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FEC FORM 3

FE5AN018

REPORT OF RECEIPTS AND DISBURSEMENTS

| FORM 3 | 5 | For An Au | uthorized Co | ommittee | | Off | ice Use Only |
|-----------------------|-------------------------------|--------------------|----------------------|-----------------------------------|--------------|------------------------|------------------------------|
| 1. NAME OF COMMITTEE | (in full) | TYPE OR PRINT | • | Example: If typin over the lines. | g, type | 12FE4M5 | |
| Committee t | o Elect Da | n Shores | | | | | |
| | | | | | | | |
| ADDRESS (number | r and street) | PO Box 3747 | | | | | |
| Check if | different | | | | | | |
| than pre- reported | viously | Plymouth | | | | MA 023 | 61 |
| 2. FEC IDENTI | IFICATION N | JMBER ▼ | CITY | | | STATE A | ZIP CODE |
| C C0055 | 6217 | | 3. IS THIS REPORT | × NEW | OR | AMENDED (A) | STATE ▼ DISTRICT MA 09 |
| 4. TYPE OF F | REPORT (Ch | pose One) | /b) 10 D D | DE Florido Dono | | | |
| (a) Quarterly | / Reports: | | (b) 12-Day P | RE-Election Repo | | | |
| April | l 15 Quarterly F | Report (Q1) | L | Primary (12P |) | General (12G) | Runoff (12R) |
| | | | | Convention (| 12C) | Special (12S) | |
| | 15 Quarterly Fober 15 Quarter | | Election | on M M / | D D | / Y " Y " Y " Y | in the State of |
| X Janu | uary 31 Year-En | d Report (YE) | (c) 30-Day P | OST-Election Rep | port for th | e: | |
| | | | | General (30G | à) | Runoff (30R) | Special (30S) |
| Term | nination Report | (TER) | Election | on M M / | D D | / Y " Y " Y " Y | in the State of |
| 5. Covering Peri | | M / D D / | 2014 Y | through | M 12 | M / D / Y | Y Y Y Y 2014 |
| I certify that I hav | e examined th | is Report and to | the best of my | knowledge and | belief it is | true, correct and co | omplete. |
| Type or Print Nam | ne of Treasure | Mr. James L S | nores | | | | |
| Signature of Treas | surer <u>Mr.</u> | James L Shores | | [Electronically I | Filed] | Date 01 | 08 / |
| NOTE: Submission | of false, errone | eous, or incomplet | e information m | ay subject the per | rson signin | g this Report to the p | penalties of 2 U.S.C. §437g. |
| Office Use Only | | | | | | | FEC FORM 3 (Revised 02/2003) |

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 13

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Committee to Elect Dan Shores

| R | eport | Covering the Period: From: | 10 / D D / Y Y Y Y Y T | o: 12 / 31 / Y 2014 |
|-----|-------|---|-------------------------|------------------------------------|
| | | | 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 | 69097.92 |
| | (b) | Total Contribution Refunds (from Line 20(d)) | 0.00 | 10400.00 |
| | (c) | Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | 0.00 | 58697.92 |
| 7. | Net | Operating Expenditures | | |
| | (a) | Total Operating Expenditures (from Line 17) | 1800.00 | 264546.66 |
| | (b) | Total Offsets to Operating Expenditures (from Line 14) | 67.79 | 67.79 |
| | (c) | Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) | 1732.21 | 264478.87 |
| 8. | | h on Hand at Close of orting Period (from Line 27) | 219.05 | |
| 9. | the | ots and Obligations Owed TO Committee (Itemize all on edule C and/or Schedule D) | 0.00 | |
| 10. | the | ots and Obligations Owed BY Committee (Itemize all on edule C and/or Schedule D) | 218351.85 | |
| | | | | |

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

FEC Form 3 (Revised 12/2003) of Receipts PAGE 3 / 13

Write or Type Committee Name

Committee to Elect Dan Shores

Report Covering the Period: From: 10 01 2014 To: 12 31 2014

| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) | FROM: | |
| (a) Individuals/Persons Other Than Political Committees(i) Itemized (use Schedule A) | 0.00 | 57718.87 |
| (ii) Unitemized | 0.00 | 11329.05 |
| (iii) TOTAL of contributions from individuals | 0.00 | 69047.92 |
| (b) Political Party Committees (c) Other Political Committees | 0.00 | 0.00 |
| (such as PACs) | 0.00 | 50.00 |
| (d) The Candidate | 0.00 | 0.00 |
| (other than loans) (add Lines 11(a)(iii), (b), (c), and | d (d)) | 69097.92 |
| 2. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 3. LOANS: (a) Made or Guaranteed by the | | |
| (a) Made or Guaranteed by the Candidate | 0.00 | 206000.00 |
| (b) All Other Loans(c) TOTAL LOANS | 0.00 | 0.00 |
| (add Lines 13(a) and (b)) | 0.00 | 206000.00 |
| 4. OFFSETS TO OPERATING EXPENDITURES | | |
| (Refunds, Rebates, etc.) | | 67.79 |
| 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) | 67.79 | 275165.71 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 13

| | II. DISE | BURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---------|------------------------|--|-------------------------------|------------------------------------|
| 17. | OPERATING | EXPENDITURES | 1800.00 | 264546.66 |
| 18. | TRANSFERS AUTHORIZE | TO OTHER D COMMITTEES | 0.00 | 0.00 |
| 19. | . , | YMENTS: ns Made or Guaranteed Candidate | 0.00 | 0.00 |
| | ` ' | Other Loans | 0.00 | 0.00 |
| | ` ' | nes 19(a) and (b)) | 0.00 | 0.00 |
| 20. | | DF CONTRIBUTIONS TO: | | |
| | ` ' | als/Persons Other blitical Committees | 0.00 | 10400.00 |
| | | Party Committees | 0.00 | 0.00 |
| | (-) | olitical Committees s PACs) | 0.00 | 0.00 |
| | ` ' | CONTRIBUTION REFUNDS nes 20(a), (b), and (c)) | 0.00 | 10400.00 |
| 21. | OTHER DISE | BURSEMENTS | 0.00 | 0.00 |
| 22. | | BURSEMENTS 7, 18, 19(c), 20(d), and 21) | 1800.00 | 274946.66 |
| | | III. CASH SUN | //MARY | |
| 23. | CASH ON H | IAND AT BEGINNING OF REPORT | TING PERIOD | 1951.26 |
| 24 | TOTAL RECI | EIPTS THIS PERIOD (from Line 16 | S, page 3) | 67.79 |
| 25. | SUBTOTAL (| (add Line 23 and Line 24) | | 2019.05 |
| 26. | TOTAL DISB | BURSEMENTS THIS PERIOD (from | Line 22) | 1800.00 |
| 27. | | IAND AT CLOSE OF REPORTING le 26 from Line 25) | PERIOD | 219.05 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | F | OR | LINE | NU | MBER: | | PAGE | | 5 | OF | | 13 | - |
|---|---|------------------|------|----|-------|--|------|---|-------|----|--|----|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | (check only one) | | | | | | | | | | - | |
| | | | 11a | | 11b | | 11c | | 110 | d | | | |
| | | | 12 | | 13a | | 13b | X | 14 | | | 15 | |
| not be sold or used by any person for the purpose of soliciting contributions | | | | | | | | | | | | | |

| | | I | |
|-------------|--|---|---|
| | ny information copied from such Reports and Si | | rson for the purpose of soliciting contributions |
| \setminus | NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores | | |
| A. | Full Name (Last, First, Middle Initial) Comcast Spotlight Mailing Address 30700 Telegraph Rd, Suite 460 City Franklin FEC ID number of contributing federal political committee. Name of Employer Receipt For: 2014 Primary General Other (specify) | State Zip Code MI 48025 C Occupation Election Cycle-to-Date | Date of Receipt 10 15 2014 Transaction ID: 0000780 Amount of Each Receipt this Period 67.79 |
| 3. | Full Name (Last, First, Middle Initial) Mailing Address City | State Zip Code | Date of Receipt |
| | FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) | Occupation Election Cycle-to-Date | Amount of Each Receipt this Period |
| Э. | Full Name (Last, First, Middle Initial) Mailing Address City | State Zip Code | Date of Receipt |
| | FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General | Occupation Election Cycle-to-Date | Amount of Each Receipt this Period |
| | Other (specify) SUBTOTAL of Receipts This Page (optional) FOTAL This Period (last page this line number o | | 67.79 |
| | | | , |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

| | FOR LINE | NUMBE | R: | F | AGE | 6 | OF | 13 |
|--|-----------|---------|----|-----|-----|-----|----|----|
| Use separate schedule(s) | (check on | ly one) | | | | | | |
| for each category of the Detailed Summary Page | × | 17 | | 18 | | 19a | | 19 |
| Detailed Suffillary Fage | | 20a | | 20b | | 20c | | 21 |

| | | | | | 20a | 2 | 20b | 200 | | 21 |
|-----------|---|-------------------|----------------|---------------|----------|-------|-----------|----------|--------|---------------|
| An or | y information copied from such Reports and Statements may not be sold or of for commercial purposes, other than using the name and address of any political purposes. | used by any | person | for the | he purp | ose o | of solici | iting co | ntribu | tions tee. |
| | NAME OF COMMITTEE (In Full) | | | | | | | | | |
| \rangle | Committee to Elect Dan Shores | _ | | _ | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | | |
| ۹. | Plymouth Bay Consulting | | | | of Disbu | | | | | |
| | Mailing Address 7 Alvin Rd | | | 11 | | 07 | <u> </u> | 20′ | 14 | |
| | City State Zip Code | | Α | \moui | nt of Ea | ach D | isburse | ement t | his Pe | eriod |
| | Plymouth MA 02360 | | _ [| | | | | 1 | 800.0 | 0 |
| | Purpose of Disbursement Compliance Consulting | 001 | Tra | ınsac | tion ID | : 000 | 0781 | | JJU.U | ~ |
| | Candidate Name | Category/ Type | | | -2 | | , | | | |
| | Office Sought: House Disbursement For: 2014 Senate Primary General | l iyhe | | | | | | | | |
| | President Other (specify) State: District: | | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | | |
| 3. | | | | | of Disbu | | | | | _ |
| | Mailing Address | | | M N | М / | D D |] ′ | Ϋ́Υ | Y | |
| | City State Zip Code | | <u> </u> | \moui | nt of Ea | ach D | isburse | ement t | his Pe | eriod |
| | Purpose of Disbursement | | [| | | | | | | |
| | Candidate Name | Category/ Type | 4 | | | | | | | |
| | Office Sought: House Disbursement For: Primary General President Other (specify) State: District: | 1 .74~ | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | | | |
| Э. | | | | _ | of Disbu | - | ent | v 1 | v = | - |
| | Mailing Address | | _ | М - К | M / | D D |] | , Y | , Y | |
| | City State Zip Code | | | ∖ moui | nt of Ea | ach D | isburse | ement t | his Pe | eriod |
| | Purpose of Disbursement | | 7] [| _ | | _ | | | | |
| | Candidate Name | Category/ Type | | | | | | | | |
| | Office Sought: House Senate President Disbursement For: Primary Other (specify) State: District: | | | | | | | | | |
| s | UBTOTAL of Disbursements This Page (optional) | | | | | | | 1 | 800.0 | 0 |
| | <u> </u> | <u> </u> | - j | | | - | - | 1 | 800.0 | 0 |
| T | OTAL This Period (last page this line number only) | | | | | | - | | 500.0 | J |

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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| DAN5 | Detailed Summary Page (Crieck Only One) | | | | | |
|--|---|--------------------------------------|---|--|--|--|
| AME OF COMMITTEE (In Full) Committee to Elect Dan Shores | | Transac | tion ID : 759-10 | | | |
| LOAN SOURCE Full Name (Last, First, Middle Daniel L Shores | Initial) | [PERSONAL FUNDS] | Election: 2014 Primary General | | | |
| Mailing Address 14 Dewey Avenue | | | Other (specify) | | | |
| | ate ZIP Coo | de | | | | |
| | Cumulative Payment To | Data Bala | nce Outstanding at Close of This Period | | | |
| 4000.00 | amulative i ayment to | 0.00 | 4000.00 | | | |
| Date Incurred M 09 / D 12 / Y 2014 Y | Date Due | Interest Rate | % (apr) | | | |
| List All Endorsers or Guarantors (if any) to L | oan Source | | Yes No | | | |
| 1. Full Name (Last, First, Middle Initial) | | Name of Employer | | | | |
| Mailing Address | | Occupation | | | | |
| City State 2 | ZIP Code | Amount Guaranteed Outstanding: | 7 | | | |
| 2. Full Name (Last, First, Middle Initial) | | Name of Employer | | | | |
| Mailing Address | | Occupation | | | | |
| City State 2 | ZIP Code | Amount Guaranteed Outstanding: | , , | | | |
| 3. Full Name (Last, First, Middle Initial) | | Name of Employer | | | | |
| Mailing Address | | Occupation | | | | |
| City State 2 | ZIP Code | Amount Guaranteed Outstanding: | 9 | | | |
| 4. Full Name (Last, First, Middle Initial) | | Name of Employer | | | | |
| Mailing Address | | Occupation | | | | |
| City State 2 | ZIP Code | Amount Guaranteed Outstanding: | 9 9 | | | |
| SUBTOTALS This Period This Page (optional) | | ······ | 4000.00 | | | |
| Carry outstanding balance only to LINE 3, Schedu | | | yard to appropriate line of Summary | | | |

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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13

OF

(check only one) Detailed Summary Page Transaction ID: 655-9 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 15000.00 0.00 15000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M 03 ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 15000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s)

FOR LINE NUMBER:

PAGE

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| DANS | | | Detailed Summary Pag | | 13a 13b |
|---|------------------|---------------------------|--------------------------------------|---|------------|
| AME OF COMMITTEE (In Full) Committee to Elect Dan S | hores | | Transac | ction ID : 653-7 | |
| LOAN SOURCE Full Name (La Daniel L Shores | st, First, Middl | e Initial) | [PERSONAL FUNDS] | Election: 2014 Primary General | |
| Mailing Address 14 Dewey Avenue | | | | Other (specify) | |
| City | S | tate ZIP Co | de | | |
| Sandwich | | MA 02563 | | | |
| Original Amount of Loan | 000.00 | Cumulative Payment To | Date Bala | ance Outstanding at Close of Th | |
| TERMS | | , | , <u></u> | , | |
| Date Incurred M 08 / D29 / Y X 20 | 14 Y | Date Due | Interest Rate | % (apr) | X |
| List All Endorsers or Guaranto | ors (if any) to | Loan Source | | Yes | No |
| 1. Full Name (Last, First, Middl | le Initial) | | Name of Employer | | |
| Mailing Address | | | Occupation | | |
| City | State | ZIP Code | Amount Guaranteed Outstanding: | 7 | |
| 2. Full Name (Last, First, Middle | e Initial) | | Name of Employer | | |
| Mailing Address | | | Occupation | | |
| City | State | ZIP Code | Amount Guaranteed Outstanding: | 7 1 7 1 7 1 | |
| 3. Full Name (Last, First, Middle | nitial) | | Name of Employer | | |
| Mailing Address | | | Occupation | | |
| City | State | ZIP Code | Amount Guaranteed Outstanding: | 7 | |
| 4. Full Name (Last, First, Middle | e Initial) | | Name of Employer | | |
| Mailing Address | | | Occupation | | |
| City | State | ZIP Code | Amount Guaranteed Outstanding: | 7 |] |
| SUBTOTALS This Period This Pag | e (optional) | | ······ • | 30000 |).00 |
| TOTALS This Period (last page in | this line only). | | | , , , , , , | |
| Carry outstanding balance only to | LINE 3. Sched | dule D, for this line. If | no Schedule D. carry forv | ward to appropriate line of Su | mmarv. |

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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| × | 13a |
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| | 13h |

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(check only one) Detailed Summary Page Transaction ID: 103-4 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 150000.00 0.00 150000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D25 ^M 03^M ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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

FOR LINE NUMBER:

PAGE

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13

(check only one) Detailed Summary Page Transaction ID: 102-4 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 02^M 02 ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 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

FOR LINE NUMBER:

PAGE

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| X | 13a |
|---|-----|
| | 13b |

13

(check only one) Detailed Summary Page Transaction ID: 101-2 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 ^M 01^M ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) 206000.00 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

(Use separate schedule(s) for each numbered line) PAGE 13 OF
FOR LINE NUMBER:
(check only one)

| | 9 |
|---|----|
| X | 10 |

13

NAME OF COMMITTEE (In Full)

Committee to Flect Dan Shores

| | Committee to Elect Dan | Shore | es : | |
|----|--|---------------------------|------------------|---|
| | A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Plymouth Bay Consulting | | | Nature of Debt (Purpose): Compliance Consulting |
| | Mailing Address 7 Alvin Rd | | | |
| | | | | |
| | City State Plymouth | Zip Code MA | 02360 | |
| | Outstanding Balance Beginning This Period | | | Transaction ID: 764- |
| | 12000.00 | | | |
| | Amount Incurred This Period | Pavm | nent This Period | Outstanding Balance at Close of This Period |
| | 0.00 | | 1800.00 | 10200.00 |
| | 0.00 | , | 1000.00 | 10200.00 |
| Ī | B. Full Name (Last, First, Middle Initial) of Debtor of | or Creditor | | Nature of Debt (Purpose): |
| | Daniel L Shores | | | Miscellaneous Expenses |
| | Mailing Address 14 Dewey Avenue | | | |
| - | City State | Zip Code | | |
| | Sandwich | MA | 02563 | |
| Ī | Outstanding Balance Beginning This Period | | | Transaction ID : 652- |
| | 2151.85 | | | |
| | 7 | Dayes | ant This Davied | Outstanding Polones at Class of This Povind |
| | Amount Incurred This Period | Paym | nent This Period | Outstanding Balance at Close of This Period |
| | 0.00 | 7 | 0.00 | 2151.85 |
| ŀ | C. Full Name (Last, First, Middle Initial) of Debtor | Nature of Debt (Purpose): | | |
| | | | | |
| | Mailing Address | | | |
| | Oit. | Ctata | 7:- 0-4- | |
| | City | State | Zip Code | |
| | Outstanding Balance Beginning This Period | | | |
| | | | | |
| | Amount Incurred This Period | Davin | nent This Period | Outstanding Balance at Close of This Period |
| | Amount incurred this relied | T dyll | ient mis i enou | Cutstanding Balance at Close of This Fenou |
| | , , , , , , , , | 7 | | |
| | | | | 12351.85 |
| 1) | SUBTOTALS This Period This Page (optional) | | ··············· | 12531.00 |
| 2) | 2) TOTALS This Period (last page this line number only) | | | 12351.85 |
| 3) | 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | 206000.00 |
| | | 218351 85 | | |
| 4) | ADD 2) and 3) and carry forward to appropriate li | | | |