ì	Outstanding Balance Beginning This Period	'	-	Transaction ID : 652-		
				Transaction ID: 632-		
	2151.85					
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
	0.00		0.00	2151.85		
	, , , , , , , , , , , , , , , , , , , ,		7			
Ī	C. Full Name (Last, First, Middle Initial) of De	ebtor or Cre	editor	Nature of Debt (Purpose):		
ł	Mailing Address			_		
	Walling Address					
İ	City	State	Zip Code			
	Outstanding Balance Beginning This Period					
	, , , , , , , , , , , , , , , , , , ,	D . TI . D	0.1.1.5.1.10.1.17.5.1.1			
	Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
	,		, , ,	, ,		
1)	SUBTOTALS This Period This Page (optional)		12351.85		
		,		12331.03		
2)	TOTALS This Period (last page this line num	ber only) ····		12351.85		
٠.						
3)	TOTAL OUTSTANDING LOANS from Schedu	ule C (last p	oage only)······	206000.00		
4)	ADD 2) and 3) and carry forward to appropr	iate line of	Summary Page (last page only)	218351.85		
•						