PAGE 1 / 11

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	uthorized Com	mittee	0	ffice Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT		ample: If typing, tyer the lines.	ype 12FE4M5	
Committee to Elect	Dan Shores	1 1 1 1 1			
ADDRESS (number and street	7 Alvin Rd				
▼ Chapte if different					
Check if different than previously reported. (ACC)	Plymouth			MA 02	2360
2. FEC IDENTIFICATION	N NIIMRED W	CITY ▲		STATE ▲	ZIP CODE ▲
C C00556217	NOWINE V	3. IS THIS REPORT	× NEW (N) C	AMENDED (A)	STATE ▼ DISTRICT MA 09 1
4. TYPE OF REPORT		(b) 12-Day PRE	-Election Report fo	or the:	
(a) Quarterly Reports:		П	Primary (12P)	General (120	Runoff (12R)
April 15 Quarte	erly Report (Q1)	П		and the second	
July 15 Quarte	erly Report (Q2)		Convention (12C) Special (12S)
X October 15 Qu	uarterly Report (Q3)	Election on	M M / D	D / Y Y Y Y	in the State of
January 31 Yea	ar-End Report (YE)	(c) 30-Day POS	T-Election Report	for the:	
			General (30G)	Runoff (30R)	Special (30S)
Termination Re	eport (TER)	Election on	M M / D	D / Y Y Y Y	in the State of
5. Covering Period	M M / D D /	Y Y 2023	through	M M / D D / 30	2023
I certify that I have examine	Sharaa lama	-	nowledge and belie	of it is true, correct and c	omplete.
Type or Print Name of Treas	surer	, <u>-, </u>			
Signature of Treasurer	Shores, James, L, Mr.,			Date 10	15 / Y Y Y Y Y Y 2023
NOTE: Submission of false, e	rroneous, or incomple	te information may	subject the person	signing this Report to the	penalties of 52 U.S.C. §30109
Office Use					FEC FORM 3
Only	1 I		1 1		(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Comr	mitton :	to E	loct	Dan	Shores
Comi	nillee	เบ 🗀	ieci	Dan	Snores

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov.

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Committee to Elect Dan Shores

Report Covering the Period: From: 07 01 2023 To: 09 30 2023

	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		
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	745.85		

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 05/2016)

of Disbursements

	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
		200	
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
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 REPO	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	om Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTIN	G PERIOD	927.56

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

FOR LINE NUMBER: (check only one)

PAGE 5

13a

			Detailed Summary	/ Page			13b
NAME OF COMMITTEE (In Full)			Tra	nsaction I	D : 759-10	•	
Committee to Elect Dan Shores							
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)		☐ Memo	item	etion: 2014		
Shores, Daniel, L, ,					Primary General		
Mailing Address 14 Dewey Avenue					Other (specify) ▼		
City	State	ZIP Code	•		Damanal Funda of	45-0-	
Sandwich	MA	02563			Personal Funds of	.ne Ca	ndidate
Original Amount of Loan 4000.00	Cumulative Pay	yment To D	o.00	Balance C	Outstanding at Close	of This	
TERMS Date Incurred	,	ate Due	Interest	Rate	Sec	ured:	
			(If none,			urcu.	
09 / 12 / Y Y Y Y Y Y Y	M M / D D		NA	0.00	% (apr)	Yes	X No
List All Endorsers or Guarantors (if any) t	o Loan Source						
1. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address		(Occupation				
			Amount				
City	ZIP Code		Guaranteed Outstanding:	7			
2. Full Name (Last, First, Middle Initial)	·	1	Name of Employer				
Mailing Address		(Occupation				
			Amount Guaranteed				
City	ZIP Code		Outstanding:	7			
3. Full Name (Last, First, Middle Initial)		ı	Name of Employer				
Mailing Address		(Occupation				
			Amount			-	
City	ZIP Code		Guaranteed Outstanding:	7	<u> </u>		
4. Full Name (Last, First, Middle Initial)	'	1	Name of Employer				
Mailing Address			Occupation				
			Amount				
City	ZIP Code		Guaranteed Outstanding:	7	7		
CURTOTALS This Deviced This Device (artisant)							
SUBTOTALS This Period This Page (optional)-					, , , ,	4000.00	J
TOTALS This Period (last page in this line only	/)		······		, , ,		
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	s line. If no	Schedule D, carry	forward t	to appropriate line o	f Sum	mary.

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

FOR LINE NUMBER: (check only one)

PAGE 6

13a

			Detailed Summary	/ Fage	13b
NAME OF COMMITTEE (In Full)			Trai	nsaction ID : 655-9	
Committee to Elect Dan Shores					
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo I	Item Election: 2014	
Shores, Daniel, L, ,				Primary General	
Mailing Address 14 Dewey Avenue				Other (specify)	
City	State	ZIP Code	9	\[\sqrt{2}\]	
Sandwich	MA	02563		Personal Funds of the	Candidate
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance Outstanding at Close of	This Period
15000.00	9		0.00	150	00.00
TERMS Date Incurred	D	ate Due	Interest (If none,		ed:
09 / 03 / Y Y Y Y Y Y Y	M M / D D		NA Y	0.00 % (apr) Ye	es X No
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		1	Occupation		
			Amount		
City	ZIP Code		Guaranteed Outstanding:	7 7	
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
			Amount Guaranteed		_
City State	ZIP Code		Outstanding:	7 7 7	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		$\overline{}$
City State	ZIP Code	,	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	9 9	
SUBTOTALS This Period This Page (optional)					00.00
CODICIALS This renou this rage (optional)				150	00.00
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	forward to appropriate line of	Summary.

Use separate schedule(s) for each category of the

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

ANS				Detailed Su	ımmary Pag	e (oncor o	, 0.10,	13b
ME OF COMMITTEE (In Full)					Transact	tion ID : 653-7		
committee to Elect Dan Shore	es							
LOAN SOURCE Full Name (Las	t, First, Mi	ddle Initial)			Memo Item	Election: 20	14	
Shores, Daniel, L, ,						Primary General		
Mailing Address 14 Dewey Avenue						Other (spe	ecify) 🔻	
City		State	ZIP Code	e				
Sandwich		MA	02563			X Personal	Funds of t	he Candida
Original Amount of Loan		Cumulative Pa	yment To D	ate	Balar	nce Outstanding	g at Close	of This Peri
300	00.00	9	,	0.00		7	30	000.00
TERMS Date Incurred		Γ	Date Due		nterest Rate		Sec	ured:
M M / D D / Y Y 2014	Y Y 4	M M / D D		Y Y Y	0.0)	Yes X N
List All Endorsers or Guarantor	s (if any)	to Loan Source						
1. Full Name (Last, First, Middle	Initial)			Name of Empl	loyer			
Mailing Address			,	Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		7 1 7		
2. Full Name (Last, First, Middle	Initial)			Name of Empl	loyer			
Mailing Address				Occupation				
				Amount				-
City	State	ZIP Code		Guaranteed Outstanding:		7 7	1 - 1 - 0	
3. Full Name (Last, First, Middle	Initial)			Name of Empl	loyer			
Mailing Address			- 1	Occupation				
				Amount				-
City	State	ZIP Code		Guaranteed Outstanding:		7 7		
4. Full Name (Last, First, Middle	Initial)	!		Name of Empl	loyer			
Mailing Address				Occupation				
				Amount				-
City	State	ZIP Code		Guaranteed Outstanding:		7		
		<u> </u>						
JBTOTALS This Period This Page	(optional)				· •		30	00.000
OTALS This Period (last page in the	nis line onl	y)			· •			
		hedule D, for thi				7	7 "	

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

FOR LINE NUMBER: (check only one)

PAGE 8

×	13a
	13b

OF

		130
NAME OF COMMITTEE (In Full)		Transaction ID : 103-4
Committee to Elect Dan Shores		
LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)	Memo Item Election: 2014
Shores, Daniel, L, ,		Primary General
Mailing Address 14 Dewey Avenue		Other (specify) ▼
City	State	ZIP Code O2563 Personal Funds of the Candidate
Sandwich	MA	02563 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
150000.00	2	0.00 150000.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D	/ Y Y Y Y NA 0.00 % (apr) Yes No
List All Endorsers or Guarantors (if any) t	o 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
City	ZIP Code	Guaranteed 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 State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)-		150000.00
TOTALS This Period (last page in this line only	y)	······································
Carry outstanding balance only to LINE 3, Sci	nedule 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

FOR LINE NUMBER: (check only one)

PAGE 9

13a

			Detailed Suffiffiary	/ Page	1	13b
NAME OF COMMITTEE (In Full)			Tra	nsaction ID : 102-4	•	
Committee to Elect Dan Shores						
LOAN SOURCE Full Name (Last, First, Mic	Idle Initial)		☐ Memo I	Item Election: 2014		
Shores, Daniel, L, ,				Primary General		
Mailing Address 14 Dewey Avenue				Other (specify) ▼		
City	State	ZIP Code)	N		
Sandwich	MA	02563		Personal Funds of the	Candi	idate
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance Outstanding at Close of	This P	'eriod
5000.00	9		0.00	500	00.00	
TERMS Date Incurred	D	ate Due	Interest (If none,		ed:	
02 / V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M M / D D	/ Y ,	NA Y	0.00 % (apr) Ye	es X	No
List All Endorsers or Guarantors (if any) to	o Loan Source					
1. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount		$\overline{}$	
City State	ZIP Code	<u> </u>	Guaranteed Outstanding:		Ш	
2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount Guaranteed		7	
City State	ZIP Code		Outstanding:	7 7		
3. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount		-	
City State	ZIP Code		Guaranteed Outstanding:	7 7		
4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount		_	
City State	ZIP Code		Guaranteed Outstanding:	7 7	Ш	
CURTOTAL C This Deviced This Daws (anti-						_
SUBTOTALS This Period This Page (optional)			·····	500	00.00	
TOTALS This Period (last page in this line only	r)		······	, , ,		
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	s line. If no	Schedule D, carry	forward to appropriate line of \$	Summa	ary.

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

FOR LINE NUMBER: (check only one)

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X 13a

			Detailed Summary	Page	13b
NAME OF COMMITTEE (In Full)			Tran	nsaction ID : 101-2	
Committee to Elect Dan Shores					
LOAN SOURCE Full Name (Last, First, Mic	ldle Initial)		☐ Memo I	tem Election: 2014	
Shores, Daniel, L, ,				Primary General	
Mailing Address 14 Dewey Avenue				Other (specify)	
City	State	ZIP Code	9	N	
Sandwich	MA	02563		Personal Funds of the	Jandidate
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance Outstanding at Close of T	his Period
2000.00	9		0.00	2000).00
TERMS Date Incurred	D	ate Due	Interest (If none,		i :
01 / 05 / Y Y Y Y Y Y Y	M M / D D		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)			Name of Employer		
Mailing Address		1	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:	7 7 7 7	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		$\overline{}$
City State	ZIP Code		Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	9 9	
CURTOTAL C. This Co. I. This Co. I. C. I.					
SUBTOTALS This Period This Page (optional)			······	2000).00
TOTALS This Period (last page in this line only	r)		······	206000	0.00
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	s line. If no	Schedule D, carry	forward to appropriate line of Su	ımmary.

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

LANGE OF COMMITTEE (I. F. II)		•	<u> </u>
NAME OF COMMITTEE (In Full)	n Char		
Committee to Elect Da			
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Plymouth Bay Consulting			Nature of Debt (Purpose): Compliance Consulting (Contract Bonus Agreement)
City	State	Zip Code	
Plymouth	MA	02360	
Outstanding Balance Beginning This Peri	od		Transaction ID: 764-
10200.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	10200.00
B. Full Name (Last, First, Middle Initial) of [Debtor or Cred	litor	Nature of Debt (Purpose):
Shores, Daniel, L, ,			Miscellaneous Expenses (FaceBook Boosts & Fuel)
Mailing Address 14 Dewey Avenue			i dei)
City	State	Zip Code	
Sandwich	MA	02563	
Outstanding Balance Beginning This Peri	od		Transaction ID: 652-
2151.85			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
0.00		0.00	2151.85
C. Full Name (Last, First, Middle Initial) of	Debtor or Cre	ditor	Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	_
Outstanding Balance Beginning This Peri	oa		
7 7 7 7 7			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
		9 9	
) SUBTOTALS This Period This Page (option	nal)		12351.85
) TOTALS This Period (last page this line no	12351.85		
) TOTAL OUTSTANDING LOANS from Sch	206000.00		
) ADD 2) and 3) and carry forward to appro	▶ 218351.85		