PAGE 1 / 11

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An Au	thorized Com	mittee		Offic	e Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	ample: If typing, er the lines.	type 1	2FE4M5	
Committee to Elect	Dan Shores					ı
ADDRESS (number and street	t) 7 Alvin Rd					
▼ Check if different						
than previously reported. (ACC)	Plymouth				MA 0236	60
, ,		CITY ▲		STA	TE A	ZIP CODE ▲
2. FEC IDENTIFICATION	N NUMBER ▼					
C C00556217		3. IS THIS REPORT	NEW (N)	or \square	AMENDED (A)	STATE ▼ DISTRICT MA 09
4. TYPE OF REPORT	(Choose One)	b) 12-Day PRE	-Election Report	for the:		
(a) Quarterly Reports:		П				
April 15 Quarte	erly Report (Q1)		Primary (12P)		General (12G)	Runoff (12R)
July 15 Quarte	and a Domont (OO)		Convention (12	2C)	Special (12S)	
July 15 Quarte	erly Report (Q2)		M M /	D D / Y	YYY	in the
October 15 Qu	uarterly Report (Q3)	Election on				State of
January 31 Yea	ar-End Report (YE)	c) 30-Day POS	T -Election Repo	ort for the:		
		П	General (30G)	П	Runoff (30R)	Special (30S)
П			acriciai (cca)		rianon (oori)	Special (coc)
Termination Re	eport (TER)	Election on	M M /	D D / Y	YYY	in the State of
	M M / D D /	Y Y Y Y		M M /	D D / Y	Y " Y " Y
5. Covering Period	04 01	2022	through	06	30	2022
I certify that I have examine			nowledge and be	elief it is true,	correct and cor	nplete.
Type or Print Name of Treas	Shores, James, surer	L, Mr.,				
Signature of Treasurer	Shores, James, L, Mr.,		[Electronically Fi	<i>led]</i> Date	M M /	11 / Y Y Y Y Y Y 2022
NOTE: Submission of false, e	erroneous, or incomplete	information may	subject the perso	on signing this	Report to the pe	nalties of 52 U.S.C. §30109
Office	1		, , , , , , , ,			
Use Only						EC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Committee to Elect Dan Shores

2022 04 2022 06 30 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: MMM / DDD / YDD / YD

	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	0.00	0.00		
	(i) Itemized (use Schedule A)	3.00	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		
	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00		
13.	LOANS:				
	(a) Made or Guaranteed by the Candidate	0.00	0.00		
	(b) All Other Loans(c) TOTAL LOANS	0.00	0.00		
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00		
	OFFSETS TO OPERATING				
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	745.85		
	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00		
	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.	OPI	ERATING EXPENDITURES	0.00	1837.34
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LOA	AN 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
	DE			
20.	(a)	FUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other	0.00	0.00
		Than Political Committees	0.00	0.00
	(b)	Political Party Committees Other Political Committees	0.00	0.00
	(c)	(such as PACs)	0.00	0.00
	(d)	TOTAL CONTRIBUTION REFUNDS	0.00	0.00
		(add Lines 20(a), (b), and (c))	0.00	0.00
21.	ОТІ	HER DISBURSEMENTS	0.00	0.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	0.00	1837.34
		III. CASH SU	MMARY	
23.	CAS	SH ON HAND AT BEGINNING OF REPOR	TING PERIOD	927.56
24	то	TAL RECEIPTS THIS PERIOD (from Line 1	6, page 3)	0.00
5.	SUI	BTOTAL (add Line 23 and Line 24)		927.56
6.	TO	TAL DISBURSEMENTS THIS PERIOD (from	n Line 22)	0.00
7.		SH ON HAND AT CLOSE OF REPORTING	G PERIOD	927.56

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

PAGE 5
FOR LINE NUMBER: (check only one)

ER: **X** 13a

		135				
NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores		Transaction ID: 759-10				
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014				
Shores, Daniel, L, ,	nadio initialy	Memo Item Clection: 2014				
Mailing Address 14 Dewey Avenue		Other (specify) ▼				
City	State	ZIP Code 02563 Personal Funds of the Candidate				
Sandwich						
Original Amount of Loan 4000.00	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period 0.00 4000.00				
TERMS Date Incurred		Date Due Interest Rate Secured:				
	M M / D D	(If none, enter 0)				
M09M / P12P / Y Ž014 Y		% (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				
		Amount				
City State	ZIP Code	Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)	1	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	ZIP Code	Guaranteed Outstanding:				
SUBTOTALS This Period This Page (optiona		4000.00				
TOTALS This Period (last page in this line of	าly)	· · · · · · · · · · · · · · · · · · ·				
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

PAGE 6
FOR LINE NUMBER: (check only one)

X 13a

							130
AME OF COMMITTEE (In Full) Committee to Elect Dan Sho	res				Transa	action ID : 655-9	
LOAN SOURCE Full Name (Last, Shores, Daniel, L, ,	First, Mic	ddle Initial)			Memo Item	Election: 2014 Primary General	
Mailing Address 14 Dewey Avenue	Mailing Address 14 Dewey Avenue					Other (specify)	
City						X Personal Funds of the	Candidate
Sandwich	02563			T electrical T united of the	Carialadio		
Original Amount of Loan		Cumulative Pay	ment To	Date	Ва	lance Outstanding at Close of	This Period
15000	.00			0.00)	1500	00.00
TERMS Date Incurred		D	ate Due		Interest Ra		ed:
M09M / D03D / Y Z014	Υ	M M / D D	/ Y	YNA Y	(0.00 % (apr) Ye	es 🗶 No
List All Endorsers or Guarantors	(if any) t	o Loan Source					
1. Full Name (Last, First, Middle In	nitial)			Name of Em	ployer		
Mailing Address				Occupation			
				Amount			_
City	State	ZIP Code		Guaranteed Outstanding:		y y	
2. Full Name (Last, First, Middle In	itial)	l		Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
3. Full Name (Last, First, Middle In	itial)	·		Name of Employer			
Mailing Address				Occupation			
	1			Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7 7	
4. Full Name (Last, First, Middle In	itial)	•		Name of Employer			
Mailing Address			Occupation				
	1			Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7 7	
		·					
SUBTOTALS This Period This Page (d	SUBTOTALS This Period This Page (optional)					00.00	
TOTALS This Period (last page in this	line only	/)			▶	· · · · · · · · · · · · · · · · · · ·	
Carry outstanding balance only to LIN	NE 3, Sch	nedule D, for this	line. If	no Schedule	D, carry for	rward to appropriate line of S	Summarv.
,	-, -5.				, <u>,</u>		

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: 653-7 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 30000.00 0.00 30000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D29^D ^M80^M 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)..... 30000.00 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 8

X 13a

				Detailed of	anninary ras	90			13b
AME OF COMMITTEE (In Full) Committee to Elect Dan Sho		Transac	ction ID	: 103-4					
Committee to Elect Dan Sho) 6 5								
LOAN SOURCE Full Name (Last, Shores, Daniel, L, ,	First, Mic	ddle Initial)			Memo Item		ion: 2014 Primary General		
Mailing Address 14 Dewey Avenue				Other (specify) 🔻				
City State ZIP Code			le						
Sandwich MA 02563					X	Personal Fur	ids of the C	andidate	
Original Amount of Loan	Original Amount of Loan Cumulative Payment To			Date	Bala	ance O	utstanding at	Close of Th	is Period
150000	0.00	2	,	0.00			7	150000.	00
TERMS Date Incurred		D	ate Due		nterest Rate			Secured:	
M03M / D25D / Y Ž014	Y	M M / D D	/ Y	YNA Y		.00	% (apr)	Yes	x No
List All Endorsers or Guarantors	(if any) t	o Loan Source							
1. Full Name (Last, First, Middle I	nitial)			Name of Emp	loyer				
Mailing Address	Mailing Address			Occupation					
				Amount Guaranteed				1	
City	State	ZIP Code		Outstanding:		7	7		
2. Full Name (Last, First, Middle In	itial)			Name of Employer					
Mailing Address				Occupation					
	la	710.0.1		Amount Guaranteed					7
City	State	ZIP Code		Outstanding:		7	7		_
3. Full Name (Last, First, Middle In	itial)			Name of Employer					
Mailing Address				Occupation					
0:4.	04-4-	7ID 0- 4-		Amount Guaranteed		-			1
City	State	ZIP Code		Outstanding:		7	7		
4. Full Name (Last, First, Middle In	itial)			Name of Employer					
Mailing Address				Occupation					
				Amount					7
City	State	ZIP Code		Guaranteed Outstanding:		7	7	1 /8	
SUBTOTALS This Period This Page (optional)							150000.	00
FOTALS This Period (last page in this	s line only	/)			_ 	-		1.330	
							7		
Carry outstanding balance only to LI	NE 3, Sch	nedule D, for this	s line. If n	o Schedule D	, carry for	ward to	appropriate	line of Sur	mmary.

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

FOR LINE NUMBER: (check only one)

PAGE

X 13a 13b

11

OF

NAME OF COMMITTEE (In Full) Transaction ID: 102-4 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 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D02D M 02M 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)..... 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 Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 10

13a

				Detailed of	arrillary r age	°	-	13b
AME OF COMMITTEE (In Full) Committee to Elect Dan Sh			Transact	tion ID : 101-2				
Committee to Elect Dan Si	iores							
LOAN SOURCE Full Name (Las	t, First, Mi	ddle Initial)			Memo Item	Election: 2014		
Shores, Daniel, L, ,						★ Primary General		
Mailing Address						Other (specify)		
14 Dewey Avenue								
City State ZIP Cod				е				
Sandwich MA 02563					Personal Funds of t	he Cand	lidate	
Original Amount of Loan Cumulative Payment To			yment To I	Date	Balar	nce Outstanding at Close	of This F	Period
20	00.00			0.00			2000.00	П
TERMS Date Incurred			Date Due	Ir	nterest Rate	Sec	ured:	_
M01 ^M / D05 ^D / Y Ž01	X Y	M M / D D	/ Y	YNA Y	If none, enter 0.0		_	_
01 05 201	+			INA	0.0	% (apr)	Yes x	No
List All Endorsers or Guarantor	s (if any)	to Loan Source						
1. Full Name (Last, First, Middle	Initial)			Name of Empl	loyer			
Mailing Address	Mailing Address			Occupation				
				Amount				
City	State	ZIP Code		Guaranteed Outstanding:		7		
2. Full Name (Last, First, Middle	Initial)			Name of Employer				
Mailing Address				Occupation				
				Amount			$\overline{}$	
City	State	ZIP Code		Guaranteed Outstanding:		7		
3. Full Name (Last, First, Middle	Initial)	'		Name of Empl	loyer			
Mailing Address				Occupation				
				Amount			$\overline{}$	
City	State	ZIP Code		Guaranteed Outstanding:		y		
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)				•	2	2000.00	
TOTALS This Period (last page in the	nis line onl	y)			·• [206	6000.00	Ī
Carry outstanding balance only to	LINE 3 SA	hedule D. for this	s line If n	o Schedule D	carry forw	ard to appropriate line o	f Summ	arv
Carry Carcaraning Delatice City to	0, 00	🗗, 101 1118	c. II II	- Joneaule D.	, ວພາເສ ເບເຈນ	and to appropriate line U	. Guillill	y.

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)

Comm	ittee	to F	ect	Dan	Shores
OULLIL	こしし			Dan	

Committee to Elect D			
A. Full Name (Last, First, Middle Initial) of De Plymouth Bay Consulting	ebtor or Credito	or	Nature of Debt (Purpose): Compliance Consulting (Contract Bonus Agreement)
Mailing Address 7 Alvin Rd			
City	State	Zip Code	
Plymouth	MA	02360	
Outstanding Balance Beginning This Period	Transaction ID : 764-		
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 De Shores, Daniel, L, ,	btor or Creditor	r	Nature of Debt (Purpose): Miscellaneous Expenses (FaceBook Boosts & Fuel)
Mailing Address 14 Dewey Avenue			
City	State	Zip Code	
Sandwich	MA	02563	
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 De	ebtor or Credito	or	Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	
Outstanding Balance Beginning This Period			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period
, , , , , , , , , , , , , , , , , , , ,		7	, , , , , , , , , , , , , , , , , , , ,
) SUBTOTALS This Period This Page (optional	1)		12351.85
TOTALS This Period (last page this line num	ber only) ······		12351.85
) TOTAL OUTSTANDING LOANS from Sched	ule C (last page	e only)	206000.00
) ADD 2) and 3) and carry forward to appropri	218351.85		