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FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3	For An A	Authorized Com	mittee			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRIN		ample: If typin er the lines.	g, type	12FE4M5	
Committee to Ele	ect Dan Shores					
ADDRESS (number and s	treet)	s.				
Check if different than previously reported. (ACC	Sandwich				MA L	02563
2. FEC IDENTIFICAT	TION NUMBER ▼	CITY ▲			STATE A	ZIP CODE
C C00556217		3. IS THIS REPORT	× NEW (N)	OR	AMEND (A)	STATE ▼ DISTRICT DED MA 09 L 1
	orts: uarterly Report (Q1)	(b) 12-Day PRE	-Election Repo Primary (12P) Convention (General (1	
	arterly Report (Q2) 5 Quarterly Report (Q3)	Election on	M M /	D D /	YYYY	in the State of
X January 31	Year-End Report (YE)	(c) 30-Day POS	T -Election Rep	port for the:		
			General (30G	i)	Runoff (30	OR) Special (30S)
Termination	n Report (TER)	Election on	M M /	D D /	Y " Y " Y	in the State of
5. Covering Period	M M / D D /	Y Y Y Y Y 2015	through	M M M 12	/ 31 /	Y Y Y Y 2015
I certify that I have exam		-	owledge and	belief it is tr	ue, correct and	d complete.
Type or Print Name of 1	Freasurer Mr. James L	Shores				
Signature of Treasurer	Mr. James L Shores		[Electronically 1	Filed] [Date 01	14 2016
	se, erroneous, or incomple	ete information may	subject the per	son signing t	this Report to the	he penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Committee to Elect Dan Shores

			COLUMN This Perio		COLUM Election Cyc	
6.	Net	Contributions (other than loans)				
	(a)	Total Contributions (other than loans) (from Line 11(e))		0.00	,	0.00
	(b)	Total Contribution Refunds (from Line 20(d))		0.00	, , , , ,	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))		0.00	9	0.00
7.	Net	Operating Expenditures				
	(a)	Total Operating Expenditures (from Line 17)	7 1 7	0.00		1837.34
	(b)	Total Offsets to Operating Expenditures (from Line 14)	7 1 7 1	0.00		745.85
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	7	0.00		1091.49
3.		sh on Hand at Close of porting Period (from Line 27)	7	927.56		
9.	the	ots and Obligations Owed TO Committee (Itemize all on needule C and/or Schedule D)		0.00		
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)		218351.85		

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)

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Write or Type Committee Name

Committee to Elect Dan Shores

10 01 2015 12 31 2015 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
1. (CONTRIBUTIONS (other than loans) FROM:		
(a	a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	0.00
(1	p) Political Party Committees	0.00	0.00
(0	c) Other Political Committees (such as PACs)	0.00	0.00
(6	,	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
	RANSFERS FROM OTHER	0.00	0.00
		9 9 9 9	9 9
	OANS: a) Made or Guaranteed by the		
	Candidate	0.00	0.00
(1	o) All Other Loans	0.00	0.00
(0	c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
	OFFSETS TO OPERATING		
	XPENDITURES Refunds, Rebates, etc.)	0.00	745.85
	OTHER RECEIPTS Dividends, Interest, etc.)	0.00	0.00
1	OTAL RECEIPTS (add Lines 1(e), 12, 13(c), 14, and 15) Carry Total to Line 24, page 4)	0.00	745.88

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

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		II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OP	ERATING EXPENDITURES	0.00	1837.34
18.		ANSFERS TO OTHER THORIZED COMMITTEES	0.00	0.00
19.	LO	AN REPAYMENTS:		
	(a)	Of Loans Made or Guaranteed by the Candidate	0.00	0.00
	(b)	Of All Other Loans	0.00	0.00
	(c)	TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REI	FUNDS 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	0.00	0.00
		(such as PACs)		
	(d)	TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	ОТІ	HER DISBURSEMENTS	0.00	0.00
22.		TAL DISBURSEMENTS d Lines 17, 18, 19(c), 20(d), and 21)	0.00	1837.34
		III. CASH SU	MMARY	
23.	CA	SH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	927.56
24	то	TAL RECEIPTS THIS PERIOD (from Line 1	16, page 3)	0.00
25.	SUI	BTOTAL (add Line 23 and Line 24)		927.56
26.	TO	TAL DISBURSEMENTS THIS PERIOD (from	m Line 22)	0.00
27.	CAS	SH ON HAND AT CLOSE OF REPORTING	G PERIOD	927.56

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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×	13a
	13b

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Detailed Summary Page Transaction ID: 759-10 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M ^D12 ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 4000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

PAGE

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	13h

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OF

Detailed Summary Page Transaction ID: 655-9 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 15000.00 0.00 15000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^M 09^M 03 ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City Outstanding: SUBTOTALS This Period This Page (optional)..... 15000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

PAGE

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DAN5		Detailed Summary Pag	ge (Check only one) 13b
AME OF COMMITTEE (In Full) Committee to Elect Dan Sho	es	Transac	etion ID : 653-7
LOAN SOURCE Full Name (Last, F Daniel L Shores	irst, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General
Mailing Address 14 Dewey Avenue			Other (specify)
City	State Z	IP Code	
Sandwich	MA (02563	
Original Amount of Loan	Cumulative Payme	ent To Date Bala	ance Outstanding at Close of This Period
30000.	00	0.00	30000.00
TERMS Date Incurred	Date	e Due Interest Rate	e Secured:
M08 ^M / D29 ^D / Y Ž014	Y M M / D D	/ Y YNA Y 0.00	% (apr) Yes No
List All Endorsers or Guarantors (i	f any) to Loan Source		TCS NO
1. Full Name (Last, First, Middle In	tial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	g
2. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9
3. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9
4. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed Outstanding:	9 9 9
SUBTOTALS This Period This Page (o	otional)	<u> </u>	30000.00
OTALS This Period (last page in this Carry outstanding balance only to LIN			ward to appropriate line of Super-
July Judgianumy Dalance Only to Lin		no. Il no ochedale D, carry lorv	rais to appropriate line or ourillary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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OF

Detailed Summary Page Transaction ID: 103-4 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 150000.00 0.00 150000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: ^D25 ^M 03^M ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount State ZIP Code Guaranteed City 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.

Use separate schedule(s) for each category of the

FOR LINE NUMBER:

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JAN5			Detailed Summary Pa	age (Crieck Only One)	13b
AME OF COMMITTEE (In Full) Committee to Elect Dan Sh	nores		Transa	action ID : 102-4	
LOAN SOURCE Full Name (Las Daniel L Shores	t, First, Middle Initial)	[PERSONAL FUNDS]	Election: 2014 Primary General	
Mailing Address 14 Dewey Avenue				Other (specify)	
City Sandwich	State MA	ZIP Co 02563	de		
Original Amount of Loan	Cumula 00.00	tive Payment To	Date Ba	lance Outstanding at Close of T	his Period 0.00
TERMS Date Incurred		Date Due	Interest Ra	ite Secured	d:
M ₀₂ M / D ₀₂ D / Y 2014	Y Y M M /	D D / Y	NA O.C	00 % (apr) Yes	X No
List All Endorsers or Guarantor	s (if any) to Loan S	ource			
1. Full Name (Last, First, Middle	Initial)		Name of Employer		
Mailing Address			Occupation		
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	y y	
2. Full Name (Last, First, Middle	Initial)		Name of Employer		
Mailing Address			Occupation		
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	7 7 7	
3. Full Name (Last, First, Middle	Initial)		Name of Employer		
Mailing Address			Occupation		
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	9 9 9	
4. Full Name (Last, First, Middle	Initial)		Name of Employer		
Mailing Address			Occupation		
City	State ZIP Co	ode	Amount Guaranteed Outstanding:	9 1 9 1 9	
SUBTOTALS This Period This Page	(optional)		·····	500	0.00
TOTALS This Period (last page in the					
Carry outstanding balance only to	LINE 3, Schedule D,	ior this line. If	no schedule D, carry for	rward to appropriate line of St	ıınmary.

Use separate schedule(s) for each category of the

FOR LINE NUMBER: (check only one)

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Detailed Summary Page Transaction ID: 101-2 NAME OF COMMITTEE (In Full) Committee to Elect Dan Shores LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 [PERSONAL FUNDS] Primary Daniel L Shores General Mailing Address Other (specify) \blacktriangledown 14 Dewey Avenue State ZIP Code City MA 02563 Sandwich Original Amount of Loan Balance Outstanding at Close of This Period Cumulative Payment To Date 2000.00 0.00 2000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 05 ^M 01 ^M ž014 0.00 NA % (apr) No List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed ZIP Code City State Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code Guaranteed City State Outstanding: SUBTOTALS This Period This Page (optional)..... 2000.00 TOTALS This Period (last page in this line only) 206000.00 Carry outstanding balance only to LINE 3, 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

(Use separate schedule(s) for each numbered line) PAGE 11 OF
FOR LINE NUMBER:
(check only one)

UMBER:		
one)		9
	X	10

11

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Plymouth Bay Consulting		Nature of Debt (Purpose): Compliance Consulting
City State	Zip Code	
Plymouth	MA 02360	
Outstanding Balance Beginning This Period		Transaction ID : 764-
10200.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	10200.00
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Daniel L Shores		Miscellaneous Expenses
Mailing Address 14 Dewey Avenue		
City State	Zip Code	
Sandwich	MA 02563	
Outstanding Balance Beginning This Period		Transaction ID : 652-
2151.85		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	2151.85
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	_
Oily	State Zip Gode	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
9 9 9	, ,	
		12351.85
SUBTOTALS This Period This Page (optional)		12001.00
TOTALS This Period (last page this line number only)		12351.85
TOTAL OUTSTANDING LOANS from Schedule C (last page only)		206000.00
ADD 2) and 3) and carry forward to appropriate li	218351.85	