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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For An		ized Comr	nittee			Office	use Only
1. NAME OF COMMITTEE (in	full)	TYPE OR PRI	NT ▼		mple: If typing	g, type	12FE4M	5	
Committee to	Elect D	Dan Shores							1
ADDRESS (number ar	nd street)	14 Dewey Av	e.						
_			1 1		1 1 1 1			1 1	
Check if did than previous reported. (A	usly	Sandwich					MA [02563	
2. FEC IDENTIFIC	CATION	NUMBER ▼		CITY			STATE A		ZIP CODE A STATE ▼ DISTRICT
C C005562	17		3.	IS THIS REPORT	× NEW (N)	OR	AMENI (A)	DED	MA 09
4. TYPE OF RE	DODT /	Ola O \	1						
4. TYPE OF RE(a) Quarterly R	•	Choose One)	(b)	12-Day PRE -	Election Repo	rt for the:			
		D ! (O1)			Primary (12P)		General (12G)	Runoff (12R)
		y Report (Q1)			Convention (12C)	Special (1	12S)	
X July 15	Quarterly	y Report (Q2)			M M /	D D /	Y	-	in the
Octobe	r 15 Qua	rterly Report (Q3)		Election on					State of
January	/ 31 Year-	-End Report (YE)	(c)	30-Day POST	-Election Rep	ort for the:			
					General (30G)	Runoff (3	0R)	Special (30S)
Termina	ation Repo	ort (TER)		Election on	M M /	D D /	Y Y Y Y		in the State of
5. Covering Period	N	04 / 01 D		Y Y Y 2015	through	M M M 06	30		y y y y 2015
I certify that I have e	examined	this Report and	to the b	est of my kno	owledge and l	belief it is tr	ue, correct an	d com	plete.
Type or Print Name	of Treasu	ırer Mr. James I	Shores						
Signature of Treasure	er <u>M</u>	Ar. James L Shores		ı	Electronically I	Filed] [Date 07	/	13 /
NOTE: Submission of	false, err	oneous, or incomp	lete info	mation may s	ubject the per	son signing t	this Report to t	the per	nalties of 2 U.S.C. §437g.
Office Use Only									EC FORM 3 Revised 02/2003)

SUMMARY PAGE

FEC Form 3 (Revised 02/2003) of Receipts and Disbursements

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Write or Type Committee Name

Committee to Elect Dan Shores

R	eport	Covering the Period: From:	04 / 01 / Y Y Y Y TO:	06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
			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	69097.92
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	10400.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	58697.92
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	37.34	264584.00
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	813.64
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	37.34	263770.36
8.		h on Hand at Close of orting Period (from Line 27)	927.56	
9.	the	ts and Obligations Owed TO Committee (Itemize all on edule C and/or Schedule D)	0.00	
10.	the	ts and Obligations Owed BY Committee (Itemize all on edule 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 12/2003)

PAGE 3 / 12

Write or Type Committee Name

Committee to Elect Dan Shores

Report Covering the Period: From: 04 01 2015 To: 06 30 2015

	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	57718.87
	(ii) Unitemized	0.00	11329.05
	(iii) TOTAL of contributions from individuals	0.00	69047.92
(1	b) Political Party Committees	0.00	0.00
(0	c) Other Political Committees (such as PACs)	0.00	50.00
` `	d) The Candidatee) TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	69097.92
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3. L	OANS:		
(6	a) Made or Guaranteed by the Candidate	0.00	206000.00
(1	b) All Other Loans	0.00	0.00
(0	c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	206000.00
	DFFSETS TO OPERATING		
	EXPENDITURES Refunds, Rebates, etc.)	0.00	813.64
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00
1	TOTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	275911.56

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPI	ERATING EXPENDITURES	37.34	264584.00
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LOA	AN 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.	REF	FUNDS OF CONTRIBUTIONS TO:		
	(a)	Individuals/Persons Other Than Political Committees	0.00	10400.00
	(b)	Political Party Committees	0.00	0.00
	(c)	Other Political Committees (such as PACs)	0.00	0.00
	(-1)			
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	10400.00
21.	ОТІ	HER DISBURSEMENTS	0.00	0.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	37.34	274984.00
		III. CASH SUN	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPORT	TING PERIOD	964.90
24	то	TAL RECEIPTS THIS PERIOD (from Line 16	3, page 3)	0.00
25.	SUI	BTOTAL (add Line 23 and Line 24)		964.90
26.	TO	TAL DISBURSEMENTS THIS PERIOD (from	ı Line 22)	37.34
		SH ON HAND AT CLOSE OF REPORTING		927.56

Candidate Name

Office Sought:

House

Senate

District:

President

Disbursement For:

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

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

Primary

Other (specify)

SCHE **ITEMIZ**

ln	nage# 201507139000094334			
	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sc for each categor Detailed Summa	y of the	FOR LINE NUMBER: PAGE 5 OF 12 (check only one) X 17
	ly information copied from such Reports and Statements me for commercial purposes, other than using the name and			
	NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores			
Α.	Full Name (Last, First, Middle Initial) Verizon			Date of Disbursement
	Mailing Address PO Box 15124			04 09 2015
	City State Albany NY Purpose of Disbursement Phone Expenses	Zip Code 12212	001	Amount of Each Disbursement this Period 37.34
	Candidate Name		Category/ Type	Transaction ID: 0000784
	Office Sought: House Senate President Disbursement For Primary Other (s	General	, , , ,	
_	State: District: Full Name (Last, First, Middle Initial)			
В.	Mailing Address			Date of Disbursement
	City State	Zip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement			1
	Candidate Name		Category/ Type	
	Office Sought: House Senate President Other (s	General		
_	State: District: Full Name (Last, First, Middle Initial)			
C.				Date of Disbursement
	Mailing Address			
	City State Zi	ip Code		Amount of Each Disbursement this Period
	Purpose of Disbursement			

Category/ Type

General

State:

37.34

37.34

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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	13h

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OF

Detailed Summary Page Transaction ID: 759-10 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D12 ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4000.00 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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DANS	Detailed Summary Page (check only one)
AME OF COMMITTEE (In Full) Committee to Elect Dan Shores	Transaction ID : 655-9
LOAN SOURCE Full Name (Last, First, Middle Initial) Daniel L Shores	[PERSONAL FUNDS] Election: 2014 Primary General
Mailing Address 14 Dewey Avenue	Other (specify)
City State ZIP Cod	de
Sandwich MA 02563	
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period 0.00 15000.00
Date Incurred Date Due	Interest Rate Secured: YNA O.00 % (apr) Yes
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) TOTALS This Period (last page in this line only)	7 7 7
Carry outstanding balance only to LINE 3, Schedule D, for this line. If I	no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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	13b

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OF

(check only one) Detailed Summary Page Transaction ID: 653-7 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 30000.00 0.00 30000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 29 ^M08^M ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 30000.00 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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OF

Detailed Summary Page Transaction ID: 103-4 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 150000.00 0.00 150000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D25 ^M 03^M ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 150000.00 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: 102-4 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M 02 ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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(check only one) Detailed Summary Page Transaction ID: 101-2 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 ^M 01 ^M ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) 206000.00 Carry outstanding balance only to LINE 3, Schedule D, for this 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 12 OF
FOR LINE NUMBER:
(check only one)

BER:		
		9
	X	10

12

NAME OF COMMITTEE (In Full)			
Committee to	Flect	Dan	Shores

	3110162	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Plymouth Bay Consulting		Compliance Consulting
Mailing Address 7 Alvin Rd		-
City State Zip Code		_
Plymouth	MA 02360	
	02000	
Outstanding Balance Beginning This Period		Transaction ID : 764-
10200.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	10200.00
0.00	7	10200.00
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Daniel L Shores		Miscellaneous Expenses
Mailing Address 14 Dewey Avenue		_
City State	Zip Code	-
Sandwich	MA 02563	
Sandwich	IVIA 02000	
Outstanding Balance Beginning This Period		Transaction ID : 652-
0454.05		
2151.85		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
		1
0.00	0.00	2151.85
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		_
City Chair 7' Control		
City State Zip Code		
Outstanding Balance Beginning This Period		
9 9		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
		12251.05
) SUBTOTALS This Period This Page (optional)		12351.85
		40054.05
TOTALS This Period (last page this line number only)		12351.85
		22222
TOTAL OUTSTANDING LOANS from Schedule C (last page only)		206000.00
		040054.05
ADD 2) and 3) and carry forward to appropriate I	218351.85	