

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)

P.O. 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 James L Shores

Signature of Treasurer James L Shores

[Electronically Filed]

Date

08 / 28 / 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.

Office Use Only								
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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	67307.82
(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	67307.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	74514.70	169655.24
(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)).....	74514.70	169655.24
8. Cash on Hand at Close of Reporting Period (from Line 27).....	54652.58	
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	56883.77
(ii) Unitemized.....	2520.00	10374.05
(iii) TOTAL of contributions from individuals ▶	6420.00	67257.82
(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	67307.82
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	224307.82

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	74514.70	169655.24
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) ►	74514.70	169655.24

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	122747.28
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	6420.00
25. SUBTOTAL (add Line 23 and Line 24).....	129167.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	74514.70
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	54652.58

**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 28
	<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

A. Full Name (Last, First, Middle Initial)
frank granara

Mailing Address 95 shrine Rd

City norwell State MA Zip Code 02061

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

Name of Employer GIC Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : 0000639

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Steven J Bowen

Mailing Address 38 King Caesar Rd
PO Box 1741

City Duxbry State MA Zip Code 02331

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

Name of Employer Maine Pointe LLC Occupation Chairman & Founder

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : 0000642

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 57 Reade St
apt 14A

City New York State NY Zip Code 10007

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

Name of Employer Macquarie Capital Occupation Investment Banker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 05 / 2014

Transaction ID : 0000643

Amount of Each Receipt this Period
 300.00

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

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

3150.00

**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 28
	<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 State Zip Code
Sagamore Beach MA 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 State Zip Code
Chatham MA 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 28			
	<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. 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) B. 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: _____				

Full Name (Last, First, Middle Initial) C. Elliot Gault			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014		
Mailing Address 81 Woodward Ave			Amount of Each Disbursement this Period 200.00		
City Seekonk	State MA	Zip Code 02771	Transaction ID : 0000512		
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).....	519.48
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 28			
	<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 / 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) B. 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:	

Full Name (Last, First, Middle Initial) c. Conagh Technologies inc		Date of Disbursement MM / DD / YYYY 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:	

SUBTOTAL of Disbursements This Page (optional).....	2721.35
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 9 OF 28			
	<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 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) B. 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:	

Full Name (Last, First, Middle Initial) c. 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	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).....	7000.00
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 10 OF 28			
	<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 / 08 / 2014	
Mailing Address 2 Kieth Way Unit 5			Amount of Each Disbursement this Period 11840.94	
City Hingham	State MA	Zip Code 02043	Transaction ID : 0000519	
Purpose of Disbursement Direct Mailing Expense		Category/ Type 004		
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. BJ's Wholesale Club			Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014	
Mailing Address 105 Shops at 5 Way			Amount of Each Disbursement this Period 185.34	
City Plymouth	State MA	Zip Code 02360	Transaction ID : 0000525	
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) C. 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 200.00	
City Seekonk	State MA	Zip Code 02771	Transaction ID : 0000520	
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).....	12226.28
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: (check only one)	PAGE 11 OF 28			
	<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 / 11 / 2014
Mailing Address 4 Sarah Lawrence Rd		Amount of Each Disbursement this Period 400.00 Transaction ID : 0000521
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. High Sails Strategies		Date of Disbursement MM / DD / YYYY 07 / 11 / 2014
Mailing Address 60 Ferncliffe Rd.		Amount of Each Disbursement this Period 2000.00 Transaction ID : 0000522
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 MM / DD / YYYY 07 / 11 / 2014
Mailing Address 81 Woodward Ave		Amount of Each Disbursement this Period 156.04 Transaction ID : 0000649
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 NOT REQUIRED

SUBTOTAL of Disbursements This Page (optional).....	2556.04
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 12 OF 28			
	<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. Employment Contractor Services, Inc

Full Name (Last, First, Middle Initial)

Mailing Address 1 Kattelville Rd
Suite 4

City Binghamton State NY Zip Code 13901

Purpose of Disbursement Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 07 / 11 / 2014

Amount of Each Disbursement this Period: 1380.00

Transaction ID : 0000523

Category/Type: 001

B. BJ's Wholesale Club

Full Name (Last, First, Middle Initial)

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: 07 / 14 / 2014

Amount of Each Disbursement this Period: 17.97

Transaction ID : 0000529

Category/Type: 003

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)..... 4712.97

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 13 OF 28			
	<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. 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	
Purpose of Disbursement Event Expenses	Category/ Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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	
Purpose of Disbursement GOTV Consulting	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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	
Purpose of Disbursement GOTV Consulting	Category/ Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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 14 OF 28			
	<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	Transaction ID : 0000543
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)	
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	Transaction ID : 0000548
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)	
State: District:		

Full Name (Last, First, Middle Initial) c. 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
City Hingham	State MA	
Zip Code 02043	Purpose of Disbursement Campaign Print Material	Transaction ID : 0000540
Candidate Name	006 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)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	720.37
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 28			
	<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 / 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) B. 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:	

Full Name (Last, First, Middle Initial) C. Alexander Vrontas		Date of Disbursement M M / D D / Y Y Y Y 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:	

SUBTOTAL of Disbursements This Page (optional).....	4522.32
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 28			
	<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 / 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) B. 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:	

Full Name (Last, First, Middle Initial) c. Elliot Gault		Date of Disbursement MM / DD / YYYY 07 / 28 / 2014
Mailing Address 81 Woodward Ave		Amount of Each Disbursement this Period 117.60 Transaction ID : 0000650
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 NOT REQUIRED

SUBTOTAL of Disbursements This Page (optional).....	493.12
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 17 OF 28	
	<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 18 OF 28	
	<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 MM / DD / YYYY 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 MM / DD / YYYY 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 MM / DD / YYYY 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 19 OF 28			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <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. 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 20 OF 28	
	<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 21 OF 28	
	<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 Transaction ID : 0000590
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. Tim Wayne		Date of Disbursement MM / DD / YYYY 08 / 13 / 2014
Mailing Address 32 Belvedere St		Amount of Each Disbursement this Period 300.00 Transaction ID : 0000591
City San Francisco State CA Zip Code 94117	Purpose of Disbursement Website Consulting & Design 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. 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 Transaction ID : 0000592
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:	

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 22 OF 28			
	<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		
City Seekonk	State MA	Zip Code 02771	Transaction ID : 0000593		
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. 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		
City Sandwich	State MA	Zip Code 02563	Transaction ID : 0000594		
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) 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		
City Seekonk	State MA	Zip Code 02771	Transaction ID : 0000651		
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)				
State: District:					

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 23 OF 28			
	<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 08 / 19 / 2014
Mailing Address 2 Kieth Way Unit 5		Amount of Each Disbursement this Period 717.19 Transaction ID : 0000600
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 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 Transaction ID : 0000598
City Plymouth	State MA	
Zip Code 02361	Purpose of Disbursement Postage, Non-Bulk Mail	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) C. 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 Transaction ID : 0000599
City Hyannis	State MA	
Zip Code 02601	Purpose of Disbursement Radio Spot Production	Category/ Type 004
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).....	5645.19
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 24 OF 28	
	<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 MM / DD / YYYY 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) B.		Date of Disbursement MM / DD / YYYY
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:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
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)	67.00
TOTAL This Period (last page this line number only)	72000.26

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)

Daniel L Shores

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address

14 Dewey Avenue

City

State

ZIP Code

Sandwich

MA

02563

Original Amount of Loan

150000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

150000.00

TERMS

Date Incurred

M 03 / D 25 / Y 2014 Y

Date Due

M M / D D / Y NA Y Y

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)..... ▶

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)

Daniel L Shores

Election: 2014

Primary
 General
 Other (specify) ▼

Mailing Address

14 Dewey Avenue

City

State

ZIP Code

Sandwich

MA

02563

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

M M / D D / Y Y Y Y
02 / 02 / 2014

Date Due

M M / D D / Y Y Y 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) **[PERSONAL FUNDS]** Daniel L Shores
 Election: 2014
 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
2000.00	0.00	2000.00

TERMS
 Date Incurred: M 01 / D 05 / 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).....	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		Nature of Debt (Purpose): Miscellaneous Expenses
Mailing Address 14 Dewey Avenue		
City State Zip Code Sandwich MA 02563		

Outstanding Balance Beginning This Period 0.00	Transaction ID : 652-6	
Amount Incurred This Period 2151.85	Payment This Period 0.00	Outstanding Balance at Close of This Period 2151.85

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State Zip Code		

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

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