

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Committee to Elect Dan Shores

Report Covering the Period: From: / / To: / /

| | 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)).... | 48239.29 | 48239.29 |
| (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))..... | 48239.29 | 48239.29 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 29221.30 | 29221.30 |
| (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))..... | 29221.30 | 29221.30 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 176017.99 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 160703.31 | |

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)

Write or Type Committee Name

Committee to Elect Dan Shores

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)..... | 44015.24 | 44015.24 |
| (ii) Unitemized..... | 4224.05 | 4224.05 |
| (iii) TOTAL of contributions from individuals ▶ | 48239.29 | 48239.29 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) The Candidate..... | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 48239.29 | 48239.29 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | | |
| | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate..... | 157000.00 | 157000.00 |
| (b) All Other Loans..... | 0.00 | 0.00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))..... | 157000.00 | 157000.00 |
| 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)..... ▶ | 205239.29 | 205239.29 |

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES..... | 29221.30 | 29221.30 |
| 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) ► | 29221.30 | 29221.30 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 0.00 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)..... | 205239.29 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 205239.29 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 29221.30 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 176017.99 |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 5 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

| | | | |
|---|---------------------------------|--|--|
| Full Name (Last, First, Middle Initial) Daniel L Shores | | Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 09 / 2013 | |
| Mailing Address 14 Dewey Avenue | | Transaction ID : 0000211 | |
| City Sandwich | State MA | Zip Code 02563 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 23.54 | |
| Name of Employer Self | Occupation Candidate | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 23.54 | | |
| IN-KIND: Consult Meeting: Food & Bev | | | |

| | | | |
|---|---------------------------------|--|--|
| Full Name (Last, First, Middle Initial) Daniel L Shores | | Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 26 / 2013 | |
| Mailing Address 14 Dewey Avenue | | Transaction ID : 0000212 | |
| City Sandwich | State MA | Zip Code 02563 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 24.00 | |
| Name of Employer Self | Occupation Candidate | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 47.54 | | |
| IN-KIND: Parking | | | |

| | | | |
|---|---------------------------------|--|--|
| Full Name (Last, First, Middle Initial) Daniel L Shores | | Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2013 | |
| Mailing Address 14 Dewey Avenue | | Transaction ID : 0000213 | |
| City Sandwich | State MA | Zip Code 02563 | |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 21.28 | |
| Name of Employer Self | Occupation Candidate | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 68.82 | | |
| IN-KIND: Consult Meeting: Food & Bev | | | |

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 68.82 |
| TOTAL This Period (last page this line number only)..... | 68.82 |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Daniel L Shores

Mailing Address 14 Dewey Avenue

City Sandwich State MA Zip Code 02563

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **297.78**

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 01 / 2014

Transaction ID : 0000214

Amount of Each Receipt this Period
228.96

IN-KIND: Teleconferencing Fee

B. Full Name (Last, First, Middle Initial)
Daniel L Shores

Mailing Address 14 Dewey Avenue

City Sandwich State MA Zip Code 02563

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **313.05**

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 06 / 2014

Transaction ID : 0000215

Amount of Each Receipt this Period
15.27

IN-KIND: Consult Meeting: Food & Bev

C. Full Name (Last, First, Middle Initial)
Daniel L Shores

Mailing Address 14 Dewey Avenue

City Sandwich State MA Zip Code 02563

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **315.24**

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 24 / 2014

Transaction ID : 0000216

Amount of Each Receipt this Period
2.19

IN-KIND: Consult Meeting: Food & Bev

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

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

246.42

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Max Grant

Mailing Address 3514 N Abingdon St

City Arlington State VA Zip Code 22207

FEC ID number of contributing federal political committee. **C**

Name of Employer Latham & Watkins Occupation atty

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : 0000005

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Michael Toohey

Mailing Address 6238 N Neva Ave

City Chicago State IL Zip Code 60631

FEC ID number of contributing federal political committee. **C**

Name of Employer Norwood Crossing Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 04 / 2014

Transaction ID : 0000006

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Kristen Harvey

Mailing Address 172 Ashland Street

City Melrose State MA Zip Code 02176

FEC ID number of contributing federal political committee. **C**

Name of Employer Melrose Public Schools Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 06 / 2014

Transaction ID : 0000009

Amount of Each Receipt this Period
 500.00

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

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

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
John S Anderegg Jr.

Mailing Address 55 Old head of the Bay Rd.

| | | |
|----------------------|-------------|-------------------|
| City Buzzards Bay | State MA | Zip Code 02532 |
|----------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--------------------------|-----------------------|
| Name of Employer Self | Occupation Retired |
|--------------------------|-----------------------|

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 06 / 2014

Transaction ID : 0000060

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Chris McDonald

Mailing Address 24991 Calle Arenal

| | | |
|---------------------|-------------|-------------------|
| City Lake Forest | State CA | Zip Code 92630 |
|---------------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|----------------------------------|--|
| Name of Employer Saint-Gobain | Occupation Business Manager - Pharmaceutical Syst |
|----------------------------------|--|

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 07 / 2014

Transaction ID : 0000010

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Thomas J Seguin

Mailing Address 29 Old Oyster Rd

| | | |
|----------------|-------------|-------------------|
| City Cotuit | State MA | Zip Code 02635 |
|----------------|-------------|-------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--------------------------|------------------------|
| Name of Employer Self | Occupation Engineer |
|--------------------------|------------------------|

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 07 / 2014

Transaction ID : 0000061

Amount of Each Receipt this Period
500.00

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

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

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Roger Shores Jr.

Mailing Address 1706 N Sedgwick St

City Chicago State IL Zip Code 60614

FEC ID number of contributing federal political committee. **C**

Name of Employer The Marmon Group Occupation Group President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 09 / 2014

Transaction ID : 0000012

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Roger Shores Jr.

Mailing Address 1706 N Sedgwick St

City Chicago State IL Zip Code 60614

FEC ID number of contributing federal political committee. **C**

Name of Employer The Marmon Group Occupation Group President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 09 / 2014

Transaction ID : 0000057

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Richard Ghiorse

Mailing Address 98 Flint Locke Dr

City Weymouth State MA Zip Code 02189

FEC ID number of contributing federal political committee. **C**

Name of Employer Analog Devices Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : 0000013

Amount of Each Receipt this Period
 500.00

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

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

5700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Peter Ghiorse

Mailing Address 539 Old Post Rd

City Wyckoff State NJ Zip Code 07481

FEC ID number of contributing federal political committee. **C**

Name of Employer ghiorse & sorrenti, inc Occupation business owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : 0000014

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Jim Curtis

Mailing Address 130 E 18th St
12e

City New York State NY Zip Code 10003

FEC ID number of contributing federal political committee. **C**

Name of Employer remedy Occupation president

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : 0000015

Amount of Each Receipt this Period
 850.00

C. Full Name (Last, First, Middle Initial)
Steven Lieberman

Mailing Address 7711 Mary Cassatt Dr

City Potomac State MD Zip Code 20854

FEC ID number of contributing federal political committee. **C**

Name of Employer Rothwell Figg Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 13 / 2014

Transaction ID : 0000016

Amount of Each Receipt this Period
 500.00

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

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

3950.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Peter Ghiorse

Mailing Address 539 Old Post Rd

City State Zip Code
Wyckoff NJ 07481

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ghiorsi & sorrenti, inc business owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 13 / 2014

Transaction ID : 0000058

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Joseph Broderick

Mailing Address 155 K St

City State Zip Code
Boston MA 02127

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Oracle Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 14 / 2014

Transaction ID : 0000017

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Alex Kent

Mailing Address 56 Cliffside Drive

City State Zip Code
Plymouth MA 02360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Realestate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 15 / 2014

Transaction ID : 0000197

Amount of Each Receipt this Period
900.00
IN-KIND: 1/2 Month Rent

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

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

3750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 12 OF 45

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

A. Full Name (Last, First, Middle Initial)
Lynn Levitt
 Mailing Address 377 W Rose Finch Cir
 City State Zip Code
 Highlands Ranch CO 80129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Levitt Properties, LLC Managing Business Partner
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2014
Transaction ID : 0000019
 Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Lynn Levitt
 Mailing Address 377 W Rose Finch Cir
 City State Zip Code
 Highlands Ranch CO 80129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Levitt Properties, LLC Managing Business Partner
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2014
Transaction ID : 0000059
 Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Lois A Shores
 Mailing Address 24 Rochester Road
 City State Zip Code
 Carver MA 02330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Standish Acres Cranberries Self-Employed
 Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014
Transaction ID : 0000062
 Amount of Each Receipt this Period
 550.00

SUBTOTAL of Receipts This Page (optional).....
TOTAL This Period (last page this line number only).....

5750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Bill Ghorse

Mailing Address 529 Ellis Hollow Creek Rd

City Ithaca State NY Zip Code 14850

FEC ID number of contributing federal political committee. **C**

Name of Employer Cornell University Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : 0000023

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Kristen Harvey

Mailing Address 172 Ashland Street

City Melrose State MA Zip Code 02176

FEC ID number of contributing federal political committee. **C**

Name of Employer Melrose Public Schools Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : 0000067

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Elizabeth M Osgood

Mailing Address P.O. Box 349

City Monument Beach State MA Zip Code 02553

FEC ID number of contributing federal political committee. **C**

Name of Employer NA Occupation NA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : 0000085

Amount of Each Receipt this Period
 250.00

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

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

850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Lynn A Shaughnessy | | Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014 | |
| Mailing Address 327 Long Pond Road | | Transaction ID : 0000086 | |
| City Plymouth | State MA | Zip Code 02360 | |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer Taycam, LLC | Occupation Self-Employed | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Lois A Shores | | Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014 | |
| Mailing Address 24 Rochester Road | | Transaction ID : 0000088 | |
| City Carver | State MA | Zip Code 02330 | |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 50.00 | |
| Name of Employer Standish Acres Cranberries | Occupation Self-Employed | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 600.00 | | |

| | | | |
|---|----------------------------------|--|--|
| Full Name (Last, First, Middle Initial) C. Patrick Shores | | Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014 | |
| Mailing Address 19 Sewall Street | | Transaction ID : 0000089 | |
| City Quincy | State MA | Zip Code 02170 | |
| FEC ID number of contributing federal political committee. | | Amount of Each Receipt this Period 500.00 | |
| Name of Employer LPC Electric, LLC | Occupation Self-Employed | | |
| Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.00 | | |

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional)..... | 1050.00 |
| TOTAL This Period (last page this line number only)..... | [Empty Box] |

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Dan Grimes

Mailing Address 79 Purchase Street

City Carver State MA Zip Code 02330

FEC ID number of contributing federal political committee. **C**

Name of Employer Health Bridge Management Occupation Healthcare Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 28 / 2014

Transaction ID : 0000092

Amount of Each Receipt this Period
500.00

Kickoff Fundraiser

B. Full Name (Last, First, Middle Initial)
Christopher O'Connor

Mailing Address 30 Pioneer Rd

City Hingham State MA Zip Code 02043

FEC ID number of contributing federal political committee. **C**

Name of Employer SSH Occupation Sr. VP, Philanthropy

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 01 / 2014

Transaction ID : 0000024

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Patricia R Weston

Mailing Address P.O. Box 54

City Carver State MA Zip Code 02330

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 01 / 2014

Transaction ID : 0000063

Amount of Each Receipt this Period
500.00

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

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

1500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Joseph A Hynds

Mailing Address 1123 Litton Lane

City Mclean State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Rothwell, Figg, Ernst, & Manbeck P.C. Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 01 / 2014

Transaction ID : 0000064

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Joseph A Hynds

Mailing Address 1123 Litton Lane

City Mclean State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Rothwell, Figg, Ernst, & Manbeck P.C. Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 01 / 2014

Transaction ID : 0000066

Amount of Each Receipt this Period
 2600.00

C. Full Name (Last, First, Middle Initial)
Joseph Green

Mailing Address 706 Juniper Rd

City Glenview State IL Zip Code 60025

FEC ID number of contributing federal political committee. **C**

Name of Employer CBOE Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2014

Transaction ID : 0000026

Amount of Each Receipt this Period
 1000.00

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

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

6200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Lisa Locke

Mailing Address 25257 Oribi PI

City State Zip Code
Aldie VA 20105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rothwell, Figg, Ernst & Manbeck, p.c. Trademark Operations Manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2014

Transaction ID : 0000027

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Nancy Linck

Mailing Address 646 Westbourne St

City State Zip Code
San Diego CA 92037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rothwell, Figg, Ernst & Manbeck Patent Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 07 / 2014

Transaction ID : 0000029

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Christina Gifford

Mailing Address 3205 Cleveland Ave NW

City State Zip Code
Washington DC 20008

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rothwell Figg Ernst & Manbeck PC Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : 0000033

Amount of Each Receipt this Period
250.00

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

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

750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Elizabeth Brenner Leifer

Mailing Address 4717 Drummond Ave

City State Zip Code
Chevy Chase MD 20815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RFEM ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : 0000034

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
Edward Figg

Mailing Address 3625 49th St NW

City State Zip Code
Washington DC 20016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROTHWELL, FIGG, ERNST & MANBECK ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : 0000035

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
Matthew Leland

Mailing Address 5554 15th St N

City State Zip Code
Arlington VA 22205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
McDermott Will & Emery LLP Partner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : 0000036

Amount of Each Receipt this Period
250.00

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

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

5450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 19 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Stephen Key

Mailing Address 9140 Stonegarden Drive

City Lorton State VA Zip Code 22079

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Patent Search Professional

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : 0000095

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Brian Morris

Mailing Address 286 High St

City Newburyport State MA Zip Code 01950

FEC ID number of contributing federal political committee. **C**

Name of Employer GW Occupation Sales

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2014

Transaction ID : 0000037

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Erik Sivertson

Mailing Address 1754 Corcoran St NW
Apt # 50R

City Washington State DC Zip Code 20009

FEC ID number of contributing federal political committee. **C**

Name of Employer Attorney Occupation Rothwell Figg Ernst, & Manbeck P.C.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0000038

Amount of Each Receipt this Period
 250.00

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

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

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Matthew Ghiorse

Mailing Address 484 Broadway

City Dobbs Ferry State NY Zip Code 10522

FEC ID number of contributing federal political committee. **C**

Name of Employer Ghiorsi & Sorrenti Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : 0000039

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Dante Sorrenti

Mailing Address 512 Old Post Rd

City Wyckoff State NJ Zip Code 07481

FEC ID number of contributing federal political committee. **C**

Name of Employer Ghiorsi & Sorrenti, Inc. Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2014

Transaction ID : 0000041

Amount of Each Receipt this Period
 1500.00

C. Full Name (Last, First, Middle Initial)
Edward Pease

Mailing Address 5147 E Old Maple Ave

City Terre Haute State IN Zip Code 47803

FEC ID number of contributing federal political committee. **C**

Name of Employer Rolls-Royce North America Occupation SVP-Government Relations

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 22 / 2014

Transaction ID : 0000043

Amount of Each Receipt this Period
 500.00

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

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

3000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Jonathan Bingham

Mailing Address PO Box 7

City State Zip Code
Waterbury Center VT 05677

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Janeiro Digital executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : 0000045

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
James Halloran

Mailing Address 202 Country Club Way

City State Zip Code
Ipswich MA 01938

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Baltic Trail manager

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : 0000046

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Christopher O'Connor

Mailing Address 30 Pioneer Rd

City State Zip Code
Hingham MA 02043

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SSH Sr. VP, Philanthropy

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : 0000054

Amount of Each Receipt this Period
500.00

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

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

1000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 OF 45 |
| | <input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Joo Mee Kim

Mailing Address 1881 N Nash St

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C**

Name of Employer Rothwell, Figg, Ernst & Manbeck Occupation Lawyer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : 0000056

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

44015.24

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

| | | |
|---|--|---------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 23 OF 45 |
| | <input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15 | |

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

A. Full Name (Last, First, Middle Initial)
Daniel L Shores

Mailing Address 14 Dewey Avenue

City Sandwich State MA Zip Code 02563

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 05 / 2014

Transaction ID : 0000101

Amount of Each Receipt this Period
 2000.00

Candidate's Personal Funds - NA

B. Full Name (Last, First, Middle Initial)
Daniel L Shores

Mailing Address 14 Dewey Avenue

City Sandwich State MA Zip Code 02563

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 02 / 2014

Transaction ID : 0000102

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
Daniel L Shores

Mailing Address 14 Dewey Avenue

City Sandwich State MA Zip Code 02563

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Candidate

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : 0000103

Amount of Each Receipt this Period
 150000.00

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

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

157000.00

157000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 OF 45 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Daniel L Shores | | Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013 |
| Mailing Address 14 Dewey Avenue | | Amount of Each Disbursement this Period 23.54 |
| City Sandwich | State MA | Zip Code 02563 |
| Purpose of Disbursement IN-KIND: Consult Meeting: Food & Bev | Category/ Type 007 | |
| Candidate Name | | Transaction ID : 0000211-IK |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | (contributor) In-Kind Received |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Daniel L Shores | | Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013 |
| Mailing Address 14 Dewey Avenue | | Amount of Each Disbursement this Period 24.00 |
| City Sandwich | State MA | Zip Code 02563 |
| Purpose of Disbursement IN-KIND: Parking | Category/ Type 001 | |
| Candidate Name | | Transaction ID : 0000212-IK |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | (contributor) In-Kind Received |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Daniel L Shores | | Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2013 |
| Mailing Address 14 Dewey Avenue | | Amount of Each Disbursement this Period 21.28 |
| City Sandwich | State MA | Zip Code 02563 |
| Purpose of Disbursement IN-KIND: Consult Meeting: Food & Bev | Category/ Type 007 | |
| Candidate Name | | Transaction ID : 0000213-IK |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | (contributor) In-Kind Received |
| State: District: | | |

| | |
|---|-------|
| SUBTOTAL of Disbursements This Page (optional)..... | 68.82 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 25 OF 45 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Daniel L Shores | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2014 | |
| Mailing Address 14 Dewey Avenue | | | Amount of Each Disbursement this Period 228.96 | |
| City Sandwich | State MA | Zip Code 02563 | Transaction ID : 0000214-IK | |
| Purpose of Disbursement IN-KIND: Teleconferencing Fee | | Category/ Type 001 | Paid to AT&T, All other Candidate In-Kind donations are to Vendors not Aggregating over \$200 | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Daniel L Shores | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2014 | |
| Mailing Address 14 Dewey Avenue | | | Amount of Each Disbursement this Period 15.27 | |
| City Sandwich | State MA | Zip Code 02563 | Transaction ID : 0000215-IK | |
| Purpose of Disbursement IN-KIND: Consult Meeting: Food & Bev | | Category/ Type 007 | (contributor) In-Kind Received | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. Delux Business Systems | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014 | |
| Mailing Address 3680 Victoria St. N. | | | Amount of Each Disbursement this Period 124.79 | |
| City Shoreview | State MN | Zip Code 55126 | Transaction ID : 0000194 | |
| Purpose of Disbursement Bank Fee | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 369.02 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 OF 45 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

| | | | | | |
|--|--|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. Zachery Holme Photography | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2014 | | |
| Mailing Address 32 Read St. | | | Amount of Each Disbursement this Period 375.00 | | |
| City Seekonk | State MA | Zip Code 02771 | Transaction ID : 0000104 | | |
| Purpose of Disbursement Photography Services | | 003 Category/ Type | | | |
| Candidate Name | | | | | |
| Office Sought: | House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: | District: | | | | |

| | | | | | |
|--|--|--|---|--|--|
| Full Name (Last, First, Middle Initial) B. Staples | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014 | | |
| Mailing Address 131 Somoset St. | | | Amount of Each Disbursement this Period 78.19 | | |
| City Plymouth | State MA | Zip Code 02360 | Transaction ID : 0000105 | | |
| Purpose of Disbursement Office Supplies | | 001 Category/ Type | | | |
| Candidate Name | | | | | |
| Office Sought: | House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: | District: | | | | |

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|---|--|--|---|--|--|
| Full Name (Last, First, Middle Initial) c. Lyric Consulting | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 18 / 2014 | | |
| Mailing Address 89 North Main St. Suite 205 | | | Amount of Each Disbursement this Period 500.00 | | |
| City Andover | State MA | Zip Code 01810 | Transaction ID : 0000106 | | |
| Purpose of Disbursement Media Consulting | | 001 Category/ Type | | | |
| Candidate Name | | | | | |
| Office Sought: | House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: | District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 953.19 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 27 OF 45 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) A. Daniel L Shores | | | Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014 | |
| Mailing Address 14 Dewey Avenue | | | Amount of Each Disbursement this Period 2.19 | |
| City Sandwich | State MA | Zip Code 02563 | Transaction ID : 0000216-IK | |
| Purpose of Disbursement IN-KIND: Consult Meeting: Food & Bev | | Category/ Type 007 | (contributor) In-Kind Received | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) B. Lyric Consulting | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 03 / 2014 | |
| Mailing Address 89 North Main St. Suite 205 | | | Amount of Each Disbursement this Period 86.50 | |
| City Andover | State MA | Zip Code 01810 | Transaction ID : 0000114 | |
| Purpose of Disbursement Media Consulting | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|--------------------------|---|--|
| Full Name (Last, First, Middle Initial) C. FiLPAC LLC | | | Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014 | |
| Mailing Address 3624 Lieb St. | | | Amount of Each Disbursement this Period 1742.00 | |
| City Columbus | State OH | Zip Code 43214 | Transaction ID : 0000115 | |
| Purpose of Disbursement Software Licensing | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1830.69 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 OF 45 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Staples | | Date of Disbursement MM / DD / YYYY 02 / 08 / 2014 |
| Mailing Address 131 Somoset St. | | Amount of Each Disbursement this Period 103.80 |
| City Plymouth | State MA | |
| Zip Code 02360 | Purpose of Disbursement Office Supplies | Transaction ID : 0000116 |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Staples | | Date of Disbursement MM / DD / YYYY 02 / 11 / 2014 |
| Mailing Address 131 Somoset St. | | Amount of Each Disbursement this Period 212.46 |
| City Plymouth | State MA | |
| Zip Code 02360 | Purpose of Disbursement Campaign Print Material | Transaction ID : 0000121 |
| Candidate Name | Category/Type 006 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Democracy Engine LLC | | Date of Disbursement MM / DD / YYYY 02 / 13 / 2014 |
| Mailing Address 2125 14th St. NW Suite 101 West | | Amount of Each Disbursement this Period 195.43 |
| City Washington | State DC | |
| Zip Code 20009 | Purpose of Disbursement Bank Fee | Transaction ID : 0000183 |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 511.69 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 OF 45 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Staples | | Date of Disbursement MM / DD / YYYY 02 / 13 / 2014 |
| Mailing Address 131 Somoset St. | | Amount of Each Disbursement this Period 31.43 Transaction ID : 0000122 |
| City Plymouth | State MA | |
| Purpose of Disbursement Office Supplies | Category/ Type 001 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Precision Signz | | Date of Disbursement MM / DD / YYYY 02 / 14 / 2014 |
| Mailing Address 1055 Valley Dr. | | Amount of Each Disbursement this Period 391.50 Transaction ID : 0000125 |
| City Riverdale | State IA | |
| Purpose of Disbursement Campaign Print Material | Category/ Type 006 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Plimoth Plantation | | Date of Disbursement MM / DD / YYYY 02 / 14 / 2014 |
| Mailing Address P.O. Box 1620 | | Amount of Each Disbursement this Period 1000.00 Transaction ID : 0000123 |
| City Plymouth | State MA | |
| Purpose of Disbursement Fundraiser-Food/Beverage/Rental/Entertai | Category/ Type 003 | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1422.93 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|--|---|--|---|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 OF 45 | | | |
| | <input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a | <input type="checkbox"/> 18 <input type="checkbox"/> 20b | <input type="checkbox"/> 19a <input type="checkbox"/> 20c | <input type="checkbox"/> 19b <input type="checkbox"/> 21 | |

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

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Brewster Park Building Inc | | Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014 |
| Mailing Address 18 Main St. Ext. Suite 401 | | Amount of Each Disbursement this Period 1800.00 Transaction ID : 0000124 |
| City Plymouth | State MA | |
| Zip Code 02360 | Purpose of Disbursement Rent | Category/ Type 001 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. Alex Kent | | Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2014 |
| Mailing Address 56 Cliffside Drive | | Amount of Each Disbursement this Period 900.00 Transaction ID : 0000197-IK |
| City Plymouth | State MA | |
| Zip Code 02360 | Purpose of Disbursement IN-KIND: 1/2 Month Rent | Category/ Type 001 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | (contributor) In-Kind Received |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) c. Delux Business Systems | | Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2014 |
| Mailing Address 3680 Victoria St. N. | | Amount of Each Disbursement this Period 241.90 Transaction ID : 0000192 |
| City Shoreview | State MN | |
| Zip Code 55126 | Purpose of Disbursement Bank Fee | Category/ Type 001 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2941.90 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 31 OF 45 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

| | | | | |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial) A. Democracy Engine LLC | | | Date of Disbursement MM / DD / YYYY 02 / 20 / 2014 | |
| Mailing Address 2125 14th St. NW Suite 101 West | | | Amount of Each Disbursement this Period 274.74 | |
| City Washington | State DC | Zip Code 20009 | Transaction ID : 0000184 | |
| Purpose of Disbursement Bank Fee | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial) B. Michael P Coyne | | | Date of Disbursement MM / DD / YYYY 02 / 20 / 2014 | |
| Mailing Address 1917 Garden St. | | | Amount of Each Disbursement this Period 1000.00 | |
| City Park Ridge | State IL | Zip Code 60068 | Transaction ID : 0000130 | |
| Purpose of Disbursement Campaign Consulting | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

| | | | | |
|---|--|--------------------------|--|--|
| Full Name (Last, First, Middle Initial) c. Lou Barnicle Graphic Design | | | Date of Disbursement MM / DD / YYYY 02 / 20 / 2014 | |
| Mailing Address 127 Capt. Carlton's Rd | | | Amount of Each Disbursement this Period 450.00 | |
| City Cotuit | State MA | Zip Code 02653 | Transaction ID : 0000129 | |
| Purpose of Disbursement Logo Design | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | | |
| State: District: | | | | |

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| SUBTOTAL of Disbursements This Page (optional)..... | 1724.74 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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|---|---|---------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 OF 45 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Staples | | Date of Disbursement MM / DD / YYYY 02 / 21 / 2014 |
| Mailing Address 131 Somoset St. | | Amount of Each Disbursement this Period 195.49 Transaction ID : 0000131 |
| City Plymouth | State MA | |
| Zip Code 02360 | Purpose of Disbursement Campaign Print Material | Category/ Type 006 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Staples | | Date of Disbursement MM / DD / YYYY 02 / 22 / 2014 |
| Mailing Address 131 Somoset St. | | Amount of Each Disbursement this Period 110.35 Transaction ID : 0000132 |
| City Plymouth | State MA | |
| Zip Code 02360 | Purpose of Disbursement Campaign Print Material | Category/ Type 006 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) c. High Sails Strategies | | Date of Disbursement MM / DD / YYYY 02 / 22 / 2014 |
| Mailing Address 60 Ferncliffe Rd. | | Amount of Each Disbursement this Period 1000.00 Transaction ID : 0000138 |
| City Seekonk | State MA | |
| Zip Code 02771 | Purpose of Disbursement GOTV Consulting | Category/ Type 001 |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1305.84 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 33 OF 45 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. The Hamilton | | Date of Disbursement MM / DD / YYYY 02 / 25 / 2014 |
| Mailing Address 600 14th St. NW | | Amount of Each Disbursement this Period 100.00 Transaction ID : 0000135 |
| City Washington State DC Zip Code 20000 | Purpose of Disbursement Fundraiser-Food/Beverage/Rental/Entertai Candidate Name Category/Type 003 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Conagh Technologies inc | | Date of Disbursement MM / DD / YYYY 02 / 26 / 2014 |
| Mailing Address 50 Mattakesett St. | | Amount of Each Disbursement this Period 870.00 Transaction ID : 0000139 |
| City Pembroke State MA Zip Code 02359 | Purpose of Disbursement Office Equipment Rental Candidate Name Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) c. Democracy Engine LLC | | Date of Disbursement MM / DD / YYYY 02 / 27 / 2014 |
| Mailing Address 2125 14th St. NW Suite 101 West | | Amount of Each Disbursement this Period 205.17 Transaction ID : 0000185 |
| City Washington State DC Zip Code 20009 | Purpose of Disbursement Bank Fee Candidate Name Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District: | |

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|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1175.17 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|---------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 OF 45 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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

A. All American Signs

Full Name (Last, First, Middle Initial)
Mailing Address 15 Roberts Rd.

City Plymouth State MA Zip Code 02360

Purpose of Disbursement Office Supplies
Candidate Name
Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)
State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 491.14
Transaction ID : 0000140

Category/Type: 001

B. V-Sound

Full Name (Last, First, Middle Initial)
Mailing Address 169 Westerly Rd.

City Plymouth State MA Zip Code 02360

Purpose of Disbursement Fundraiser-Food/Beverage/Rental/Entertai
Candidate Name
Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)
State: District:

Date of Disbursement: 02 / 28 / 2014

Amount of Each Disbursement this Period: 400.00
Transaction ID : 0000145

Category/Type: 003

C. Plimoth Plantation

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 1620

City Plymouth State MA Zip Code 02362

Purpose of Disbursement Fundraiser-Food/Beverage/Rental/Entertai
Candidate Name
Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)
State: District:

Date of Disbursement: 02 / 28 / 2014

Amount of Each Disbursement this Period: 1042.66
Transaction ID : 0000146

Category/Type: 003

SUBTOTAL of Disbursements This Page (optional) 1933.80

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 35 OF 45 | | | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 | |

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

A. Lyric Consulting

Full Name (Last, First, Middle Initial)

Mailing Address 89 North Main St.
Suite 205

City Andover State MA Zip Code 01810

Purpose of Disbursement Media Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 02 / 28 / 2014

Amount of Each Disbursement this Period 1139.00

Transaction ID : 0000147

Category/Type 001

B. Staples

Full Name (Last, First, Middle Initial)

Mailing Address 131 Somoset St.

City Plymouth State MA Zip Code 02360

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 02 / 28 / 2014

Amount of Each Disbursement this Period 25.31

Transaction ID : 0000141

Category/Type 001

c. Staples

Full Name (Last, First, Middle Initial)

Mailing Address 131 Somoset St.

City Plymouth State MA Zip Code 02360

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 03 / 03 / 2014

Amount of Each Disbursement this Period 46.74

Transaction ID : 0000148

Category/Type 001

SUBTOTAL of Disbursements This Page (optional)..... 1211.05

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 36 OF 45 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

Full Name (Last, First, Middle Initial)
A. Staples

Mailing Address 131 Somoset St.

City Plymouth State MA Zip Code 02360

Purpose of Disbursement Office Supplies 001 Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 05 / 2014

Amount of Each Disbursement this Period: 27.40

Transaction ID : 0000150

Full Name (Last, First, Middle Initial)
B. Hotels.com

Mailing Address 10440 N. Central Expwy. Suite 400

City Dallas State TX Zip Code 75231

Purpose of Disbursement Lodging Hotel 002 Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 05 / 2014

Amount of Each Disbursement this Period: 364.11

Transaction ID : 0000151

Full Name (Last, First, Middle Initial)
c. Democracy Engine LLC

Mailing Address 2125 14th St. NW Suite 101 West

City Washington State DC Zip Code 20009

Purpose of Disbursement Bank Fee 001 Category/Type

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 06 / 2014

Amount of Each Disbursement this Period: 45.80

Transaction ID : 0000186

SUBTOTAL of Disbursements This Page (optional) 437.31

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 37 OF 45 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Precision Signz | | Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014 |
| Mailing Address 1055 Valley Dr. | | Amount of Each Disbursement this Period 603.68 Transaction ID : 0000154 |
| City Riverdale | State IA | |
| Purpose of Disbursement Campaign Print Material | | Category/ Type 006 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. GOP 8 | | Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014 |
| Mailing Address 24 Old Coach Rd | | Amount of Each Disbursement this Period 250.00 Transaction ID : 0000157 |
| City Cohasset | State MA | |
| Purpose of Disbursement Contribution - Political Event | | Category/ Type 011 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) c. Orbitz/US Airways | | Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014 |
| Mailing Address 500 W. Madison Suite 1000 | | Amount of Each Disbursement this Period 438.00 Transaction ID : 0000155 |
| City Chicago | State IL | |
| Purpose of Disbursement Airfare | | Category/ Type 002 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1291.68 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 38 OF 45 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

| | | | | |
|---|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Democracy Engine LLC | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014 | |
| Mailing Address 2125 14th St. NW Suite 101 West | | | Amount of Each Disbursement this Period 62.30 | |
| City Washington | State DC | Zip Code 20009 | Transaction ID : 0000187 | |
| Purpose of Disbursement Bank Fee | | Category/ Type 001 | | |
| Candidate Name | | | | |
| Office Sought: | House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: | District: | | | |

| | | | | |
|--|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Precision Signz | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014 | |
| Mailing Address 1055 Valley Dr. | | | Amount of Each Disbursement this Period 180.00 | |
| City Riverdale | State IA | Zip Code 52722 | Transaction ID : 0000160 | |
| Purpose of Disbursement Campaign Print Material | | Category/ Type 006 | | |
| Candidate Name | | | | |
| Office Sought: | House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: | District: | | | |

| | | | | |
|---|--|--|---|--|
| Full Name (Last, First, Middle Initial) c. The Hamilton | | | Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014 | |
| Mailing Address 600 14th St. NW | | | Amount of Each Disbursement this Period 4986.20 | |
| City Washington | State DC | Zip Code 20000 | Transaction ID : 0000162 | |
| Purpose of Disbursement Fundraiser-Food/Beverage/Rental/Entertai | | Category/ Type 003 | | |
| Candidate Name | | | | |
| Office Sought: | House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| State: | District: | | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 5228.50 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | | |
|---|---|---------------|--|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 39 OF 45 | | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | | |

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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Staples | | Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014 |
| Mailing Address 131 Somoset St. | | Amount of Each Disbursement this Period 811.44 |
| City Plymouth | State MA | |
| Zip Code 02360 | Purpose of Disbursement Office Supplies | Transaction ID : 0000161 |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Democracy Engine LLC | | Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014 |
| Mailing Address 2125 14th St. NW Suite 101 West | | Amount of Each Disbursement this Period 241.39 |
| City Washington | State DC | |
| Zip Code 20009 | Purpose of Disbursement Bank Fee | Transaction ID : 0000188 |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Alexander J Arsenault | | Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014 |
| Mailing Address 98 Moreland St. #4 | | Amount of Each Disbursement this Period 556.25 |
| City Somerville | State MA | |
| Zip Code 02145 | Purpose of Disbursement Logistics Consulting | Transaction ID : 0000167 |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 811.44 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | | PAGE 40 OF 45 | |
| | <input checked="" type="checkbox"/> 17 20a | <input type="checkbox"/> 18 20b | <input type="checkbox"/> 19a 20c | <input type="checkbox"/> 19b 21 |

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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. MAK Promotional Group | | Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014 |
| Mailing Address 562 Russells Mills Rd. | | Amount of Each Disbursement this Period 1911.44 |
| City S. Dartmouth | State MA Zip Code 02748 | |
| Purpose of Disbursement Campaign Print Material | Category/Type 006 | Transaction ID : 0000170 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. 2014 Mass Republican Convention | | Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014 |
| Mailing Address 85 Merrimac St. Suite 400 | | Amount of Each Disbursement this Period 400.00 |
| City Boston | State MA Zip Code 02114 | |
| Purpose of Disbursement Contribution - Political Event | Category/Type 011 | Transaction ID : 0000175 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) c. Democracy Engine LLC | | Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014 |
| Mailing Address 2125 14th St. NW Suite 101 West | | Amount of Each Disbursement this Period 132.64 |
| City Washington | State DC Zip Code 20009 | |
| Purpose of Disbursement Bank Fee | Category/Type 001 | Transaction ID : 0000189 |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 2444.08 |
| TOTAL This Period (last page this line number only)..... | |

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

| | | | | |
|---|---|---------------|--|--|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 41 OF 45 | | |
| | <input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21 | | | |

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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Staples | | Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014 |
| Mailing Address 131 Somoset St. | | Amount of Each Disbursement this Period 75.68 |
| City Plymouth | State MA | |
| Zip Code 02360 | Purpose of Disbursement Office Supplies | Transaction ID : 0000177 |
| Candidate Name | 001 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Alexander J Arsenault | | Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014 |
| Mailing Address 98 Moreland St. #4 | | Amount of Each Disbursement this Period 1524.38 |
| City Somerville | State MA | |
| Zip Code 02145 | Purpose of Disbursement Logistics Consulting | Transaction ID : 0000178 |
| Candidate Name | 001 Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement M M / D D / Y Y Y Y |
| Mailing Address | | Amount of Each Disbursement this Period |
| City | State | |
| Zip Code | Purpose of Disbursement | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1600.06 |
| TOTAL This Period (last page this line number only)..... | 27261.91 |

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Elect Dan Shores** Transaction ID : 103-4

| | |
|--|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Daniel L Shores | Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 14 Dewey Avenue | |

| | | |
|----------|-------|----------|
| City | State | ZIP Code |
| Sandwich | MA | 02563 |

| | | |
|-------------------------|----------------------------|---|
| 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: |
| M 03 / D 25 / Y 2014 Y | M M / D D / Y NA Y Y | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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: <input type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |

| | |
|---|--|
| SUBTOTALS This Period This Page (optional)..... | <input type="text" value="150000.00"/> |
| TOTALS This Period (last page in this line only)..... | <input type="text"/> |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | |

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Elect Dan Shores** Transaction ID : 102-4

| | |
|--|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) Daniel L Shores | Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 14 Dewey Avenue | |

| | | |
|----------|-------|----------|
| City | State | ZIP Code |
| Sandwich | MA | 02563 |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 5000.00 | 0.00 | 5000.00 |

TERMS

| | | | |
|------------------------|----------------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| M 02 / D 02 / Y 2014 Y | M M / D D / Y NA Y Y | 0.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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: <input type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |

| | |
|---|----------------------|
| SUBTOTALS This Period This Page (optional)..... | 5000.00 |
| TOTALS This Period (last page in this line only)..... | <input type="text"/> |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | |

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 101-2

Committee to Elect Dan Shores

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Daniel L Shores

Primary
 General
 Other (specify) ▼

Mailing Address

14 Dewey Avenue

City

State

ZIP Code

Sandwich

MA

02563

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

2000.00

0.00

2000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

01

05

2014

NA

0.00

% (apr)

Yes

No

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)..... ▶

2000.00

TOTALS This Period (last page in this line only)..... ▶

157000.00

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

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

| | | |
|--|----------|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor High Sails Strategies | | Nature of Debt (Purpose): GOTV Consulting |
| Mailing Address 60 Ferncliffe Rd. | | |
| City State | Zip Code | |
| Seekonk MA | 02771 | |

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID : 203-6 | |
| <input type="text" value="0.00"/> | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| <input type="text" value="1000.00"/> | <input type="text" value="0.00"/> | <input type="text" value="1000.00"/> |

| | | |
|---|----------|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lyric Consulting | | Nature of Debt (Purpose): Media Consulting |
| Mailing Address 89 North Main St. Suite 205 | | |
| City State | Zip Code | |
| Andover MA | 01810 | |

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID : 202-6 | |
| <input type="text" value="0.00"/> | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| <input type="text" value="2511.31"/> | <input type="text" value="0.00"/> | <input type="text" value="2511.31"/> |

| | | |
|---|----------|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor James Shores | | Nature of Debt (Purpose): Postage, Non-Bulk Mail |
| Mailing Address 7 Alvin Rd | | |
| City State | Zip Code | |
| Plymouth MA | 02360 | |

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period | Transaction ID : 204-6 | |
| <input type="text" value="0.00"/> | | |
| Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
| <input type="text" value="192.00"/> | <input type="text" value="0.00"/> | <input type="text" value="192.00"/> |

| | |
|--|--|
| 1) SUBTOTALS This Period This Page (optional) | <input type="text" value="3703.31"/> |
| 2) TOTALS This Period (last page this line number only) | <input type="text" value="3703.31"/> |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | <input type="text" value="157000.00"/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | <input type="text" value="160703.31"/> |