## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Committee to Elect Dan Shores 14 Dewey Ave. ADDRESS (number and street) (Check if address is changed) Sandwich 02563 MA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jlshores@comcast.net (Check if address is changed) Optional Second E-Mail Address electdanshores@gmai COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 25 2015 C00556217 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Mr. James L Shores Type or Print Name of Treasurer Mr. James L Shores [Electronically Filed] 01 25 2015 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

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	COMMITTEE	
(a) X	e Committee:  This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Compl	ata tha candidata
	information below.)	ete the candidate
Name of Candidate	Daniel L Shores	
Candidate	office  REP Sought: X House Senate President	State
Party Affiliat	tion REP Sought: X House Senate President	District 09
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		
(d)		Democratic, epublican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a:
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number C	
3.	FEC ID number	
4.	FEC ID number	

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Write or Type Committee Nan	Elect Dan Shores	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the perso	in in possession of committee
	es L Shores	
Full Name	7 Alvin Rd	
Mailing Address		
	Plymouth	02360
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 508	_ 944 2610
B. <b>Treasurer:</b> List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
Full Name Mr. Jame of Treasurer	es L Shores	
Mailing Address	7 Alvin Rd	
	Plymouth	02360
Title or Position Treasurer	CITY STATE  508	ZIP CODE
<u> </u>	Telephone number	

1 1 0 1 0 1	m 1 (Revised 02/2009)	Page <b>4</b>
Full Name of Designated	Mr. Daniel L Shores	
Agent  Mailing Address	14 Dewey Ave	
Mailing Address		
	Sandwich , MA , 02563	
Tide on Decision	CITY STATE Z	ZIP CODE
Title or Position Assistant Treas		38 5369
Danka an Other		accounts ronts
Danka an Other		accounts ronts
	<b>r Depositories:</b> List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds.	accounts, rents
	oxes or maintains funds.	accounts, rents
safety deposit be	Depository, etc.	accounts, rents
safety deposit be	oxes or maintains funds.	accounts, rents
safety deposit be	Depository, etc.  Citizens Bank  20 North Park Ave	accounts, rents
safety deposit be Name of Bank,	Depository, etc.  Citizens Bank  20 North Park Ave	accounts, rents
safety deposit be Name of Bank,	Depository, etc.  Citizens Bank  20 North Park Ave	
safety deposit be Name of Bank,	Depository, etc.  Citizens Bank  20 North Park Ave  Plymouth  MA 02360	ZIP CODE
safety deposit be Name of Bank,	Depository, etc.  Citizens Bank  20 North Park Ave  Plymouth  CITY  STATE  Z	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Citizens Bank  20 North Park Ave  Plymouth  CITY  STATE  Z	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Citizens Bank  20 North Park Ave  Plymouth  CITY  STATE  Z	
safety deposit be Name of Bank, Mailing Address	Depository, etc.  Citizens Bank  20 North Park Ave  Plymouth  CITY  STATE  Z  Depository, etc.	
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