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FEC

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An	Authorized Com	ımittee	Offi	ce Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		cample: If typing, ty	pe 12FE4M5	
Committee to Elec	t Dan Shores				ı
ADDRESS (number and stre	et) 14 Dewey Ave	9.			
▼ Check if different					
than previously reported. (ACC)	Sandwich			MA   025	63
2. FEC IDENTIFICATION	N NIIMRER ▼	CITY A		STATE A	ZIP CODE A
z. TEO IDENTIFICATIO	N NOWIBER V	-			STATE ▼ DISTRICT
C C00556217		3. IS THIS REPORT	X NEW (N) O	R AMENDED (A)	MA 09
4 7/05 05 0500	<b>-</b>	İ			
4. TYPE OF REPOR		(b) 12-Day <b>PRE</b>	-Election Report fo	r the:	
(a) Quarterly Reports	5:	П	Primary (12P)	General (12G)	Runoff (12R)
April 15 Quar	rterly Report (Q1)	H		and the second	
July 15 Quar	terly Report (Q2)		Convention (12C)	Special (12S)	
	Quarterly Report (Q3)	Election on	M M / D	D / Y " Y " Y " Y	in the State of
January 31 Y	ear-End Report (YE)	(c) 30-Day <b>POS</b>	ST-Election Report	for the:	
			General (30G)	Runoff (30R)	Special (30S)
Termination F	Report (TER)	Election on	M M / D	D / Y Y Y Y	in the State of
5. Covering Period	M M / D 01	/ Y Y Y Y Y Y Y Y 2018	through	M M / D D / Y	Y Y Y 2018
I certify that I have examir			nowledge and belie	f it is true, correct and co	mplete.
Type or Print Name of Tre	Shores, Jam asurer	es, L, Mr.,			
Signature of Treasurer	Shores, James, L, Mr.,		[Electronically Filed]	Date	10 / Y Y Y Y Y Y 2018
NOTE: Submission of false.	erroneous, or incomple	ete information mav	subject the person s	signing this Report to the p	enalties of 52 U.S.C. §30109
Office			,	<u> </u>	2.2.2.3.00
Use					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

2018 2018 09 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

Report Covering the Period: From: 07 01 2018 To: 09 30 2018

I. RECEIPTS		ECEIPTS COLUMN A Total This Period	
1. C	ONTRIBUTIONS (other than loans) FROM:		
(a	•		
	Political Committees	0.00	0.00
	(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
		0.00	0.00
(b (c		0.00	0.00
(C	(such as PACs)	0.00	0.00
	(000) 00 // (00)		7 7 7
(d	d) The Candidate	0.00	0.00
(e	•		
	(other than loans)	200	
	(add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
2. TI	RANSFERS FROM OTHER		
Α	UTHORIZED COMMITTEES	0.00	0.00
3 10	OANS:		
0. L			
	Candidate	0.00	0.00
		0.00	0.00
(b	•	0.00	0.00
(c	c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
	(add Lines To(a) and (b))	9 9	
	FFSETS TO OPERATING		
	XPENDITURES	0.00	745.85
(F	Refunds, Rebates, etc.)	0.00	145.00
5. O	THER RECEIPTS		
	Dividends, Interest, etc.)	0.00	0.00
	OTAL RECEIPTS (add Lines		
1	1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	745.85
(C	carry total to Line 24, page 4)	9	9 9 9

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 11

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	1837.34
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
	(b) Political Party Committees	0.00	0.00
	(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	1837.34
	III. CASH SL	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	927.56
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		927.56
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	0.00
	CASH ON HAND AT CLOSE OF REPORTING	C DEDIOD	

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

PAGE 5
FOR LINE NUMBER: (check only one)

**X** 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	 e			
Sandwich		MA	02563		<b>X</b> P€	ersonal Funds of the (	Candidate
Original Amount of Loan		Cumulative Pa	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 <sup>M</sup> / D12 <sup>D</sup> / 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	, Jointaule D. Cally	ioiwalu lo d	ppropriate little of St	arriiridi y.

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

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

11

13b NAME OF COMMITTEE (In Full) Transaction ID: 655-9 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 15000.00 0.00 15000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D03D M09M 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)..... 15000.00 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

FOR LINE NUMBER: (check only one)

PAGE

13a

			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, ,		☐ 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	ation		
		Amour			$\overline{}$
City	ZIP Code	Guarar Outsta		y y w	
2. Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	ation		
		Amour			
City	ZIP Code	Guarar Outsta		7 7	
3. Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	ation		
		Amour Guarar			$\overline{}$
City	ZIP Code	Outsta		y	_
4. Full Name (Last, First, Middle Initial)		Name	of Employer		
Mailing Address		Occup	ation		
		Amour			
City State	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** OF FOR LINE NUMBER: **X** 13a (check only one)

11

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 <sup>D</sup>25<sup>D</sup> 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

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FOR LINE NUMBER: (check only one)

**X** 13a

OF

		100	
NAME OF COMMITTEE (In Full)  Committee to Elect Dan Shores		Transaction ID : 102-4	
LOAN SOURCE Full Name (Look First M	liddle Initial	Flastian: acco	
Shores, Daniel, L, ,	☐ Memo Item		
Mailing Address 14 Dewey Avenue	Other (specify) ▼		
City	State	ZIP Code  Personal Funds of the Candidate	
Sandwich	dwich MA 02563		
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
5000.00		0.00 5000.00	
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)	
M02M / D02D / Y Z014 Y	M M / D D	% (apr) Yes X 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	ZIP Code	Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City State	ZIP Code	Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount Guaranteed	
City	ZIP Code	Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
	T	Amount Guaranteed	
City	ZIP Code	Outstanding:	
CURTOTALS This Deviced This Dags (entions)			
SUBTOTALS This Period This Page (optional)	J	5000.00	
TOTALS This Period (last page in this line or	ıly)		
Carry outstanding balance only to LINE 3, Se	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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

FOR LINE NUMBER: (check only one)

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13a

				Detailed Garrina	y rage	13b
NAME OF COMMITTEE (In Full)	01			Tra	ansaction ID : 101-2	
Committee to Elect Da	n Shores					
LOAN SOURCE Full Name	(Last, First, Mic	ddle Initial)		☐ Memo	Item Election: 2014	
Shores, Daniel, L, ,			rimary			
					General	
Mailing Address 14 Dewey Avenue					Other (specify)	
City		State	ZIP Code	<u> </u>	-	
Sandwich		MA	02563	•	<b>✗</b> Personal Funds	of the Candidate
Original Amount of Loan		Cumulative Pa	ymont To D	ato	Balance Outstanding at Clo	eo of This Poris
Original Amount of Loan		Cultivative Fa	ayırılerik 10 D	ale	balance Outstanding at Cio	se of This Fello
2	2000.00			0.00		2000.00
TERMS Date Incurred		Γ	Date Due	Interest	t Rate 5	Secured:
M <sub>01</sub> M / D <sub>05</sub> D / Y	ž014 <sup>Y</sup>	M M / D D	) / Y Y	NA <sup>Y</sup> Y	0.00	
	2014			100	% (apr)	Yes X No
List All Endorsers or Guara	, ,,	o Loan Source				
1. Full Name (Last, First, M	liddle Initial)		1	Name of Employer		
Mailing Address			(	Occupation		
			,	Amount		
City	State	ZIP Code		Guaranteed Outstanding:	9	
2. Full Name (Last, First, Mi	ddle Initial)		1	Name of Employer		
Mailing Address			(	Occupation		
				Amount		
City	State	ZIP Code		Guaranteed		
				Outstanding:	, , , , , , , , , , , , , , , , , , , ,	
3. Full Name (Last, First, Mi	ddle Initial)			Name of Employer		
Mailing Address			(	Occupation		
			<u> </u>	Amount		
City	State	ZIP Code		Guaranteed		
				Outstanding:	, , , , , , , , , , , , , , , , , , , ,	
4. Full Name (Last, First, Mi	ddle Initial)		1	Name of Employer		
Mailing Address			(	Occupation		
			7	Amount		
City	State	ZIP Code		Guaranteed Outstanding:	7 7	
	<u>'</u>	•	<u>'</u>			
SUBTOTALS This Period This	Page (optional)			······		2000.00
TOTALS This Period (last page	in this line only	/)		······		206000.00
Carry outstanding balance onl	v to LINE 2 Sol	nedule D. for thi	is line If no	Schedule D. com	v forward to appropriate line	e of Summary
- Jany Juistanuniu Dalance Offi	y to line of oci	iouuio Di IUI IIII	13 IIIIC. II IIC	, Julieuule D, Caff\	y iviwaiu to appiopilate III)	o or ourinilary.

# 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	A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  Plymouth Bay Consulting						
Mailing Address 7 Alvin Rd							
City Plymouth							
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	<b>▶</b> 218351.85						