

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12FE4M5

Committee to Elect Dan Shores

ADDRESS (number and street)

PO Box 3747

Check if different than previously reported. (ACC)

Plymouth

MA

02361

2. FEC IDENTIFICATION NUMBER

C C00556217

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

MA

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- Primary (12P)
General (12G)
Runoff (12R)
Convention (12C)
Special (12S)

Election on 09 / 09 / 2014 in the State of MA

(c) 30-Day POST-Election Report for the:

- General (30G)
Runoff (30R)
Special (30S)

Election on / / in the State of

5. Covering Period

07 / 01 / 2014 through 08 / 20 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. James L Shores

Signature of Treasurer Mr. James L Shores

[Electronically Filed]

Date

10 / 18 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Table with 7 columns and 1 row for Office Use Only

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Committee to Elect Dan Shores

Report Covering the Period: From: / / To: / /

	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))....	6420.00	67242.92
(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)).....	6420.00	67242.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	74764.01	170369.91
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	74764.01	170369.91
8. Cash on Hand at Close of Reporting Period (from Line 27).....	53873.01	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	159151.85	

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
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Committee to Elect Dan Shores

Report Covering the Period: From: / / To: / /

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).....	3900.00	56818.87
(ii) Unitemized.....	2520.00	10374.05
(iii) TOTAL of contributions from individuals ▶	6420.00	67192.92
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	50.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6420.00	67242.92
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	157000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	157000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	6420.00	224242.92

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	74764.01	170369.91
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) ►	74764.01	170369.91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	122217.02
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6420.00
25. SUBTOTAL (add Line 23 and Line 24).....	128637.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	74764.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	53873.01

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) frank granara		Date of Receipt M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 95 shrine Rd		Transaction ID : 0000639
City norwell	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer GIC	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) Steven J Bowen		Date of Receipt M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 38 King Caesar Rd PO Box 1741		Transaction ID : 0000642
City Duxbry	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Maine Pointe LLC	Occupation Chairman & Founder	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) John Kent		Date of Receipt M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 57 Reade St apt 14A		Transaction ID : 0000643
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Macquarie Capital	Occupation Investment Banker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	3150.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 32
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

A. Full Name (Last, First, Middle Initial)
Donald Garand

Mailing Address PO Box 1705

City Sagamore Beach State MA Zip Code 02562

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : 0000632

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Sherie Bush

Mailing Address 270 Stage Harbor Rd

City Chatham State MA Zip Code 02633

FEC ID number of contributing federal political committee. **C**

Name of Employer West Highland Placement Occupation Law Recruiter

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2014

Transaction ID : 0000646

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

3900.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 32			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Democracy Engine LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014	
Mailing Address 2125 14th St. NW Suite 101 West			Amount of Each Disbursement this Period 24.63	
City Washington	State DC	Zip Code 20009	Transaction ID : 0000774	
Purpose of Disbursement Bank Fee		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. TA Restaurant			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014	
Mailing Address 408 South Main St			Amount of Each Disbursement this Period 119.48	
City Fall River	State MA	Zip Code 02721	Transaction ID : 0000505	
Purpose of Disbursement Meeting Expense: Food & Beverage		Category/ Type 007		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) c. Sean Rausch			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014	
Mailing Address 4 Clipper Cir			Amount of Each Disbursement this Period 200.00	
City Sandwich	State MA	Zip Code 02563	Transaction ID : 0000511	
Purpose of Disbursement GOTV Consulting		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	344.11
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Elliot Gault		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address 81 Woodward Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : 0000512
City Seekonk	State MA	
Zip Code 02771	Purpose of Disbursement GOTV Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Alexander Vrontas		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address 4 Sarah Lawrence Rd		Amount of Each Disbursement this Period 400.00 Transaction ID : 0000513
City Sandwich	State MA	
Zip Code 02563	Purpose of Disbursement GOTV Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Lyric Consulting		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address 89 North Main St. Suite 205		Amount of Each Disbursement this Period 1224.00 Transaction ID : 0000507
City Andover	State MA	
Zip Code 01810	Purpose of Disbursement Media Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1824.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 32	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Conagh Technologies inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 50 Mattakeesett St.		Amount of Each Disbursement this Period 1097.35 Transaction ID : 0000509
City Pembroke	State MA	
Zip Code 02359	Purpose of Disbursement Office Equipment Rental	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Brewster Park Building Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 18 Main St. Ext. Suite 401		Amount of Each Disbursement this Period 1800.00 Transaction ID : 0000510
City Plymouth	State MA	
Zip Code 02360	Purpose of Disbursement Office rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Rachel Brask Artworks		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 370 Pleasant St		Amount of Each Disbursement this Period 1200.00 Transaction ID : 0000508
City Rumford	State RI	
Zip Code 02916	Purpose of Disbursement Website Consulting & Design	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4097.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Plymouth Bay Consulting			Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 7 Alvin Rd			Amount of Each Disbursement this Period 4000.00 Transaction ID : 0000518
City Plymouth	State MA	Zip Code 02360	
Purpose of Disbursement Compliance Consulting	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. East Coast Printing, Inc			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 2 Kieth Way Unit 5			Amount of Each Disbursement this Period 11840.94 Transaction ID : 0000519
City Hingham	State MA	Zip Code 02043	
Purpose of Disbursement Direct Mailing Expense	Candidate Name		Category/ Type 004
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. Democracy Engine LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 2125 14th St. NW Suite 101 West			Amount of Each Disbursement this Period 95.34 Transaction ID : 0000775
City Washington	State DC	Zip Code 20009	
Purpose of Disbursement Bank Fee	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	15936.28
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: PAGE 11 OF 32
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial)
A. BJ's Wholesale Club

Mailing Address 105 Shops at 5 Way

City Plymouth State MA Zip Code 02360

Purpose of Disbursement Event Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
185.34

Transaction ID : 0000525

Category/Type
003

Full Name (Last, First, Middle Initial)
B. Elliot Gault

Mailing Address 81 Woodward Ave

City Seekonk State MA Zip Code 02771

Purpose of Disbursement GOTV Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
200.00

Transaction ID : 0000520

Category/Type
001

Full Name (Last, First, Middle Initial)
c. Alexander Vrontas

Mailing Address 4 Sarah Lawrence Rd

City Sandwich State MA Zip Code 02563

Purpose of Disbursement GOTV Consulting

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 11 / 2014

Amount of Each Disbursement this Period
400.00

Transaction ID : 0000521

Category/Type
001

SUBTOTAL of Disbursements This Page (optional) 785.34

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. High Sails Strategies			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014		
Mailing Address 60 Ferncliffe Rd.			Amount of Each Disbursement this Period 2000.00		
City Seekonk	State MA	Zip Code 02771	Transaction ID : 0000522		
Purpose of Disbursement GOTV Consulting		001 Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Elliot Gault			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014		
Mailing Address 81 Woodward Ave			Amount of Each Disbursement this Period 156.04		
City Seekonk	State MA	Zip Code 02771	Transaction ID : 0000649		
Purpose of Disbursement Reimbursement for Campaign Expenses		001 Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	ITEMIZATION BELOW		
State:	District:				

Full Name (Last, First, Middle Initial) c. Highway Service			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014		
Mailing Address 400 Taunton Ave			Amount of Each Disbursement this Period 20.00		
City Seekonk	State MA	Zip Code 02771	Transaction ID : 0000649-0001		
Purpose of Disbursement Gasoline		001 Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO		
State:	District:				

SUBTOTAL of Disbursements This Page (optional)	2156.04
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Employment Contractor Services, Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 1 Kattelville Rd Suite 4		Amount of Each Disbursement this Period 1380.00
City Binghamton State NY Zip Code 13901	Purpose of Disbursement Salary Category/Type 001	
Candidate Name		Transaction ID : 0000523
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	ITEMIZATION BELOW	
State: District:		

Full Name (Last, First, Middle Initial) B. Paula Kibbe		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 33 Meadow St.		Amount of Each Disbursement this Period 1380.00
City Carver State MA Zip Code 02330	Purpose of Disbursement Salary Category/Type 001	
Candidate Name		Transaction ID : 0000523-0001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO	
State: District:		

Full Name (Last, First, Middle Initial) C. BJ's Wholesale Club		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 105 Shops at 5 Way		Amount of Each Disbursement this Period 17.97
City Plymouth State MA Zip Code 02360	Purpose of Disbursement Event Expenses Category/Type 003	
Candidate Name		Transaction ID : 0000529
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1397.97
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 32			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

A. Voice Broadcasting

Full Name (Last, First, Middle Initial)
Mailing Address 1527 S. Cooper St

City Arlington State TX Zip Code 76010

Purpose of Disbursement Advertising Expense
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 121.05
Transaction ID : 0000534

Category/Type: 004

B. Democracy Engine LLC

Full Name (Last, First, Middle Initial)
Mailing Address 2125 14th St. NW Suite 101 West

City Washington State DC Zip Code 20009

Purpose of Disbursement Bank Fee
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 17 / 2014

Amount of Each Disbursement this Period: 2.07
Transaction ID : 0000776

Category/Type: 001

c. Precision Signz

Full Name (Last, First, Middle Initial)
Mailing Address 1055 Valley Dr.

City Riverdale State IA Zip Code 52722

Purpose of Disbursement Campaign Print Material
Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 17 / 2014

Amount of Each Disbursement this Period: 3315.00
Transaction ID : 0000535

Category/Type: 006

SUBTOTAL of Disbursements This Page (optional) 3438.12

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Yarmouth House		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 335 Rte 28		Amount of Each Disbursement this Period 750.00 Transaction ID : 0000537
City West Yarmouth	State MA	
Zip Code 02673	Purpose of Disbursement Event Expenses	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Elliot Gault		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 81 Woodward Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : 0000538
City Seekonk	State MA	
Zip Code 02771	Purpose of Disbursement GOTV Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Alexander Vrontas		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 4 Sarah Lawrence Rd		Amount of Each Disbursement this Period 400.00 Transaction ID : 0000539
City Sandwich	State MA	
Zip Code 02563	Purpose of Disbursement GOTV Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1350.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Nation Builder		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 448 S. Hill St. Suite 200		Amount of Each Disbursement this Period 67.00
City Los Angeles	State CA Zip Code 90013	
Purpose of Disbursement Web Hosting	Category/Type 001	Transaction ID : 0000543
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Hess Plymouth		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 105 Samoset St		Amount of Each Disbursement this Period 53.05
City Plymouth	State MA Zip Code 02360	
Purpose of Disbursement Gasoline	Category/Type 001	Transaction ID : 0000548
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Democracy Engine LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 2125 14th St. NW Suite 101 West		Amount of Each Disbursement this Period 117.24
City Washington	State DC Zip Code 20009	
Purpose of Disbursement Bank Fee	Category/Type 001	Transaction ID : 0000777
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	237.29
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. East Coast Printing, Inc		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 2 Kieth Way Unit 5		Amount of Each Disbursement this Period 600.32 Transaction ID : 0000540
City Hingham	State MA	
Zip Code 02043	Purpose of Disbursement Campaign Print Material	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Plymouth Bay Consulting		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 7 Alvin Rd		Amount of Each Disbursement this Period 4000.00 Transaction ID : 0000549
City Plymouth	State MA	
Zip Code 02360	Purpose of Disbursement Compliance Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Delux Business Systems		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 3680 Victoria St. N.		Amount of Each Disbursement this Period 122.32 Transaction ID : 0000555
City Shoreview	State MN	
Zip Code 55126	Purpose of Disbursement Bank Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4722.64
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Alexander Vrontas		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 4 Sarah Lawrence Rd		Amount of Each Disbursement this Period 400.00 Transaction ID : 0000556
City Sandwich	State MA	
Zip Code 02563	Purpose of Disbursement GOTV Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Elliot Gault		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 81 Woodward Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : 0000557
City Seekonk	State MA	
Zip Code 02771	Purpose of Disbursement GOTV Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. TA Restaurant		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 408 South Main St		Amount of Each Disbursement this Period 175.52 Transaction ID : 0000553
City Fall River	State MA	
Zip Code 02721	Purpose of Disbursement Meeting Expense: Food & Beverage	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	775.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Elliot Gault		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 81 Woodward Ave		Amount of Each Disbursement this Period 117.60
City Seekonk	State MA	
Zip Code 02771		Transaction ID : 0000650
Purpose of Disbursement Reimbursement for Campaign Expenses	Category/ Type 001	
Candidate Name		ITEMIZATION BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Highway Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014
Mailing Address 400 Taunton Ave		Amount of Each Disbursement this Period 20.00
City Seekonk	State MA	
Zip Code 02771		Transaction ID : 0000650-0001
Purpose of Disbursement Gasoline	Category/ Type 001	
Candidate Name		[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Highway Service		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 400 Taunton Ave		Amount of Each Disbursement this Period 20.00
City Seekonk	State MA	
Zip Code 02771		Transaction ID : 0000650-0002
Purpose of Disbursement Gasoline	Category/ Type 001	
Candidate Name		[MEMO ITEM] MEMO
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	117.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Campaign Homebank, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 17 Crosby Ln		Amount of Each Disbursement this Period 2500.00 Transaction ID : 0000559
City Londonderry State NH Zip Code 03053	Purpose of Disbursement GOTV Consulting Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Hess Plymouth		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 105 Samoset St		Amount of Each Disbursement this Period 30.84 Transaction ID : 0000560
City Plymouth State MA Zip Code 02360	Purpose of Disbursement Gasoline Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. TA Restaurant		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 408 South Main St		Amount of Each Disbursement this Period 126.73 Transaction ID : 0000563
City Fall River State MA Zip Code 02721	Purpose of Disbursement Meeting Expense: Food & Beverage Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2657.57
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Brewster Park Building Inc		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 18 Main St. Ext. Suite 401		Amount of Each Disbursement this Period 1800.00 Transaction ID : 0000564
City Plymouth	State MA	
Zip Code 02360	Purpose of Disbursement Office rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. High Sails Strategies		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 60 Ferncliffe Rd.		Amount of Each Disbursement this Period 2000.00 Transaction ID : 0000567
City Seekonk	State MA	
Zip Code 02771	Purpose of Disbursement GOTV Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Elliot Gault		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 81 Woodward Ave		Amount of Each Disbursement this Period 400.00 Transaction ID : 0000569
City Seekonk	State MA	
Zip Code 02771	Purpose of Disbursement GOTV Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4200.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Alexander Vrontas		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 4 Sarah Lawrence Rd		Amount of Each Disbursement this Period 800.00 Transaction ID : 0000570
City Sandwich	State MA	
Zip Code 02563	Purpose of Disbursement GOTV Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Lyric Consulting		Date of Disbursement MM / DD / YYYY 08 / 05 / 2014
Mailing Address 89 North Main St. Suite 205		Amount of Each Disbursement this Period 510.00 Transaction ID : 0000568
City Andover	State MA	
Zip Code 01810	Purpose of Disbursement Media Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Comcast Cable Communication		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address PO Box 196		Amount of Each Disbursement this Period 145.30 Transaction ID : 0000580
City Newark	State NJ	
Zip Code 07101	Purpose of Disbursement Internet Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1455.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Comcast Cable Communication		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address PO Box 196		Amount of Each Disbursement this Period 210.11 Transaction ID : 0000581
City Newark	State NJ	
Zip Code 07101	Purpose of Disbursement Internet Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Conagh Technologies inc		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address 50 Mattakeesett St.		Amount of Each Disbursement this Period 1065.91 Transaction ID : 0000583
City Pembroke	State MA	
Zip Code 02359	Purpose of Disbursement Office Equipment Rental	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Verizon		Date of Disbursement MM / DD / YYYY 08 / 07 / 2014
Mailing Address PO Box 15124		Amount of Each Disbursement this Period 995.78 Transaction ID : 0000582
City Albany	State NY	
Zip Code 12212	Purpose of Disbursement Phone Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2271.80
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Campaign Homebank, LLC			Date of Disbursement MM / DD / YYYY 08 / 13 / 2014	
Mailing Address 17 Crosby Ln			Amount of Each Disbursement this Period 13750.00	
City Londonderry	State NH	Zip Code 03053	Transaction ID : 0000590	
Purpose of Disbursement GOTV Consulting		001 Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Tim Wayne			Date of Disbursement MM / DD / YYYY 08 / 13 / 2014	
Mailing Address 32 Belvedere St			Amount of Each Disbursement this Period 300.00	
City San Francisco	State CA	Zip Code 94117	Transaction ID : 0000591	
Purpose of Disbursement Website Consulting & Design		001 Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Plymouth Bay Consulting			Date of Disbursement MM / DD / YYYY 08 / 14 / 2014	
Mailing Address 7 Alvin Rd			Amount of Each Disbursement this Period 4000.00	
City Plymouth	State MA	Zip Code 02360	Transaction ID : 0000592	
Purpose of Disbursement Compliance Consulting		001 Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional)	18050.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Elliot Gault		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 81 Woodward Ave		Amount of Each Disbursement this Period 200.00 Transaction ID : 0000593
City Seekonk	State MA	
Zip Code 02771	Purpose of Disbursement GOTV Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Alexander Vrontas		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 4 Sarah Lawrence Rd		Amount of Each Disbursement this Period 400.00 Transaction ID : 0000594
City Sandwich	State MA	
Zip Code 02563	Purpose of Disbursement GOTV Consulting	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Elliot Gault		Date of Disbursement MM / DD / YYYY 08 / 14 / 2014
Mailing Address 81 Woodward Ave		Amount of Each Disbursement this Period 231.47 Transaction ID : 0000651
City Seekonk	State MA	
Zip Code 02771	Purpose of Disbursement Reimbursement for Campaign Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	ITEMIZATION BELOW

SUBTOTAL of Disbursements This Page (optional).....	831.47
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Highway Service		Date of Disbursement MM / DD / YYYY 07 / 29 / 2014
Mailing Address 400 Taunton Ave		Amount of Each Disbursement this Period 25.00
City Seekonk	State MA	
Zip Code 02771	Purpose of Disbursement Gasoline	Transaction ID : 0000651-0004
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. Highway Service		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 400 Taunton Ave		Amount of Each Disbursement this Period 20.00
City Seekonk	State MA	
Zip Code 02771	Purpose of Disbursement Gasoline	Transaction ID : 0000651-0005
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO
State: District:		

Full Name (Last, First, Middle Initial) c. Highway Service		Date of Disbursement MM / DD / YYYY 08 / 01 / 2014
Mailing Address 400 Taunton Ave		Amount of Each Disbursement this Period 20.00
City Seekonk	State MA	
Zip Code 02771	Purpose of Disbursement Gasoline	Transaction ID : 0000651-0006
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Park Plymouth		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 40 Court St Floor 1 Unit 1		Amount of Each Disbursement this Period 1.00
City Plymouth	State MA Zip Code 02360	
Purpose of Disbursement Parking	Category/Type 007	Transaction ID : 0000651-0014
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] MEMO
State: District:		

Full Name (Last, First, Middle Initial) B. East Coast Printing, Inc		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 2 Kieth Way Unit 5		Amount of Each Disbursement this Period 717.19
City Hingham	State MA Zip Code 02043	
Purpose of Disbursement Campaign Print Material	Category/Type 006	Transaction ID : 0000600
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Plymouth Center Sta. USPS		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address PO Box 0000		Amount of Each Disbursement this Period 98.00
City Plymouth	State MA Zip Code 02361	
Purpose of Disbursement Postage, Non-Bulk Mail	Category/Type 006	Transaction ID : 0000598
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	815.19
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Committee to Elect Dan Shores

Full Name (Last, First, Middle Initial) A. Quantum of Cape Cod		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 154 Barnstable Rd		Amount of Each Disbursement this Period 4830.00
City Hyannis	State MA Zip Code 02601	
Purpose of Disbursement Radio Spot Production	Category/Type 004	Transaction ID : 0000599
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Nation Builder		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 448 S. Hill St. Suite 200		Amount of Each Disbursement this Period 67.00
City Los Angeles	State CA Zip Code 90013	
Purpose of Disbursement Web Hosting	Category/Type 001	Transaction ID : 0000597
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4897.00
TOTAL This Period (last page this line number only).....	72360.59

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 103-4

Committee to Elect Dan Shores

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Daniel L Shores

Primary
 General
 Other (specify) ▼

Mailing Address
14 Dewey Avenue

City State ZIP Code
Sandwich MA 02563

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
150000.00 0.00 150000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 03 / D 25 / Y 2014 M M / D D / Y NA % (apr) 0.00 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
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : 102-4

Committee to Elect Dan Shores

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

Daniel L Shores

Primary
 General
 Other (specify) ▼

Mailing Address
14 Dewey Avenue

City State ZIP Code
Sandwich MA 02563

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS

Date Incurred: M 02 / D 02 / Y 2014
 Date Due: M M / D D / Y NA
 Interest Rate: 0.00 % (apr)
 Secured: 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
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed 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.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Committee to Elect Dan Shores** Transaction ID : 101-2

LOAN SOURCE Full Name (Last, First, Middle Initial) Daniel L Shores	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 14 Dewey Avenue		

City	State	ZIP Code
Sandwich	MA	02563

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	01 / 05 / 2014	NA	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	2000.00
TOTALS This Period (last page in this line only).....	157000.00
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

NAME OF COMMITTEE (In Full)

Committee to Elect Dan Shores

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Daniel L Shores

Mailing Address 14 Dewey Avenue

City State Zip Code
 Sandwich MA 02563

Nature of Debt (Purpose):
 Miscellaneous Expenses

Outstanding Balance Beginning This Period	Transaction ID : 652-6	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="2151.85"/>	<input type="text" value="0.00"/>	<input type="text" value="2151.85"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="2151.85"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="2151.85"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="157000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="159151.85"/>