PAGE 1 / 11

FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3 For An	Authorized	Committee		Office Use Only
NAME OF TYPE OR PRI COMMITTEE (in full)  TYPE OR PRI	NT ▼	Example: If typing, to over the lines.	ype 12FE4M5	
Committee to Elect Dan Shores				
ADDRESS (number and street)				
Check if different				
than previously Plymouth reported. (ACC)			MA	02360
2. FEC IDENTIFICATION NUMBER ▼	CITY	•	STATE ▲	ZIP CODE ▲
C C00556217	3. IS THI REPO		OR AMENDI	STATE ▼ DISTRICT
4. TYPE OF REPORT (Choose One)	(b) 12-Day	PRE-Election Report for	or the:	
(a) Quarterly Reports:		Primary (12P)	General (12	2G) Runoff (12R)
April 15 Quarterly Report (Q1)		H	and the second	
July 15 Quarterly Report (Q2)		Convention (12C	Special (12	2S)
October 15 Quarterly Report (Q3)	Electio	on on	/ Y Y Y	in the State of
X January 31 Year-End Report (YE)	(c) 30-Day	POST-Election Report	for the:	
		General (30G)	Runoff (30)	R) Special (30S)
Termination Report (TER)	Electic	on on	/ Y Y Y Y	in the State of
5. Covering Period 10 / 01	/ Y Y 2023	through	M M / D D /	2023
I certify that I have examined this Report and Shores, Ja	to the best of i	my knowledge and belie	ef it is true, correct and	complete.
Type or Print Name of Treasurer				
Shores, James, L, Mr.	.,		Date 02	01 7 2024
NOTE: Submission of false, erroneous, or incomp	olete information	may subject the person	signing this Report to the	e penalties of 52 U.S.C. §30109
Office Use Only				FEC FORM 3 (Revised 05/2016)

#### **SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

Committee	to Floct	Dan	Shores
Commutee	to Elect	Dan	Shores

		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
7.	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
3.	Cash on Hand at Close of Reporting Period (from Line 27)	927.56	
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations Owed <b>BY</b> 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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
1. CONTRIBUTIONS (other than loans) FRO	M:		
<ul><li>(a) Individuals/Persons Other Than</li><li>Political Committees</li><li>(i) Itemized (use Schedule A)</li></ul>	0.00	0.00	
(ii) Unitemized	0.00	0.00	
(iii) TOTAL of contributions from individuals	0.00	0.00	
(b) Political Party Committees(c) Other Political Committees	0.00	0.00	
(such as PACs)	0.00	0.00	
(d) The Candidate(e) TOTAL CONTRIBUTIONS (other than loans)	0.00	0.00	
(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(c) TOTAL LOANS	000	0.00	
(add Lines 13(a) and (b))	0.00	0.00	
4. OFFSETS TO OPERATING EXPENDITURES	0.00	745.85	
(Refunds, Rebates, etc.)	0.00	743.03	
5. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00	
6. <b>TOTAL RECEIPTS</b> (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
	(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	om Line 22)	0.00
	CASH ON HAND AT CLOSE OF REPORTING		927.56

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

PAGE 5
FOR LINE NUMBER: (check only one)

X 13a

			Detailed Summary	/ Page			13b	
NAME OF COMMITTEE (In Full)	Tra	nsaction ID	: 759-10					
Committee to Elect Dan Shores								
LOAN SOURCE Full Name (Last, First, Middle Initial)								
Shores, Daniel, L, ,				Primary General				
Mailing Address 14 Dewey Avenue					Other (specify) ▼			
City	State	ZIP Code	)					
Sandwich	MA	02563			Personal Funds of the	Can	didate	
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance O	utstanding at Close of 1	Γhis	Period	
4000.00	9		0.00		400	0.00		
TERMS Date Incurred	D	ate Due	Interest (If none,		Secured	d:		
09 / 12 / Y Y Y Y Y Y Y	M M / D D		NA Y	0.00	% (apr)	s >	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			-		
City State	ZIP Code		Guaranteed Outstanding:	7				
2. Full Name (Last, First, Middle Initial)			Name of Employer					
Mailing Address	Mailing Address			Occupation				
			Amount Guaranteed			$\exists$		
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				
4. Full Name (Last, First, Middle Initial)			Name of Employer					
Mailing Address			Occupation					
			Amount			-		
City	ZIP Code		Guaranteed Outstanding:	7	7	_		
SURTOTALS This Pariod This Dags (anti-one)							-	
SUBTOTALS This Period This Page (optional)					4000	0.00	_	
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 S	umn	nary.	

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

FOR LINE NUMBER: (check only one)

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	13h

			Detailed Suffiffiary	Page			13b
NAME OF COMMITTEE (In Full)	Tra	nsaction II	D : 655-9				
Committee to Elect Dan Shores							
LOAN SOURCE Full Name (Last, First, Middle Initial)							
Shores, Daniel, L, ,				Primary General			
Mailing Address 14 Dewey Avenue					Other (specify) ▼		
City	State	ZIP Code	)			_	
Sandwich	MA	02563			Personal Funds of the	Can	ididate
Original Amount of Loan	Cumulative Pay	ment To D	ate	Balance O	Outstanding at Close of	This	Period
15000.00		7	0.00		1500	00.00	)
TERMS Date Incurred		ate Due	Interest (If none,		Secure	ed:	
M 09	M M / D D		NA Y	0.00	% (apr)	s D	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				
City	ZIP Code		Guaranteed Outstanding:	7		Ш	
2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
	1		Amount Guaranteed				
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	y		
4. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
			Amount				
City	ZIP Code		Guaranteed Outstanding:	7	7	Ц	
CURTOTAL C This Deviced This Device (seek)						_	
SUBTOTALS This Period This Page (optional)			·····		1500	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	o appropriate line of §	Sumn	nary.

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

FOR LINE NUMBER: (check only one)

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	13b

			Detailed Summary	/ Page	13b		
NAME OF COMMITTEE (In Full)	Trai	nsaction ID : 653-7	·				
Committee to Elect Dan Shores							
LOAN SOURCE Full Name (Last, First, Middle Initial)							
Shores, Daniel, L, ,				Primary General			
Mailing Address 14 Dewey Avenue				Other (specify) ▼			
City	City State ZIP Coo						
Sandwich	MA	02563		Personal Funds of the	: Candidate		
Original Amount of Loan	Cumulative Pay	ment To D	ate	Balance Outstanding at Close of	This Period		
30000.00		9	0.00	300	00.00		
TERMS Date Incurred		ate Due	Interest (If none,		ed:		
08 / 29 / 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				
City	ZIP Code	<b>I</b>	Guaranteed Outstanding:	9 9			
2. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
	1		Amount Guaranteed		$\neg$		
City State	ZIP Code		Outstanding:	7 7			
3. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
			Amount		$\overline{}$		
City State	ZIP Code		Guaranteed Outstanding:	7 7 7			
4. Full Name (Last, First, Middle Initial)			Name of Employer				
Mailing Address			Occupation				
			Amount				
City State	ZIP Code		Guaranteed Outstanding:				
CURTOTAL C. This Deviced This Device (s. 1)							
SUBTOTALS This Period This Page (optional)			······	3000	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 \$	Summary.		

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

FOR LINE NUMBER: (check only one)

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	13b

		100
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 ☐ Primary
Shores, Daniel, L, ,	General	
Mailing Address 14 Dewey Avenue		Other (specify) ▼
City	State	ZIP Code
Sandwich	MA	02563 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Page	yment To Date Balance Outstanding at Close of This Period
150000.00		0.00 150000.00
TERMS Date Incurred	С	Date 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	0.00 % (apr) Yes 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:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	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, 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)

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	13b		

OF

						130			
	ME OF COMMITTEE (In Full)				Tran	saction ID : 102-4			
C	ommittee to Elect Dan Shores	3							
LOAN SOURCE Full Name (Last, First, Middle Initial)						em Election: 2014			
	Shores, Daniel, L, ,				Primary  General				
	Mailing Address 14 Dewey Avenue				Other (specify) ▼				
•	City		State ZIP Code			Personal Funds of the Candidate			
	Sandwich	MA 02563			T croonal rands of the candidate				
	Original Amount of Loan		Cumulative Pay	Cumulative Payment To Date Ba		Balance Outstanding at Close of This Period			
	5000.00				0.00 5000.00				
İ	TERMS Date Incurred		С	Date Due	Interest F (If none, e				
	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			/ Y	NA Y Y 0.00 % (apr) Yes No				
l	List All Endorsers or Guarantors	(if any) to	o Loan Source						
ľ	Full Name (Last, First, Middle Initial)  Mailing Address			Name of Employer					
}				Occupation					
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , ,			
ŀ	Full Name (Last, First, Middle Initial)  Mailing Address				Name of Employer				
				Occupation					
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	. , ,			
İ	Full Name (Last, First, Middle Initial)  Mailing Address				Name of Employer  Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:				
ľ	4. Full Name (Last, First, Middle Initial)  Mailing Address			Name of Employer					
				Occupation					
				Amount					
	City	State	ZIP Code		Guaranteed Outstanding:	7			
SI	SUBTOTALS This Period This Page (optional)								
т	OTALS This Period (last page in this	line only	/)		······	, ,			
С	arry outstanding balance only to LI	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry f	forward to appropriate line of Summary.			
	<del>-</del>								

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

FOR LINE NUMBER: (check only one)

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OF

			Detailed Garrina	y rage		13b		
NAME OF COMMITTEE (In Full)			Tra	ansaction ID : 101-2	<u> </u>			
Committee to Elect Dan Shores								
LOAN SOURCE Full Name (Last, First, Mic	Item Election: 2014 Primary							
Shores, Daniel, L, ,	Shores, Daniel, L, ,							
Mailing Address	General Other (specify	y) <b>▼</b>						
14 Dewey Avenue								
City	State	ZIP Code						
Sandwich	MA	MA 02563			Personal Funds of the Candidate			
Original Amount of Loan	Original Amount of Loan Cumulative Payment			Balance Outstanding at	Close of This	Period		
2000.00	2000.00			0.00 2000.00				
7 7 7	-	7						
TERMS Date Incurred		Date Due	Interest (If none,	t Rate , enter 0)	Secured:			
M 01	M M / D D / Y Y Y Y M M / D D / Y			NA 0.00 % (apr) Yes 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					
City State	ZIP Code		Guaranteed Outstanding:	7 7				
Full Name (Last, First, Middle Initial)  Mailing Address			Name of Employer					
			Occupation					
				Amount				
City	ZIP Code		Guaranteed Outstanding:	7 7	1 4			
3. Full Name (Last, First, Middle Initial)			Name of Employer					
Mailing Address	Mailing Address			Occupation				
			Amount					
City	ZIP Code	<b>I</b>	Guaranteed Outstanding:	, , , , ,				
4. Full Name (Last, First, Middle Initial)		Name of Employer						
Mailing Address		Occupation						
				Amount				
City State	ZIP Code	<b>I</b>	Guaranteed Outstanding:	7				
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, Sch	nedule D. for this	s line. If no	Schedule D. carry	/ forward to appropriate	line of Sum	marv.		

#### 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

IANAE OF COMMUTTEE (I. F. II)		•	<u> </u>		
NAME OF COMMITTEE (In Full)	n Shar	.00			
Committee to Elect Da  A. Full Name (Last, First, Middle Initial) of			Notice of Dole (Dimensor)		
Plymouth Bay Consulting	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 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					
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	_		
Oity	State	Zip Gode			
Outstanding Balance Beginning This Peri	od		·		
	7				
Amount Incurred This Period	_	Payment This Period	Outstanding Balance at Close of This Period		
	T				
9 9		7 7			
SUBTOTALS This Period This Page (optio	nal)		12351.85		
TOTALS This Period (last page this line nu	12351.85				
TOTAL OUTSTANDING LOANS from Scho	206000.00				
ADD 2) and 3) and carry forward to appro	218351.85				