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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3	For An Auth	orized Com	mittee	Off	ice Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼		cample: If typing, ty er the lines.	pe 12FE4M5	
Committee to Elect Da	n Shores				1
ADDRESS (number and street)	14 Dewey Ave.				
▼ Check if different					
than previously reported. (ACC)	Sandwich			MA 025	563
2. FEC IDENTIFICATION N	JMBER ▼	CITY ▲		STATE ▲	ZIP CODE ▲
C C00556217		3. IS THIS REPORT	NEW (N) O	AMENDED (A)	STATE ▼ DISTRICT MA 09 100
4. TYPE OF REPORT (Ch	oose One) (b)	12-Day DRF	-Election Report fo	r the	
(a) Quarterly Reports:	(0)	12-Day Phe			П
April 15 Quarterly F	Report (Q1)		Primary (12P)	General (12G)	Runoff (12R)
			Convention (12C)	Special (12S)	
July 15 Quarterly F October 15 Quarter		Election on	M M / D	D / Y Y Y Y	in the State of
January 31 Year-En	nd Report (YE) (c)	30-Day POS	T-Election Report f	for the:	
_			General (30G)	Runoff (30R)	Special (30S)
Termination Report	(TER)	Election on	M M / D	D / Y " Y " Y " Y	in the State of
5. Covering Period 0	M / D D / Y	^Y 2019	through	M M / D D / Y	Y Y Y Y 2019
I certify that I have examined the	Shores, James, L		nowledge and belief	f it is true, correct and co	omplete.
Short Signature of Treasurer	res, James, L, Mr.,		[Electronically Filed]	Date 07	14 / Y Y Y Y Y Y Y Y 2019
NOTE: Submission of false, errone	eous, or incomplete in	formation may	subject the person s	signing this Report to the p	penalties 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
Committee to Elect Dan Shores

2019 04 2019 06 30 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 0.00 (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 0.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 1837.34 (from Line 17) (b) Total Offsets to Operating 745.85 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 1091.49 0.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 927.56 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 218351.85 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)

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Write or Type Committee Name

Committee to Elect Dan Shores

04 2019 06 30 2019 01 Report Covering the Period: From: To:

	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	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate (e) TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	0.00
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
14.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	745.85
15.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	745.85

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	1837.34
	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
	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
	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	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
	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	1837.34
	III. CASH SU	MMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	927.56
!4	TOTAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	0.00
5.	SUBTOTAL (add Line 23 and Line 24)		927.56
26.	TOTAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	0.00
	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		927.56

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

FOR LINE NUMBER: (check only one)

PAGE 5

13a

				Detailed Garrinar	y rage		13b
NAME OF COMMITTEE (In Full)	1			Tra	nsaction ID :	759-10	
Committee to Elect Dan SI	nores						
LOAN SOURCE Full Name (Las	t, First, Mic	ldle Initial)		☐ Memo	Item Election	1: 2014	
Shores, Daniel, L, ,						mary	
						neral	
Mailing Address 14 Dewey Avenue					Oth	ner (specify) \blacktriangledown	
City		State	ZIP Code				
Sandwich	Sandwich MA 02563				X P€	ersonal Funds of the (Candidate
Original Amount of Loan Cumulative Payment To			yment To D	ate	Balance Outs	tanding at Close of T	his Period
40	00.00	,		0.00		4000).00
TERMS Date Incurred		Г	Date Due	Interest	Rate enter 0)	Secured	i:
M09 ^M / D12 ^D / Y Ž01	4 Y	M M / D D	/ Y	NA Y	0.00	% (apr)	x No
List All Endorsers or Guaranton	re (if any) to	a Loan Source				76 (apr)	INO
Full Name (Last, First, Middle)		S Edan Godice		Name of Employer			
1. Tuli Name (Last, Flist, Middle	z iriitiai)						
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.	Ctata	ZID Code		Guaranteed			7
City	State	ZIP Code		Outstanding:	7	7	
3. Full Name (Last, First, Middle	Initial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:	7		
4. Full Name (Last, First, Middle	Initial)			Name of Employer			
Mailing Address				Occupation			
			-	A			
City	State	ZIP Code		Amount Guaranteed			7
Oity	State	ZIF Code		Outstanding:	7	7	
CURTOTAL O This Deviced This Deve	(ti1)						
SUBTOTALS This Period This Page	· (optional)··			······		4000).00
TOTALS This Period (last page in t	his line only	r)					
Carry outstanding balance only to	LINE 3 Sch	edule D for this	s line If n	n Schedule D. carn	forward to a	nnronriate line of Su	ımmarv
Garry Outstariumy Datatice Utily to	LII1L 3, 301	iouulo D, IUI IIII	o mic. II III	J GOLLEGULE D. CALLY	ioiwalu lo d	ppropriate little of St	arriiridi y.

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

FOR LINE NUMBER: (check only one)

PAGE 6

13a

			Detailed Guillinary	1 age	13b	
NAME OF COMMITTEE (In Full)			Trans	saction ID : 655-9		
Committee to Elect Dan Shores						
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo Ite	em Election: 2014		
Shores, Daniel, L, ,				x Primary		
				General		
Mailing Address 14 Dewey Avenue				Other (specify)		
City	State	ZIP Code)			
Sandwich	Sandwich MA 02563			Personal Funds of the Ca	andidate	
Original Amount of Loan Cumulative Payment To			ate E	Balance Outstanding at Close of Thi	s Period	
15000.00			0.00	15000.0	00	
TERMS Date Incurred	,	Date Due	Interest F	Rate Secured:		
			(If none, e	nter 0)		
M09M / P03P / Y 2014 Y	M = M / D = D) / Y = Y	NA Y	0.00 % (apr) Yes	x No	
List All Endorsers or Guarantors (if any) to	o Loan Source					
1. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address		(Occupation			
			Amount			
City State	ZIP Code	I	Guaranteed Outstanding:	9 9		
2. Full Name (Last, First, Middle Initial)	I	1	Name of Employer			
Mailing Address		(Occupation			
		,	Amount		-	
City State	ZIP Code		Guaranteed Outstanding:	9 9		
3. Full Name (Last, First, Middle Initial)	I	1	Name of Employer			
Mailing Address		(Occupation			
		<u> </u>	Amount			
City State	ZIP Code		Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address			Occupation			
			Amount			
City	ZIP Code	(Guaranteed Outstanding:	7 7 7		
			<u> </u>			
SUBTOTALS This Period This Page (optional)			······	15000.C	00	
TOTALS This Period (last page in this line only	/)		······			
Carry outstanding balance only to LINE 3, Sch	nedule D. for this	s line. If no	Schedule D. carry f	orward to appropriate line of Sun	marv.	

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

PAGE FOR LINE NUMBER: (check only one)

x 13a

						130	
	ME OF COMMITTEE (In Full) Dommittee to Elect Dan Sho	res			Trans	action ID : 653-7	
	LOAN SOURCE Full Name (Last,	First, Mic	Idle Initial)		Memo Iter	n Election: 2014	
	Shores, Daniel, L, ,	,	,		□ Memo iter	Primary General	
Ī	Mailing Address 14 Dewey Avenue					Other (specify)	
	City		State	ZIP Co		X Personal Funds of the Candidate	
	Sandwich MA 02563						
	Original Amount of Loan		Cumulative Pay	ment To	Date Ba	alance Outstanding at Close of This Period	
	30000	.00			0.00	30000.00	
	TERMS Date Incurred		D	ate Due	Interest Ra (If none, en		
	M08M / D29D / Y 2014 Y M M / D D / Y			/ Y	11/7	0.00 % (apr) Yes X No	
	List All Endorsers or Guarantors	(if anv) t	o 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 Ini	itial)			Name of Employer		
	Mailing Address				Occupation		
-		1			Amount Guaranteed Outstanding:		
	City	State	ZIP Code				
;	3. Full Name (Last, First, Middle Ini	itial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,	
	4. Full Name (Last, First, Middle Ini	itial)			Name of Employer		
	Mailing Address			Occupation			
				Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	7	
SU	BTOTALS This Period This Page (c	optional)				22222 22	
						30000.00	
10	TALS This Period (last page in this	mie only	") ·····		, , , , , , , , , , , , , , , , , , ,	, ,	
Ca	arry outstanding balance only to LIN	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry fo	rward to appropriate line of Summary.	

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

PAGE OF FOR LINE NUMBER: **x** 13a (check only one)

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13b NAME OF COMMITTEE (In Full) Transaction ID: 103-4 Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Shores, Daniel, L, , General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue City State ZIP Code X Personal Funds of the Candidate MA 02563 Sandwich Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 150000.00 0.00 150000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D25^D M 03M ž014 YNA Y 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)..... 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 Detailed Summary Page

PAGE 9
FOR LINE NUMBER: (check only one)

X 13a

						13	
AME OF COMMITTEE (In Full) Committee to Elect Dan Sho	res				Transa	ction ID : 102-4	
LOAN SOURCE Full Name (Last,	First, Mid	ddle Initial)			Memo Item	Election: 2014	
Shores, Daniel, L, ,	•	,			j ivierno item	Primary	
Chores, Barner, E, ,						General	
Mailing Address 14 Dewey Avenue	Mailing Address 14 Dewey Avenue					Other (specify)	_
City		State	ZIP Cod	de		✗ Personal Funds of the Candid	ate
Sandwich		MA	02563				
Original Amount of Loan		Cumulative Pay	yment To	Date	Bal	ance Outstanding at Close of This Pe	iod
5000	.00	7		0.00		5000.00	_
TERMS Date Incurred		D	ate Due		Interest Rat		
^M 02 ^M / ^D 02 ^D / ^Y Ž014	Υ	M M / D D	/ Y	YNA Y		.00	No
List All Endorsers or Guarantors	(if any) t	o Loan Source				(4)	
Full Name (Last, First, Middle Ir		o Loan Godice		Name of Em	ployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
2. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
3. Full Name (Last, First, Middle In	tial)	'		Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
4. Full Name (Last, First, Middle In	tial)			Name of Em	ployer		
Mailing Address			Occupation				
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
CURTOTAL C This Deviced This Dage (untinunal)						_
SUBTOTALS This Period This Page (c	יףווטוומו).				···· •	5000.00	┛
TOTALS This Period (last page in this	line only	y)			▶	, ,	
Carry outstanding balance only to LIN	NE 3, Scl	nedule D, for this	s line. If ı	no Schedule	D, carry for	ward to appropriate line of Summar	 y.

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

FOR LINE NUMBER: (check only one)

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	13h

AME OF COMMITTEE (In Full	١		Transaction	ID : 101-2		
AME OF COMMITTEE (In Full) Committee to Elect Da			Halisaction	10 . 101-2		
Shores, Daniel, L, ,	e (Last, First, Mi	ddle Initial)	☐ Memo Item	ection: 2014 Primary General		
Mailing Address 14 Dewey Avenue				Other (specify) ▼		
City Sandwich		State	ZIP Code 02563	Personal Funds of the Candidate		
Original Amount of Loan Cumulative Payment To				Outstanding at Close of This Period		
, , , ,	2000.00		0.00	2000.00		
TERMS Date Incurred	d		ate Due Interest Rate (If none, enter 0)	Secured:		
M01 ^M / D05 ^D / Y	ž014 ^Y	M M / D	/ Y YNA Y 0.00	% (apr) Yes X No		
List All Endorsers or Guar	rantors (if any)	to Loan Source				
1. Full Name (Last, First, N	Middle Initial)		Name of Employer			
Mailing Address			Occupation			
		T	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9		
2. Full Name (Last, First, M	liddle Initial)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9		
3. Full Name (Last, First, M	liddle Initial)		Name of Employer	Name of Employer		
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed			
4. Full Name (Last, First, M			Outstanding: Name of Employer	, , , , , ,		
T. I UII INAINE (LASI, FIISI, IVI	iiuuie iiiilidi)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	,		
UBTOTALS This Period This	Page (optional)			2000.00		
OTAL C This Desired //	a in Abia Ura	. A		7 7 7 7		
OTALS This Period (last page	e in this line onl	у)	······	206000.00		
Carry outstanding balance on	lv to LINE 3. Sc	hedule D. for th	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:
(check only one)

:			
		9	
	X	10	

11

NAME OF COMMITTEE (In Full)

Committee to Elect I	Dan Sh	nores			
A. Full Name (Last, First, Middle Initial) of Plymouth Bay Consulting	Debtor or Cre	ditor	Nature of Debt (Purpose): Compliance Consulting (Contract Bonus Agreement)		
Mailing Address 7 Alvin Rd					
City Plymouth	State MA	Zip Code 02360			
Outstanding Balance Beginning This Period	od		Transaction ID : 764-		
10200.00	7				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
0.00		0.00	10200.00		
B. Full Name (Last, First, Middle Initial) of D	ebtor or Cred	litor	Nature of Debt (Purpose):		
Shores, Daniel, L, ,			Miscellaneous Expenses (FaceBook Boosts & Fuel)		
Mailing Address 14 Dewey Avenue					
City	State	Zip Code			
Sandwich	MA .	02563			
Outstanding Balance Beginning This Period	od		Transaction ID : 652-		
2151.85					
Amount Incurred This Period	-	Payment This Period	Outstanding Balance at Close of This Period		
0.00	ـــا ا	0.00	2151.85		
C. Full Name (Last, First, Middle Initial) of	Debtor or Cre	ditor	Nature of Debt (Purpose):		
Mailing Address			_		
City	State	Zip Code			
Outstanding Balance Beginning This Period	od				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
		7 7 7			
I) SUBTOTALS This Period This Page (option	nal)		12351.85		
2) TOTALS This Period (last page this line nu	mber only) ····		12351.85		
3) TOTAL OUTSTANDING LOANS from Sche	edule C (last p	page only)·····	206000.00		
4) ADD 2) and 3) and carry forward to appro	▶ 218351.85				