PAGE 1 / 11

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIN 3	For An A	uthorized Com	mittee		Off	ice Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		ample: If typing er the lines.	ı, type	12FE4M5	
Committee to Ele	ct Dan Shores					ı
ADDRESS (number and str	reet) 7 Alvin Rd					
▼ Check if differer	nt Line					
than previously reported. (ACC)	Plymouth				MA 023	860
2. FEC IDENTIFICATI	ON NUMBER ▼	CITY ▲		;	STATE A	ZIP CODE ▲
C C00556217		3. IS THIS REPORT	x NEW (N)	OR	AMENDED (A)	STATE ▼ DISTRICT MA 09 1
_	ts: arterly Report (Q1)	(b) 12-Day PRE	E-Election Repor Primary (12P) Convention (12		General (12G)	Runoff (12R)
October 15	Quarterly Report (Q3)	Election on	M M /	D D /	Y " Y " Y	in the State of
X January 31	Year-End Report (YE)	(c) 30-Day POS	T-Election Repo	ort for the:		
			General (30G)		Runoff (30R)	Special (30S)
Termination	Report (TER)	Election on	M M /	D D /	Y " Y " Y " Y	in the State of
5. Covering Period	M M / D D /	Y Y Y Y Y 2020	through	M M 12	/ D T D / Y	y y y 2020
I certify that I have exam Type or Print Name of Tr	Shores, James		nowledge and be	elief it is tr	ue, correct and co	omplete.
Signature of Treasurer	Shores, James, L, Mr.,		[Electronically Fi	iled]	Date 01	31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false	, erroneous, or incomplet	te information may	subject the perso	on signing t	this Report to the p	enalties of 52 U.S.C. §30109
Office Use						FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 11

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Committee to Elect Dan Shores

2020 10 2020 12 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 0.00 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 0.00 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 0.00 1837.34 (from Line 17) (b) Total Offsets to Operating 745.85 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 1091.49 0.00 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 927.56 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 218351.85 Schedule C and/or Schedule D).....

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

PAGE 3 / 11

Write or Type Committee Name

Committee to Elect Dan Shores

Report Covering the Period: From: 10 / 01 / 2020 To: 12 / 31 / 2020

I. RECEIPTS		I. RECEIPTS COLUMN A Total This Period	
1.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	0.00
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
4.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	745.85
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
3.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	745.85

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 11

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	1837.34
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b) Of All Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	1837.34
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	927.56
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		927.56
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		927.56

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

PAGE 5 OF

FOR LINE NUMBER:
(check only one)

13a

		100
NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores		Transaction ID: 759-10
LOAN SOURCE Full Name (Last, First, Mi	ddle Initial)	Memo Item Election: 2014
Shores, Daniel, L, ,	udie iriitiaij	Memo Item Clection: 2014
Mailing Address 14 Dewey Avenue		Other (specify) ▼
City	State	ZIP Code Personal Funds of the Candidate
Sandwich	MA	02563
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00		0.00 4000.00
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)
M09M / D12D / Y 2014 Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		
- CODICIALO IIIIS FEIIOU IIIIS FAGE (OPLIOIIAI)		4000.00
TOTALS This Period (last page in this line onl	y)	······································
Carry outstanding balance only to LINE 3, Sc	hedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 6
FOR LINE NUMBER: (check only one)

X 13a

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

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

PAGE 7 OF
FOR LINE NUMBER:
(check only one)

13a

		100
NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores		Transaction ID : 653-7
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	Memo Item Election: 2014
Shores, Daniel, L, ,	nddie initial)	Memo Item Clection: 2014
Mailing Address 14 Dewey Avenue		Other (specify)
City	State	ZIP Code Personal Funds of the Candidate
Sandwich	MA	02563
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
30000.00		0.00 30000.00
TERMS Date Incurred	Г	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D29D / Y 2014 Y	M M / D D	y YNAY Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	T	Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL & This Deviced This Dega (entions	.	
SUBTOTALS This Period This Page (optional)	30000.00
TOTALS This Period (last page in this line or	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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

11

13b NAME OF COMMITTEE (In Full) Transaction ID: 103-4 Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Shores, Daniel, L, , General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue City State ZIP Code X Personal Funds of the Candidate MA 02563 Sandwich Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 150000.00 0.00 150000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D25^D M 03M ž014 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 150000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

PAGE

13a

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

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

PAGE 10
FOR LINE NUMBER: (check only one)

×	13a
	13h

								30
AME OF COMMITTEE (In Full) Committee to Elect Dan Sho	ores				Transac	ction ID : 101-2		
LOAN SOURCE Full Name (Last,	First Mid	ddle Initial)			¬	Election: 2014		
Shores, Daniel, L, ,		adio iiiilali		L	J Memo Item	Primary General		
Mailing Address 14 Dewey Avenue						Other (specify)	▼	
City State ZIP Co				de		X Personal Fund	ds of the Candi	date
Sandwich MA 02563						1 croonar r une	is of the outland	date
Original Amount of Loan		Cumulative Pay	yment To	Date	Bala	ance Outstanding at (Close of This Pe	eriod
2000	0.00			0.00	0	7 7	2000.00	╝
TERMS Date Incurred		С	Date Due		Interest Rate (If none, enter		Secured:	
^M 01 ^M / ^D 05 ^D / ^Y Ž014	Υ	M M / D D	/ Y	YNA Y	,	00	Yes X	No
List All Endorsers or Guarantors	(if anv) t	o Loan Source						
1. Full Name (Last, First, Middle I	• • •			Name of Em	nployer			
Mailing Address				Occupation				
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:		7		
2. Full Name (Last, First, Middle Ir	nitial)			Name of Employer				
Mailing Address				Occupation				
	_			Amount				
City	State	ZIP Code		Guaranteed Outstanding:				
3. Full Name (Last, First, Middle In	nitial)			Name of Employer				
Mailing Address				Occupation				
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:	:	7		
4. Full Name (Last, First, Middle Ir	nitial)			Name of Em	nployer			
Mailing Address				Occupation				
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:	:	7 7		
NIDTOTALO TELE D. L. L. T.L. D. L. (_
SUBTOTALS This Period This Page (optional).				·····•		2000.00	4
TOTALS This Period (last page in this	s line only	y)			▶	, , , ,	206000.00	
Carry outstanding balance only to LI	NE 3, Scl	hedule D, for this	s line. If	no Schedule	D, carry forv	ward to appropriate	line of Summa	ıry.

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 11 OF
FOR LINE NUMBER:
(check only one)

	9
X	10

11

NAME OF COMMITTEE (In Full)

Committee to Elect D	an Sl	hores				
A. Full Name (Last, First, Middle Initial) of D Plymouth Bay Consulting	ebtor or Cre	editor	Nature of Debt (Purpose): Compliance Consulting (Contract Bonus Agreement)			
Mailing Address 7 Alvin Rd	Mailing Address 7 Alvin Rd					
City Plymouth	State MA	Zip Code 02360	_			
Outstanding Balance Beginning This Period	k k		Transaction ID : 764-			
Amount Incurred This Period	1	Payment This Period	Outstanding Balance at Close of This Period			
0.00		0.00	10200.00			
B. Full Name (Last, First, Middle Initial) of De Shores, Daniel, L, ,	B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Shores, Daniel, L, ,					
Mailing Address 14 Dewey Avenue						
City Sandwich	State MA	Zip Code 02563				
Outstanding Balance Beginning This Period	Ł		Transaction ID : 652-			
2151.85						
Amount Incurred This Period 0.00		Payment This Period 0.00	Outstanding Balance at Close of This Period 2151.85			
C. Full Name (Last, First, Middle Initial) of D	ebtor or Cre	editor	Nature of Debt (Purpose):			
Mailing Address			_			
City	State	Zip Code	_			
Outstanding Balance Beginning This Period	t k					
Amount Incurred This Period	, 1 —	Payment This Period	Outstanding Balance at Close of This Period			
9 9		9 9	, , , , , ,			
1) SUBTOTALS This Period This Page (optional	ıl)		12351.85			
2) TOTALS This Period (last page this line num	nber only) ····		12351.85			
3) TOTAL OUTSTANDING LOANS from Scheo	lule C (last p	page only)	206000.00			
4) ADD 2) and 3) and carry forward to approp	218351.85					