PAGE 1 / 11

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	uthorized Com	mittee	Offic	e Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	cample: If typing, type er the lines.	12FE4M5	
Committee to Elect	t Dan Shores				1
DDRESS (number and stree	et) 7 Alvin Rd				
▼ Check if different					
than previously reported. (ACC)	Plymouth			MA 0236	80
. FEC IDENTIFICATIO	N NUMBER W	CITY ▲		STATE A	ZIP CODE ▲
C C00556217	N NOMBER V	3. IS THIS	x NEW	AMENDED	STATE ▼ DISTRICT
O costosz.		REPORT	(N) OR	(A)	MA 09
. TYPE OF REPORT	(Choose One)	(b) 12-Day PRE	-Election Report for the	he:	
(a) Quarterly Reports	:	П			D (((40D)
April 15 Quart	terly Report (Q1)		Primary (12P)	General (12G)	Runoff (12R)
July 15 Quart	erly Report (Q2)		Convention (12C)	Special (12S)	
	uarterly Report (Q3)	Election on	M M / D D	/ Y Y Y Y	in the State of
January 31 Ye	ear-End Report (YE)	(a) 20 Day DOS	T Floation Donast for	.	
	(,	(c) 30-Day POS	T-Election Report for		
_			General (30G)	Runoff (30R)	Special (30S)
Termination R	eport (TER)	Election on	M M / D D	/ Y " Y " Y	in the State of
. Covering Period	M M / D D /	Y Y Y Y 2022	through	09 30 / Y	y y y y 2022
certify that I have examin	•	•	nowledge and belief it	is true, correct and con	nplete.
ype or Print Name of Trea	Shores, Jame asurer	:o, ∟, IVII.,			
Signature of Treasurer	Shores, James, L, Mr.,		[Electronically Filed]	Date 10	16 / Y Y Y Y Y Y Y Y 2022
IOTE: Submission of false,	erroneous or incomple	te information may	subject the person sign	ning this Report to the pe	nalties of 52 U.S.C. 83010
Office	enoneous, or incomple	i inomation may	Judgeot the person sign	ing this report to the pe	Tidines 01 52 0.5.0. 95010
Use Only					FEC FORM 3 (Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

PAGE 2 / 11

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Committee to Elect Dan Shores

2022 2022 09 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 0.00 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

PAGE 3 / 11

FEC Form 3 (Revised 05/2016)
Write or Type Committee Name

Committee to Elect Dan Shores

Report Covering the Period: From: 07 01 2022 To: 09 30 2022

I. RECEIPTS	I. RECEIPTS COLUMN A Total This Period		
1. CONTRIBUTIONS (other than loans) FROM	M:		
(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	
(e) TOTAL CONTRIBUTIONS (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)		7	
(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.	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	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		0.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	m Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		0.00

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

FOR LINE NUMBER: (check only one)

PAGE 5

13a

				Detailed Garrinar	y rage		13b	
NAME OF COMMITTEE (In Full)	1			Tra	nsaction ID :	759-10		
Committee to Elect Dan SI	nores							
LOAN SOURCE Full Name (Las	t, First, Mic	ldle Initial)		☐ Memo	Item Election	1: 2014		
Shores, Daniel, L, ,						mary		
						neral		
Mailing Address 14 Dewey Avenue					Oth	ner (specify) $lacktriangler$		
City State ZIP Cod			ZIP Code	 e				
Sandwich	Sandwich MA 02563				X P€	ersonal Funds of the (Candidate	
Original Amount of Loan	Original Amount of Loan Cumulative Payment To			ate	Balance Outs	tanding at Close of T	his Period	
40	00.00	,		0.00		4000).00	
TERMS Date Incurred		Г	Date Due	Interest	Rate enter 0)	Secured	i:	
M09 ^M / D12 ^D / Y Ž01	4 Y	M M / D D	/ Y	NA Y	0.00	% (apr)	x No	
List All Endorsers or Guaranton	re (if any) to	a Loan Source				76 (apr)	INO	
Full Name (Last, First, Middle)		S Edan Godice		Name of Employer				
1. Tuli Name (Last, Flist, Middle	z iriitiai)							
Mailing Address				Occupation				
			-	Amount				
City	State	ZIP Code		Guaranteed Outstanding:				
2. Full Name (Last, First, Middle	Initial)			Name of Employer Occupation				
Mailing Address								
				Amount				
City.	Ctata	ZID Code		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			
4. Full Name (Last, First, Middle	Initial)			Name of Employer				
Mailing Address				Occupation				
			-	A				
City	State	ZIP Code		Amount Guaranteed			7	
Oity	State	ZIF Code		Outstanding:	7	7		
CURTOTAL O This Deviced This Deve	(ti1)							
SUBTOTALS This Period This Page	· (optional)··			······		4000).00	
TOTALS This Period (last page in t	his line only	r)						
Carry outstanding balance only to	LINE 3 Sch	edule D for this	s line If n	n Schedule D. carn	forward to a	nnronriate line of Su	ımmarv	
Garry Outstariumy Datatice Utily to	LII1L 3, 301	iouulo D, IUI IIII	o mic. II III	, Jointaule D. Cally	ioiwalu lo d	ppropriate little of St	arriiridi y.	

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

FOR LINE NUMBER: (check only one)

PAGE 6

13a

OF

		130
NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores		Transaction ID: 655-9
LOAN COURCE Full Name (Last First Mis	1-11- 1:4:-1\	
Shores, Daniel, L, ,	adie initial)	☐ Memo Item
Mailing Address 14 Dewey Avenue		Other (specify) ▼
City	State	ZIP Code ** Personal Funds of the Candidate
Sandwich	MA	02563
Original Amount of Loan	Cumulative Pay	
15000.00	,	0.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M09M / D03D / Y 2014 Y	M M / D D	/ Y YNA Y 0.00
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:
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)		15000.00
TOTALS This Period (last page in this line only	/)	······································
Carry outstanding balance only to LINE 3, Sch	nedule 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 7
FOR LINE NUMBER: (check only one)

13a

OF

		130
NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores		Transaction ID: 653-7
	1 11 1 15	T =v
Shores, Daniel, L, ,	idle Initial)	☐ Memo Item Election: 2014 ▼ Primary
Mailing Address 14 Dewey Avenue		General Other (specify) ▼
City	State	ZIP Code
Sandwich	MA	02563 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	rment To Date Balance Outstanding at Close of This Period
30000.00	7	0.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M08M / P29P / Y Ž014 Y	M M / D D	/ Y YNAY Y 0.00
List All Endorsers or Guarantors (if any) to	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 State	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)		30000.00
TOTALS This Period (last page in this line only	/)	······································
Carry outstanding balance only to LINE 3, Sch	nedule 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

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X 13a

OF

		100
NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores		Transaction ID : 103-4
LOAN SOURCE Full Name (Last, First, Mid	Adla Initial)	Election: 0044
Shores, Daniel, L, ,	☐ Memo Item	
Mailing Address 14 Dewey Avenue	Other (specify) ▼	
City	State	ZIP Code Personal Funds of the Candidate
Sandwich	MA	02563
Original Amount of Loan	Cumulative Page	yment To Date Balance Outstanding at Close of This Period
150000.00	7	0.00 150000.00
TERMS Date Incurred	С	Date Due Interest Rate Secured: (If none, enter 0)
M03 ^M / D25 ^D / Y Ž014 Y	M M / D D	/ YNAY Y 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:
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 State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL O This David LTU David A		
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

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FOR LINE NUMBER: (check only one)

13a 13b

				Detailed of	arriiriary r ag	C		13b
AME OF COMMITTEE (In Full) Committee to Elect Dan Sh	ores				Transact	tion ID : 102-4		
		ddo Initial)			<u> </u>	Floation: 004		
LOAN SOURCE Full Name (Last, First, Middle Initial) Shores, Daniel, L, , Mailing Address 14 Dewey Avenue					Memo Item	Primary General Other (spec		
		I	T					
City Sandwich				le		x Personal	Funds of the Ca	andidate
Original Amount of Loan Cumulative Payment To			yment To	Date 0.00	Balar	nce Outstanding	at Close of Thi	
TERMS Date Incurred		D	ate Due		nterest Rate If none, enter		Secured:	
^M 02 ^M / ^D 02 ^D / Y Ž014	Y	M M / D D	/ Y	YNA Y	0.0		Yes	x No
List All Endorsers or Guarantors		o Loan Source						
1. Full Name (Last, First, Middle	Initial)			Name of Emp	loyer			
Mailing Address				Occupation				
City State ZIP Code				Amount Guaranteed Outstanding:				
2. Full Name (Last, First, Middle	nitial)	'		Name of Employer				
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		7 7]
3. Full Name (Last, First, Middle	nitial)	<u>.</u>		Name of Emp	loyer			
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		7 7]
4. Full Name (Last, First, Middle	nitial)	'		Name of Emp	loyer			
Mailing Address				Occupation				
City	State	ZIP Code		Amount Guaranteed Outstanding:		7 7]
SUBTOTALS This Period This Page	(optional)				· [,	5000.0	00
FOTALS This Period (last page in th	is line only	/)				, , , ,	7	
Carry outstanding balance only to L	INE 3, Sch	nedule D, for this	s line. If n	o Schedule D	, carry forw	ard to appropri	ate line of Sun	nmary.

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

FOR LINE NUMBER: (check only one)

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13a

				13b		
NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores			Tra	ansaction ID : 101-2		
				T =:		
LOAN SOURCE Full Name (Last, First, Mid	dle Initial)		☐ Memo			
Shores, Daniel, L, ,				Primary General		
Mailing Address				Other (specify)		
14 Dewey Avenue				- Carlot (opcomy) V		
City	State	ZIP Code	•			
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		
2000.00			0.00	2000.00		
TERMS Date Incurred	D	ate Due	Interest (If none,	t Rate Secured: , enter 0)		
M01 ^M / D05 ^D / Y Ž014 Y	M M / D D	/ Y Y	NA ^Y Y	0.00 % (apr) Yes X No		
List All Endorsers or Guarantors (if any) to	Loan Source					
1. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address		(Occupation			
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Amount			
City	ZIP Code		Guaranteed Outstanding:	9 9		
2. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address		(Occupation			
		,	Amount			
City State	ZIP Code		Guaranteed Outstanding:	7		
3. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address		(Occupation			
			Amount			
City State	ZIP Code		Guaranteed Outstanding:	y y		
4. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address			Occupation			
		<u> </u>	Amount			
City	ZIP Code		Guaranteed Outstanding:	, , , , ,		
		1				
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	edule D for this	line. If no	Schedule D. carry	y 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 11 OF
FOR LINE NUMBER:
(check only one)

•		9	
	X	10	

11

NAME OF COMMITTEE (In Full)

Committee to Elect D	an S	hores			
A. Full Name (Last, First, Middle Initial) of D Plymouth Bay Consulting			Nature of Debt (Purpose): Compliance Consulting (Contract Bonus Agreement)		
Mailing Address 7 Alvin Rd					
City Plymouth					
Outstanding Balance Beginning This Period	i		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 De Shores, Daniel, L, ,	btor or Cre	ditor	Nature of Debt (Purpose): Miscellaneous Expenses (FaceBook Boosts & Fuel)		
Mailing Address 14 Dewey Avenue			- Fuei)		
City Sandwich	State MA	Zip Code 02563			
Outstanding Balance Beginning This Period	ł		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 D	ebtor or Cr	editor	Nature of Debt (Purpose):		
Mailing Address					
City	State	Zip Code			
Outstanding Balance Beginning This Period	<u>'</u>				
7 7 7 7					
Amount Incurred This Period		Payment This Period	Outstanding Balance at Close of This Period		
7 7 7 7	l L.	7 7 7			
I) SUBTOTALS This Period This Page (optional	ıl)		12351.85		
2) TOTALS This Period (last page this line num	TOTALS This Period (last page this line number only)				
3) TOTAL OUTSTANDING LOANS from Sched	lule C (last	page only)	206000.00		
4) ADD 2) and 3) and carry forward to approp	218351.85				