

SEEC FORM 20

Itemized Campaign Finance Disclosure Statement
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
Revised January 2015



TOWN & CITY CLERK
HARTFORD

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CITY OF HARTFORD

COVER PAGE

1. NAME OF COMMITTEE Bronin for Hartford			
2. TREASURER NAME First Calixto		Last Torres	
3. TREASURER ADDRESS Street Address 6 Harwich St		City Hartford	State CT
4. ELECTION/REFERENDUM DATE (mm/dd/yyyy) 11/5/2019		Zip Code 06114	6. DISTRICT NUMBER (if applicable)
5. OFFICE SOUGHT (Complete only if Candidate Committee) Mayor			
7. CANDIDATE NAME (Complete only if Candidate or Exploratory Committee) First Luke		Last Bronin	
8. TYPE OF REPORT (Check One Box)			
<input type="radio"/> January 10 filing		<input type="radio"/> 7th day preceding referendum	
<input checked="" type="radio"/> April 10 filing		<input type="radio"/> 30 days following primary	
<input type="radio"/> July 10 filing		<input type="radio"/> 7th day preceding election	
<input type="radio"/> October 10 filing		<input type="radio"/> 12th day preceding election (State Central Committees Only)	
<input type="radio"/> 24 Hour Independent Expenditure <input type="radio"/> Primary <input type="radio"/> Election		<input type="radio"/> 45 days following election not held in November	
<input type="radio"/> Initial Contribution or Disbursement (PACs ONLY)		<input type="radio"/> Amendment to Type of Report: _____	
9. PERIOD COVERED			
Beginning Date 01/18/2019		Ending Date thru 3/31/2019	
10. CERTIFICATION			
I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete.			
Treasurer or Deputy Treasurer (Signature) 		PRINT NAME OF SIGNER Calixto Torres	
Treasurer or Deputy Treasurer (Signature)		DATE (mm/dd/yyyy) 04/10/2019	
A person who is found to have knowingly and willfully violated any provisions of the campaign finance statutes faces a civil penalty or imprisonment or both.			

SEEC FORM 20

Itemized Campaign Finance Disclosure Statement
 CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
 Revised January 2015

SUMMARY PAGE TOTALS

April 10 filing		COLUMN A This Period	COLUMN B Aggregate
Bronin for Mayor			
11. Balance on hand January 1 of current year for Ongoing and Party Committees OR Balance on hand from day Committee was formed for all other committees		\$0.00	\$0.00
12. Balance on hand at the beginning of Reporting Period			
13. Contributions received from Individuals (Section A and B)		\$504,861.00	\$504,861.00
14. Receipts from Other Committees (Sections C1 and C2)		\$1,300.00	\$1,300.00
15. Other Monetary Receipts (Sections D through K)		\$1,000.00	\$1,000.00
16a. Total Proceeds from Small Purchases (Section L1 Subpart 1 + Subpart 3)		\$0.00	\$0.00
16c. Total Purchases of Advertising - Program Book or Sign (Section L3)		\$2,500.00	\$2,500.00
17. Total Monetary Receipts (add totals for lines 13-16c)		\$509,661.00	\$509,661.00
18. Subtotals (add totals in Line 12 + 17 in Column A; and in Line 11 + 17 in Column B)		\$509,661.00	\$509,661.00
19. Expenditures Paid by Committee (Section P)		\$65,808.41	\$65,808.41
20. Balance on hand at close of Reporting Period (Subtract Line 19 from Line 18 in both Columns)		\$443,852.59	\$443,852.59
21. In-Kind Donations not Considered Contributions Received (Section L4)		\$0.00	\$0.00
22. In-Kind Donations not Considered Contributions -- House Party (Section L5)		\$0.00	\$0.00
23. In-kind Contributions Received (Section M)		\$647.06	\$647.06
24. Refundable Deposit to Telephone Company (Section N)		\$0.00	\$0.00
25. Loan Balance		\$0.00	\$0.00
25a. + Loans Received (Section D)		\$0.00	\$0.00
25b. + Interest and Penalties on Loan		\$0.00	\$0.00
25c. - Payments on Loan		\$0.00	\$0.00
25d. Total Outstanding Loan Amount		\$0.00	\$0.00
26. Campaign Expenses Paid by Candidate (Section Q)		\$0.00	\$0.00
27. Expenses Incurred on Committee Credit Card (Section R)		\$0.00	\$0.00
28. Expenses Incurred by Committee During this Period but Not Paid (Section S)		\$0.00	\$0.00
28a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section S)		\$0.00	\$0.00

I. MONETARY RECEIPTS (Sections A-K)

Bronin for Mayor		April 10 filing		\$0.00
Method of contribution:				
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
Last Name: Abrams M.I.				
Residential Street Address: 32 Hillsboro Dr, West Hartford		City: West Hartford	State: CT	Zip Code: 06107-1011
Principal Occupation: restaurateur				
Name of Employer: Max Downtown				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution \$100.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?		Amount of Contribution \$350.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
Date Received: 02/01/2019				
Aggregate contributions: \$350.00				
Last Name: Abrams M.I.				
Residential Street Address: 32 Hillsboro Dr, West Hartford		City: West Hartford	State: CT	Zip Code: 06107-1011
Principal Occupation: restaurateur				
Name of Employer: Max Downtown				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution \$250.00
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?		Amount of Contribution \$350.00
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
Date Received: 03/26/2019				
Aggregate contributions: \$350.00				
Last Name: Acker M.I.				
Residential Street Address: 2 Manor Dr		City: Goldens Bridge	State: NY	Zip Code: 10526-1204
Principal Occupation: Physician				
Name of Employer: Welmed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution \$100.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?		Amount of Contribution \$300.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
Date Received: 02/04/2019				
Aggregate contributions: \$300.00				

SECTION B - This Page		\$450.00
TOTAL OF SECTION B Page		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (SECTION A, B)		\$504,861.00
<i>(Enter total on Line 13, Column A of Summary Page)</i>		

April 10 filing										\$0.00
SECTION B - CONTRIBUTOR INFORMATION										
Bronin for Mayor										
A. Total Contributions from Each Contributor Reported on Form ONLY										
See Instructions for Reporting Donor Information										
SECTION C - CONTRIBUTOR INFORMATION										
Contributor 1										
Last Name Acker		First Peter		City Goldens Bridge		State NY		Zip Code 10526-1204		M.I.
Residential Street Address 2 Manor Dr		Name of Employer Wetmed								
Principal Occupation Physician		Amount of Contribution \$100.00								
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative Aggregate contributions \$300.00								
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 03/28/2019		Aggregate contributions \$300.00						
Last Name Acker		First Peter		City Goldens Bridge		State NY		Zip Code 10526-1204		M.I.
Residential Street Address 2 Manor Dr		Name of Employer Wetmed								
Principal Occupation Physician		Amount of Contribution \$100.00								
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative Aggregate contributions \$300.00								
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 03/31/2019		Aggregate contributions \$300.00						
Last Name Adamenko		First Robert		City West Hartford		State CT		Zip Code 06107-3056		M.I.
Residential Street Address 108 Westland Ave		Name of Employer ProHealth Physicians								
Principal Occupation Physician		Amount of Contribution \$200.00								
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No								
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative Aggregate contributions \$200.00								
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 03/25/2019		Aggregate contributions \$200.00						
SECTION D - SUMMARY										
SUBTOTAL Section B - This Page										\$400.00
TOTAL of Section B Pages										\$504,861.00
TOTAL of ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)										\$504,861.00
<i>(Enter total on Line 13, Column A of Summary Page)</i>										

<p>Bronin for Mayor</p> <p>April 10 filing</p> <p style="text-align: right;">\$0.00</p>	
<p>Adams</p> <p>Residential Street Address 160 Morgan Ave</p> <p>City East Haven</p> <p>State CT</p> <p>Zip Code 06512-4519</p> <p>Principal Occupation Executive</p> <p>Name of Employer NextWaveBio</p> <p>First Daniel</p> <p>M.I.</p>	
<p>Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative</p>
<p>Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order</p>	<p>Date Received 02/15/2019</p> <p>Aggregate contributions \$1,000.00</p>
<p>Amount of Contribution \$500.00</p>	
<p>Adams</p> <p>Residential Street Address 160 Morgan Ave</p> <p>City East Haven</p> <p>State CT</p> <p>Zip Code 06512-4519</p> <p>Principal Occupation Executive</p> <p>Name of Employer NextWaveBio</p> <p>First Daniel</p> <p>M.I.</p>	
<p>Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative</p>
<p>Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order</p>	<p>Date Received 02/27/2019</p> <p>Aggregate contributions \$1,000.00</p>
<p>Amount of Contribution \$500.00</p>	
<p>Adams</p> <p>Residential Street Address 234 King Philip Dr</p> <p>City West Hartford</p> <p>State CT</p> <p>Zip Code 06117-1408</p> <p>Principal Occupation Revenue integrity analyst</p> <p>Name of Employer Hartford healthcare</p> <p>First Leslie</p> <p>M.I.</p>	
<p>Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative</p>
<p>Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order</p>	<p>Date Received 03/31/2019</p> <p>Aggregate contributions \$5.00</p>
<p>Amount of Contribution \$5.00</p>	

<p>SUBTOTAL Section B - This Page</p> <p style="text-align: right;">\$1,005.00</p>	
<p>TOTAL OF SECTION B Pages</p> <p style="text-align: right;">\$504,861.00</p>	
<p>TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)</p> <p style="text-align: right;">\$504,861.00</p> <p><i>(Enter total on Line 15, Column A of Summary Page)</i></p>	

TYPE OF REPORT									
April 10 filing									
A. Total Cash Received From Small Contributors Received After Period ONLY (See instructions for definition of Small Contributor)									
\$0.00									
B. Monetary Receipts From Individuals (See instructions)									
1. Bronin for Mayor									
Last Name Adams First Robert M.I.									
Residential Street Address 598 Center St City Manchester State CT Zip Code 06040-3920									
Principal Occupation Architect Name of Employer Amentia Emma									
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
Is contributor a principal of a state contractor or prospective state contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative									
Is this contribution associated with an event reported in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
If yes, list Event # 032619a									
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order									
Date Received 03/26/2019 Aggregate contributions \$1,000.00									
Amount of Contribution \$1,000.00									
2. Adil									
Last Name Adil First Andrew M.I.									
Residential Street Address 944 Ridge Rd City Wethersfield State CT Zip Code 06109-2855									
Principal Occupation Financial Advisor Name of Employer Coburn & Meredith, Inc									
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
Is contributor a principal of a state contractor or prospective state contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative									
Is this contribution associated with an event reported in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No									
If yes, list Event # 032719b									
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order									
Date Received 03/08/2019 Aggregate contributions \$100.00									
Amount of Contribution \$100.00									
3. Aggarwal									
Last Name Aggarwal First Corney M.I.									
Residential Street Address 50 Cat Rock Rd City Cos Cob State CT Zip Code 06807-1705									
Principal Occupation Homemaker Name of Employer Homemaker									
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
Is contributor a principal of a state contractor or prospective state contractor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative									
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
If yes, list Event #									
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order									
Date Received 03/31/2019 Aggregate contributions \$200.00									
Amount of Contribution \$200.00									

SUBTOTAL Section B - This Page		\$1,300.00
TOTAL of Section B Page		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)		\$504,861.00
(Enter total on Line 13, Column A of Summary Page)		

BRONIN FOR MAYOR
 April 10 filing
 \$0.00

Bronin for Mayor
 Last Name: **Allen** First: **Laurence** M.I.
 Residential Street Address: **43 Maple Ave, Unit 3** City: **Greenwich** State: **CT** Zip Code: **06830-5645**

Principal Occupation: **Private equity** Name of Employer: **NYPPEX Holdings LLC**
 Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes No
 If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No
 Is contributor a principal of a state contractor or prospective state contractor? Yes No
 If yes, indicate which branch or branches of government the contract is with: Executive Legislative
 Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order
 Date Received: **03/08/2019** Aggregate contributions: **\$1,000.00**

Last Name: **Alleynne** First: **Julie** M.I.
 Residential Street Address: **156 S Main St** City: **West Hartford** State: **CT** Zip Code: **06107-3454**

Principal Occupation: **CEO / Business Owner** Name of Employer: **Deposit Group LLC - self employed**
 Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes No
 If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No
 Is contributor a principal of a state contractor or prospective state contractor? Yes No
 If yes, indicate which branch or branches of government the contract is with: Executive Legislative
 Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order
 Date Received: **03/28/2019** Aggregate contributions: **\$500.00**

Last Name: **Alleynne** First: **Kenneth** M.I.
 Residential Street Address: **837 Prospect Ave, Hartford** City: **West Hartford** State: **CT** Zip Code: **06105-4229**

Principal Occupation: **Physician** Name of Employer: **EOSM**
 Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes No
 If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No
 Is contributor a principal of a state contractor or prospective state contractor? Yes No
 If yes, indicate which branch or branches of government the contract is with: Executive Legislative
 Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order
 Date Received: **03/31/2019** Aggregate contributions: **\$500.00**

SUBTOTAL Section B - This Page		\$2,000.00
TOTAL of Section B Pages		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)		\$504,861.00

(Enter total on Line 53, Exhibit A of Statement Page)

I. MONETARY RECEIPTS (Sections A-K)

NAME OF CONTRIBUTOR		DATE OF RECEIPT	
Bronin for Mayor		April 10 filing	
A. Total Contributions from Small Contributors Received for Period ONLY (One contribution for a lobbyist, spouse, or dependent child of a lobbyist)			
		\$0.00	
B. Received Contributions from Individuals			
Last Name	First	M.I.	
Alter	Peter		
Residential Street Address	City	State	Zip Code
1 Park Pl	South Glastonbury	CT	06073-2112
Principal Occupation	Name of Employer		
Attorney	Self		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event # 032619a		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received Aggregate contributions 03/26/2019 \$500.00	
Amount of Contribution \$500.00			
M.I.			
Last Name	First		
Altschuler	Zachary		
Residential Street Address	City	State	Zip Code
12207 Heather Way, Herndon	Herndon	VA	20170-2436
Principal Occupation	Name of Employer		
Info Gov Operations Specialist	Cooley LLP		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event #		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received Aggregate contributions 03/31/2019 \$1.00	
Amount of Contribution \$1.00			
M.I.			
Last Name	First		
Amenta	Anthony		
Residential Street Address	City	State	Zip Code
320 N Steele Rd	West Hartford	CT	06117-2231
Principal Occupation	Name of Employer		
Architect	Amenta Emma Architects		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event #		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received Aggregate contributions 03/25/2019 \$1,000.00	
Amount of Contribution \$1,000.00			

SUBTOTAL Section B - This Page	\$1,501.00
TOTAL of Section B Pages	\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Section A + B) <i>(Enter total on Line 13, Column A of Summary Page)</i>	\$504,861.00

DATE OF RECEIPT
April 10 filing

TYPE OF RECEIPT
A. Total Cash Received From Small Contributors Received this Period ONLY
B. Itemized Contributions From Individuals

Amount of Contribution
\$0.00

Contributor Information

Last Name
Anand

First
Alok

M.I.

Residential Street Address
13 Farnham Way

City
Farmington

State
CT

Zip Code
06032-1564

Principal Occupation
Physician

Name of Employer
Alok A Anand

Is contributor a lobbyist, spouse, or dependent child of a lobbyist?
 Yes
 No

Is this contribution associated with an event reported in Section L1?
 Yes
 No

If yes, list Event #

Method of contribution:
 Cash
 Personal Check
 Credit/Debit Card
 Payroll Deduction
 Money Order

Date Received
03/17/2019

Aggregate contributions
\$500.00

Amount of Contribution
\$500.00

Is contributor a principal of a state contractor or prospective state contractor?
 Yes
 No

If yes, indicate which branch or branches of government the contract is with:
 Executive
 Legislative

Last Name
Anderson McGrath

First
Laura

M.I.

Residential Street Address
8 Allen Oneill Dr

City
Darien

State
CT

Zip Code
06820-4205

Principal Occupation
PR

Name of Employer
ICR

Is contributor a lobbyist, spouse, or dependent child of a lobbyist?
 Yes
 No

Is this contribution associated with an event reported in Section L1?
 Yes
 No

If yes, list Event #

Method of contribution:
 Cash
 Personal Check
 Credit/Debit Card
 Payroll Deduction
 Money Order

Date Received
03/27/2019

Aggregate contributions
\$1,000.00

Amount of Contribution
\$1,000.00

Is contributor a principal of a state contractor or prospective state contractor?
 Yes
 No

If yes, indicate which branch or branches of government the contract is with:
 Executive
 Legislative

Last Name
Anderson

First
Charles

M.I.

Residential Street Address
1304 F St NE, Unit 1

City
Washington

State
DC

Zip Code
20002-5662

Principal Occupation
Senior Advisor

Name of Employer
United States Senate

Is contributor a lobbyist, spouse, or dependent child of a lobbyist?
 Yes
 No

Is this contribution associated with an event reported in Section L1?
 Yes
 No

If yes, list Event #

Method of contribution:
 Cash
 Personal Check
 Credit/Debit Card
 Payroll Deduction
 Money Order

Date Received
02/21/2019

Aggregate contributions
\$500.00

Amount of Contribution
\$500.00

Is contributor a principal of a state contractor or prospective state contractor?
 Yes
 No

If yes, indicate which branch or branches of government the contract is with:
 Executive
 Legislative

SUBTOTAL Section B - This Page	\$2,000.00
TOTAL of Section B Pages	\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 15, Column A of Summary Page)</i>	\$504,861.00

NAME OF CONTRIBUTOR		DATE RECEIVED		AMOUNT OF CONTRIBUTION	
Bronin for Mayor		April 10 filing		\$0.00	
Section A: Individual Contributions					
<p>Antell Last Name: Elizabeth First Name: Elizabeth M.I.: Residential Street Address: 133 Parsonage Rd City: Greenwich State: CT Zip Code: 06830-3937 Principal Occupation: homemaker Name of Employer: homemaker</p>					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	Date Received: 03/28/2019	Aggregate contributions: \$1,000.00	Amount of Contribution: \$1,000.00
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
<p>Arakas Last Name: Peter First Name: Peter M.I.: Residential Street Address: 3A Farmington Chase Cres City: Farmington State: CT Zip Code: 06032-3132 Principal Occupation: Attorney Name of Employer: retired</p>					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	Date Received: 03/30/2019	Aggregate contributions: \$150.00	Amount of Contribution: \$150.00
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
<p>Arcata Last Name: Jay First Name: Jay M.I.: Residential Street Address: 20 Richmond Ln City: West Hartford State: CT Zip Code: 06117-1628 Principal Occupation: Attorney Name of Employer: BX3 Capital</p>					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	Date Received: 02/22/2019	Aggregate contributions: \$100.00	Amount of Contribution: \$100.00
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
<p>TOTALS</p>					
SUBTOTAL Section B - This Page				\$1,250.00	
TOTAL OF SECTION B PAGES				\$504,861.00	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)				\$504,861.00	

(Enter total on Line 13, Column A of Summary Page)

I. MONETARY RECEIPTS (Sections A-K)

TYPE OF REPORT	
April 10 filing	
Amount of Contribution	
\$0.00	

A. Total Cash Subsidy from Non-Fiduciary Contributions - Limited Use Period ONLY
(Do not include for Election of Special Candidate)

Subsidy Source	
B. Personal Contributions from Individuals	
Last Name Arquit	M.I. M.I.
Residential Street Address 32 High St	City Rye
State NY	Zip Code 10580-1631
Principal Occupation Attorney	
Name of Employer Kasowitz benson torres	

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	
Date Received 03/23/2019	
Aggregate contributions \$1,000.00	
Amount of Contribution	
\$1,000.00	

Last Name Ashman	M.I. M.I.
Residential Street Address 143 Enfield St, Apt B2	City Hartford
State CT	Zip Code 06112-6905
Principal Occupation N/a	
Name of Employer N/a	

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative
Method of contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	
Date Received 02/16/2019	
Aggregate contributions \$5.00	
Amount of Contribution	
\$5.00	

Last Name Asness	M.I. M.I.
Residential Street Address 9 Pier Way Lndg	City Westport
State CT	Zip Code 06880-6424
Principal Occupation Retired	
Name of Employer Homemaker	

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	
Date Received 01/26/2019	
Aggregate contributions \$500.00	
Amount of Contribution	
\$500.00	

SUBTOTAL Section B - This Page	\$1,505.00
TOTAL of Section B Pages	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)	\$504,861.00
<i>(Enter total on Line 12, Column A of Summary Page)</i>	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)	\$504,861.00

I. MONETARY RECEIPTS (Sections A-K)

NAME OF CONTRIBUTOR (Print Name and Suffix)		DATE RECEIVED		AMOUNT OF CONTRIBUTION																																																																																																																																																																																					
Bronin for Mayor		April 10 filing		\$0.00																																																																																																																																																																																					
A. Total Contributions from Small Contributors (Received this Period ONLY) <i>(Contributions from individuals valued at \$5,000 or less)</i>																																																																																																																																																																																									
B. Recycled Contributions from Individuals																																																																																																																																																																																									
<table border="1"> <tr> <td colspan="2">Last Name</td> <td>First</td> <td colspan="2">M.I.</td> <td></td> </tr> <tr> <td colspan="2">Assmus</td> <td>Phillip</td> <td colspan="2"></td> <td></td> </tr> <tr> <td colspan="2">Residential Street Address</td> <td>City</td> <td>State</td> <td>Zip Code</td> <td></td> </tr> <tr> <td colspan="2">4435 Garrison St NW</td> <td>Washington</td> <td>DC</td> <td>20016-4055</td> <td></td> </tr> <tr> <td colspan="2">Principal Occupation</td> <td colspan="2">Name of Employer</td> <td></td> <td></td> </tr> <tr> <td colspan="2">Attorney</td> <td colspan="2">NACAA</td> <td></td> <td></td> </tr> <tr> <td colspan="2"> Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </td> <td colspan="2"> If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </td> <td colspan="2">Amount of Contribution</td> </tr> <tr> <td colspan="2"> Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No </td> <td colspan="2"> Is contributor a principal of a state contractor or prospective state contractor? 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Assmus		Phillip				Residential Street Address		City	State	Zip Code		4435 Garrison St NW		Washington	DC	20016-4055		Principal Occupation		Name of Employer				Attorney		NACAA				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution		Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		\$200.00		Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received	Aggregate contributions					03/19/2019	\$200.00			Last Name		First	M.I.			Austin		Phillip			E	Residential Street Address		City	State	Zip Code		25 Cassandra Blvd		West Hartford	CT	06107-3144		Principal Occupation		Name of Employer				Retired President		UConn				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution		Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? 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Avallone		Adam				Residential Street Address		City	State	Zip Code		480 S Quaker Ln		West Hartford	CT	06110-1021		Principal Occupation		Name of Employer				Attorney		Hinckley Allen Snyder				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution		Is this contribution associated with an event reported in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? 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		03/25/2019	\$50.00																																																																																																																																																																																						

SUBTOTAL Section B - This Page		\$400.00
TOTAL OF SECTION B PAGE		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)		\$504,861.00

(Enter total on Line 13, Column A of Summary Page)

NAME OF PAYOR (Print Name of Person or Organization)		DATE OF RECEIPT		AMOUNT OF CONTRIBUTION
Bronin for Mayor		April 10 filing		
A. Total Cash Received from Named Contributors - Received this Period ONLY (See instructions for definition of Named Contributor)				
B. Total Contributions from Individuals				
Last Name Avallone		First Julianne	M.I.	
Residential Street Address 137 Girard Ave, Hartford		City Hartford	State CT	Zip Code 06105-2232
Principal Occupation Attorney		Name of Employer State Department of Consumer Protection		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution \$50.00
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?		
		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution:		Date Received 03/29/2019	Aggregate contributions \$50.00	
<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check	<input checked="" type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order
Last Name Bader		First Cheryl	M.I.	
Residential Street Address 243 Jonathan Dr		City Stamford	State CT	Zip Code 06903-1510
Principal Occupation teacher		Name of Employer fordham university		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution \$1,000.00
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?		
		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution:		Date Received 03/27/2019	Aggregate contributions \$1,000.00	
<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check	<input checked="" type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order
Last Name Bailey		First Brian	M.I.	
Residential Street Address 5 Top Sail Rd		City Norwalk	State CT	Zip Code 06853-1518
Principal Occupation FinTech		Name of Employer Credit Suisse		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution \$250.00
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?		
		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution:		Date Received 03/06/2019	Aggregate contributions \$250.00	
<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check	<input checked="" type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order

SUBTOTAL Section B - This Page		\$1,300.00
TOTAL of Section B Pages		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 15, Column A of Summary Page)		\$504,861.00

NAME OF CONTRIBUTOR (Print Name and Address)		Date of Receipt		Amount of Contribution																																																																																																																																																																																																																																					
Bronin for Mayor		April 10 filing		\$0.00																																																																																																																																																																																																																																					
A. Cash Contributions Received from Fund ONLY (Section A-1)																																																																																																																																																																																																																																									
B. Receipts from Non-Fund Sources (Section A-2)																																																																																																																																																																																																																																									
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vertical-align: bottom;">\$20.00</td> </tr> <tr> <td colspan="2">Is this contribution associated with an event reported in Section L1?</td> <td colspan="2">Is contributor a principal of a state contractor or prospective state contractor?</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> <td colspan="2">If yes, indicate which branch or branches of government the contract is with:</td> <td colspan="2"></td> </tr> <tr> <td colspan="2">If yes, list Event #</td> <td colspan="2"><input type="checkbox"/> Executive <input type="checkbox"/> Legislative</td> <td colspan="2"></td> </tr> <tr> <td colspan="2">Method of contribution:</td> <td>Date Received</td> <td colspan="2">Aggregate contributions</td> <td></td> </tr> <tr> <td colspan="2"><input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order</td> <td>03/31/2019</td> <td colspan="2">\$20.00</td> <td></td> </tr> <tr> <td colspan="2">Last Name</td> <td colspan="2">First</td> <td colspan="2">M.I.</td> </tr> <tr> <td colspan="2">Bairst</td> <td colspan="2">Jane</td> <td colspan="2"></td> </tr> <tr> <td colspan="2">Residential Street Address</td> <td>City</td> <td>State</td> <td>Zip Code</td> <td></td> </tr> <tr> <td colspan="2">365 Saybrook Rd</td> <td>Higganum</td> <td>CT</td> <td>06441-4110</td> <td></td> </tr> <tr> <td colspan="2">Principal Occupation</td> <td colspan="4">Name of Employer</td> </tr> <tr> <td colspan="2">Senior Director of External Relations</td> <td colspan="4">Connecticut Children's Medical Center</td> </tr> <tr> <td colspan="2">Is contributor a lobbyist, spouse, or dependent child of a lobbyist?</td> <td colspan="2">If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?</td> <td colspan="2">Amount of Contribution</td> </tr> <tr> <td colspan="2"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td> <td colspan="2"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> <td colspan="2" rowspan="2" style="text-align: right; 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Bairst		Ronald		L		Residential Street Address		City	State	Zip Code		215 Culver St		Newington	CT	06111-5114		Principal Occupation		Name of Employer				Social Services		State of Connecticut Department of Social Services				Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$20.00		Is this contribution associated with an event reported in Section L1?		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SUBTOTAL Section B - This Page		\$295.00
TOTAL OF SECTION B Pages		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A-1-5)		\$504,861.00
(Enter total on Line B, Column A of Summary Page)		

I. MONETARY RECEIPTS (Sections A-K)

NAME OF CONTRIBUTOR		DATE RECEIVED	
Bronin for Mayor		April 10 filing	
Amount of Contribution			
		\$0.00	

Last Name Baldock		First Jennifer		M.I.	
Residential Street Address 7 Witherell Dr		City Greenwich	State CT	Zip Code 06831-4416	
Principal Occupation Executive					

Name of Employer Roseton Industries, Inc.		Amount of Contribution \$500.00			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
If yes, list Event #		Aggregate contributions \$500.00			
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					
Date Received 02/01/2019					

Last Name Balducci		First Richard		M.I.	
Residential Street Address 245 River Rd		City Deep River	State CT	Zip Code 06417-2117	
Principal Occupation Lobbyist					

Name of Employer Doyle, D'Amore & Balducci		Amount of Contribution \$200.00			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is this contribution associated with an event reported in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
If yes, list Event # 032719b		Aggregate contributions \$200.00			
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					
Date Received 02/08/2019					

Last Name Baldwin		First Preston		M.I.	
Residential Street Address 166 W Putnam Ave		City Greenwich	State CT	Zip Code 06830-5241	
Principal Occupation Business executive					

Name of Employer Centerpoint360		Amount of Contribution \$250.00			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
If yes, list Event #		Aggregate contributions \$250.00			
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					
Date Received 03/31/2019					

SUBTOTAL Section B - This Page	\$950.00
TOTAL of Section B Pages	\$504,861.00
TOTAL of ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)	\$504,861.00

(Enter total on Line K3, Column A, of Summary Page)

NAME OF CONTRIBUTOR		DATE OF REPORT		AMOUNT OF CONTRIBUTION	
Bronin for Mayor		April 10 filing		\$0.00	
<i>(Total Contributions from Small Contributors Reported (see Part D))</i>					
<i>(Contributions for Attorney or Small Contributor)</i>					
SECTION B - CONTRIBUTOR INFORMATION					
Last Name Banas		First Thomas		M.I.	
Residential Street Address 170 Round Hill Rd		City Cheshire		Zip Code 06410-1639	
Principal Occupation Attorney		Name of Employer Hinckley Allen Snyder		State CT	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution \$100.00	
Is this contribution associated with an event reported in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Appropriate contributions \$100.00	
If yes, list Event # 032519b		Date Received 03/25/2019		Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	
Last Name Bank		First Justin		M.I.	
Residential Street Address 149 Kenyon St		City Hartford		Zip Code 06105-2237	
Principal Occupation Teacher/Theme Coach		Name of Employer CREC		State CT	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Amount of Contribution \$50.00	
Is this contribution associated with an event reported in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Appropriate contributions \$50.00	
If yes, list Event #		Date Received 03/31/2019		Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	
Last Name Barats		First Greg		M.I.	
Residential Street Address 38 Northington Dr		City Avon		Zip Code 06001-2356	
Principal Occupation Insurance		Name of Employer Hartford Steam Boiler, Inc		State CT	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution \$1,000.00	
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Appropriate contributions \$1,000.00	
If yes, list Event #		Date Received 03/31/2019		Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	

SUBTOTAL Section B - This Page		\$1,150.00
TOTAL of Section B Page		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B) <i>(Enter total on Line 13, Column A of Summary Page)</i>		\$504,861.00

I. MONETARY RECEIPTS (Sections A-K)

NAME OF CONTRIBUTOR		DATE OF RECEIPT		Amount of Contribution
Bronin for Mayor		April 10 filing		
A. Total Cash Payments from Small Contributors - Received but Not Paid ONLY (Do not include for a Director of Special Committee)				
Barbara				
Last Name	First	City	State	Zip Code
Barbara	Michael	New Haven	CT	06512-4306
Residential Street Address		M.I.		
75 Cove St				
Principal Occupation				
Real Estate Broker				
Name of Employer				
HUNTSMAN/MEADE				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?		\$100.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #		Date Received		Aggregate contributions
		03/27/2019		
Method of contribution:				
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
Last Name		First		M.I.
Barnes		Benjamin		
Residential Street Address				
28 Brightwood Ave				
City		State		Zip Code
Stratford		CT		06614-4110
Principal Occupation				
CFO				
Name of Employer		M.I.		
CSCU				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?		\$100.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #		Date Received		Aggregate contributions
		01/31/2019		
Method of contribution:				
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
Last Name		First		M.I.
Barnes		Thomas		
Residential Street Address				
1900 Perkins St				
City		State		Zip Code
Bristol		CT		06010-8924
Principal Occupation				
Chairman of the Board				
Name of Employer				
Barnes Group inc				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?		\$500.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #		Date Received		Aggregate contributions
		03/07/2019		
Method of contribution:				
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				

SUBTOTAL Section B - This Page	\$700.00
TOTAL OF SECTION B PAGES	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)	\$504,861.00
<i>(Enter total on Line 10, Column A of Summary Page)</i>	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)	\$504,861.00

I. MONETARY RECEIPTS (Sections A-K)

NAME OF COMMITTEE *(Required for all contributions)*
Bronin for Mayor
(If this is a contribution from a Small Contributor, Received this Period ONLY See Instructions For Details of Small Contributor)
APRIL 10 FILING
AMOUNT OF CONTRIBUTION
 \$0.00

Last Name **Barrepski** **First** **Chris** **M.I.**
Residential Street Address
 56 Depot St
City **Windsorville** **State** **CT** **Zip Code** **06016-9629**
Principal Occupation
 HVAC contractor

Name of Employer
 BNS Real Estate
 Is contributor a lobbyist, spouse, or dependent child of a lobbyist?
 Yes No
 Is this contribution associated with an event reported in Section L1?
 Yes No
 If yes, list Event #
 Method of contribution:
 Cash Personal Check Credit/Debit Card Payroll Deduction Money Order
 Date Received **03/05/2019** Aggregate contributions **\$500.00**
 Is contributor a principal of a state contractor or prospective state contractor?
 If yes, indicate which branch or branches of government the contract is with:
 Executive Legislative No
 Yes No
Amount of Contribution
 \$500.00

Last Name **Barrett** **First** **David** **M.I.**
Residential Street Address
 257 Oxford St
City **Hartford** **State** **CT** **Zip Code** **06105-2249**
Principal Occupation
 Communications

Name of Employer
 Retired
 Is contributor a lobbyist, spouse, or dependent child of a lobbyist?
 Yes No
 Is this contribution associated with an event reported in Section L1?
 Yes No
 If yes, list Event #
 Method of contribution:
 Cash Personal Check Credit/Debit Card Payroll Deduction Money Order
 Date Received **03/26/2019** Aggregate contributions **\$400.00**
 Is contributor a principal of a state contractor or prospective state contractor?
 If yes, indicate which branch or branches of government the contract is with:
 Executive Legislative No
 Yes No
Amount of Contribution
 \$400.00

Name of Employer
 Retired
 Is contributor a lobbyist, spouse, or dependent child of a lobbyist?
 Yes No
 Is this contribution associated with an event reported in Section L1?
 Yes No
 If yes, list Event #
 Method of contribution:
 Cash Personal Check Credit/Debit Card Payroll Deduction Money Order
 Date Received **03/31/2019** Aggregate contributions **\$100.00**
 Is contributor a principal of a state contractor or prospective state contractor?
 If yes, indicate which branch or branches of government the contract is with:
 Executive Legislative No
 Yes No
Amount of Contribution
 \$100.00

SUBTOTAL Section B - This Page		\$1,000.00
TOTAL OF SECTION B PAGES		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)		\$504,861.00

(Enter total on Line 22, Column A of Summary Page)

I. MONETARY RECEIPTS (Sections A-K)

NAME OF CONTRIBUTOR		DATE RECEIVED		AMOUNT OF CONTRIBUTION	
Bronin for Mayor		April 10 filing		\$0.00	
<i>A. Total Contributions from Small Contributors Received for Period ONLY</i>					
<i>See instructions for definition of Small Contributor</i>					
Contributor 1					
Last Name		First		M.I.	
BARTTELL		THOMAS			
Residential Street Address		City		State	
8 Wyndemere		Avon		CT	
Principal Occupation		Name of Employer		Zip Code	
Attorney		The Hartford Financial Services Group, Inc.		06001-3959	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		\$150.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
If yes, list Event #		Date Received		Aggregate contributions	
		02/21/2019		\$150.00	
Method of contribution:		Payroll Deduction <input type="checkbox"/> Money Order <input type="checkbox"/>			
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card					
Last Name		First		M.I.	
Bartschi		Kenneth			
Residential Street Address		City		State	
209 Beacon St		Hartford		CT	
Principal Occupation		Name of Employer		Zip Code	
Attorney		Horton, Dowd, Bartschi & Levesque, PC		06105-2927	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
If yes, list Event #		Date Received		Aggregate contributions	
		03/21/2019		\$100.00	
Method of contribution:		Payroll Deduction <input type="checkbox"/> Money Order <input type="checkbox"/>			
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card					
Last Name		First		M.I.	
Batchelor		Suzanne			
Residential Street Address		City		State	
29 Fawn Bk		West Hartford		CT	
Principal Occupation		Name of Employer		Zip Code	
Volunteer		Retired		06117-1032	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$1,000.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
If yes, list Event #		Date Received		Aggregate contributions	
		01/28/2019		\$1,000.00	
Method of contribution:		Payroll Deduction <input type="checkbox"/> Money Order <input type="checkbox"/>			
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card					

SUBTOTAL Section B - This Page		\$1,250.00
TOTAL of Section B Page		\$504,861.00
TOTAL of ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)		\$504,861.00
<i>(Enter total on Line 15, Column 1 of Summary Page)</i>		

NAME OF CONTRIBUTOR		TYPE OF RECEIPT		DATE RECEIVED	AMOUNT OF CONTRIBUTION
Bronin for Mayor				April 10 filing	\$0.00
<p><i>(Total Contributions From Small Contributors Reported Here Exceed ONLY \$500.00. See Instructions for Guidance of Small Contributors.)</i></p>					
Last Name		First		M.I.	
Bates		Scott			
Residential Street Address		City	State	Zip Code	
118 Water St		Stonington	CT	06378-1322	
Principal Occupation		Name of Employer			
Deputy Secretary of the State		State of Connecticut			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
If yes, list Event #					
Method of contribution:		Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		03/13/2019		\$100.00	
Last Name		First		M.I.	
Battista		Kelly			
Residential Street Address		City	State	Zip Code	
212 Maple Ave		Durham	CT	06422-1214	
Principal Occupation		Name of Employer			
Owner		A + S electrical services			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
If yes, list Event # 032619a					
Method of contribution:		Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		03/26/2019		\$500.00	
Last Name		First		M.I.	
Baukol		Andy			
Residential Street Address		City	State	Zip Code	
6712 Valley Brook Dr		Falls Church	VA	22042-4035	
Principal Occupation		Name of Employer			
bureaucrat		us treasury			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
If yes, list Event #					
Method of contribution:		Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		03/06/2019		\$500.00	
Last Name		First		M.I.	
Baukol		Andy			
Residential Street Address		City	State	Zip Code	
6712 Valley Brook Dr		Falls Church	VA	22042-4035	
Principal Occupation		Name of Employer			
bureaucrat		us treasury			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
If yes, list Event #					
Method of contribution:		Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		03/06/2019		\$500.00	

SUBTOTAL Section B - This Page		\$1,100.00
TOTAL OF SECTION B Pages		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A-F) (Enter total on Line 15, Column A of Summary Page)		\$504,861.00

TYPE OF RECEIPT	
April 10 filing	
\$0.00	

Bronin for Mayor

*A. Total Contributions from Small Contributors - Reported this Period ONLY
See instructions for definition of Small Contributor.*

Last Name Bayer		First Aaron	M.I.
Residential Street Address 215 Mountain Rd		City Glastonbury	State CT
Principal Occupation Attorney		Zip Code 06033-1512	
Name of Employer Wiggin and Dana, LLP			

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount of Contribution \$200.00
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
If yes, list Event #		
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Aggregate contributions \$200.00

Last Name Bayne		First David	M.I.
Residential Street Address 5 Windsor Rd, Darien		City Darien	State CT
Principal Occupation Attorney		Zip Code 06820-3228	
Name of Employer Akerman LLP			

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount of Contribution \$100.00
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
If yes, list Event #		
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Aggregate contributions \$100.00

Last Name BAZZANO		First DANIELLE	M.I.
Residential Street Address 1414 Asylum Ave		City Hartford	State CT
Principal Occupation EDUCATOR		Zip Code 06105-2207	
Name of Employer HARTFORD BOE			

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount of Contribution \$50.00
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
If yes, list Event #		
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Aggregate contributions \$50.00

SUBTOTAL Section B - This Page	\$350.00
TOTAL of Section B Pages	\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS Sections A - F	\$504,861.00

(Enter total on Line 13, Column A of Summary Page)

I. MONETARY RECEIPTS (Sections A-K)

NAME OF COMMITTEE <i>Political Party, Political Committee, or Other Entity</i>		April 10 filing	
A. Total Contributions From Small Contributors Received in the Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$0.00	
B. Interest Contributions From Individuals			

Last Name BAZZANO		First SUSAN	M.I.
Residential Street Address 1414 Asylum Ave		City Hartford	Zip Code 06105-2207
Principal Occupation EDUCATOR		Name of Employer HARTFORD BOE	

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate, committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount of Contribution \$100.00
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Aggregate contributions \$100.00

Last Name Beakey		First Brien	M.I.
Residential Street Address 29 Pioneer Dr		City AVON	Zip Code 06001-2201
Principal Occupation No		Name of Employer No	

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate, committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Amount of Contribution \$500.00
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Aggregate contributions \$500.00

Last Name Beaty		First Anne	M.I.
Residential Street Address 33 Perryridge Rd		City Greenwich	Zip Code 06830-4607
Principal Occupation Retired		Name of Employer Retired	

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate, committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount of Contribution \$500.00
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Aggregate contributions \$500.00

SUBTOTAL Section B - This Page	\$1,100.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)	\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)	\$504,861.00

I. MONETARY RECEIPTS (Sections A-K)

BRONX COUNTY COMMISSIONERS
Office of the County Clerk
April 10 filing
\$0.00

Bronin for Mayor

Last Name: **Benaim** First: **Daniel** M.I.:
Residential Street Address: **1 Astor Pl** City: **New York** State: **NY** Zip Code: **10003-6930**
Principal Occupation: **Visiting Professor** Name of Employer: **NYU**

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes No
If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No
Is this contribution associated with an event reported in Section L1? Yes No
If yes, list Event # _____
Is contributor a principal of a state contractor or prospective state contractor? Yes No
If yes, indicate which branch or branches of government the contract is with: Executive Legislative
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order Date Received: **03/07/2019** Aggregate contributions: **\$150.00**
Amount of Contribution: **\$100.00**

Last Name: **Benet** First: **Jay** M.I.: **S**
Residential Street Address: **22 Emily Way** City: **West Hartford** State: **CT** Zip Code: **06107-3138**
Principal Occupation: **Insurance Executive** Name of Employer: **Travelers**

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes No
If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No
Is this contribution associated with an event reported in Section L1? Yes No
If yes, list Event # _____
Is contributor a principal of a state contractor or prospective state contractor? Yes No
If yes, indicate which branch or branches of government the contract is with: Executive Legislative
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order Date Received: **03/07/2019** Aggregate contributions: **\$1,000.00**
Amount of Contribution: **\$1,000.00**

Last Name: **Bengston** First: **Diane** M.I.:
Residential Street Address: **335 Whitewood Dr** City: **Rocky Hill** State: **CT** Zip Code: **06067-4246**
Principal Occupation: **Chrd** Name of Employer: **Travelers**

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes No
If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No
Is this contribution associated with an event reported in Section L1? Yes No
If yes, list Event # _____
Is contributor a principal of a state contractor or prospective state contractor? Yes No
If yes, indicate which branch or branches of government the contract is with: Executive Legislative
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order Date Received: **03/15/2019** Aggregate contributions: **\$500.00**
Amount of Contribution: **\$500.00**

SUBTOTAL Section B - This Page		\$1,600.00
TOTAL of Section B Pages		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page)</i>		\$504,861.00

NAME OF CONTRIBUTOR		DATE OF RECEIPT		AMOUNT OF CONTRIBUTION																																																																																																																																																																																																																																																	
Bronin for Mayor		April 10 filing		\$0.00																																																																																																																																																																																																																																																	
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Section B: Total Monetary Receipts from Other Sources																																																																																																																																																																																																																																																					
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Bergenn		James				Residential Street Address		City	State	Zip Code		50 Castlewood Rd, Columbia		West Hartford	CT	06107-2903		Principal Occupation		Name of Employer				Attorney		Shipman and goodwin llp				Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is this contribution associated with an event reported in Section LI?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? 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Berger		Bethany				Residential Street Address		City	State	Zip Code		85 Fern St		Hartford	CT	06105-2216		Principal Occupation		Name of Employer				professor		University of Connecticut				Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is this contribution associated with an event reported in Section LI?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? 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SUBTOTAL Section B - This Page		\$1,350.00
TOTAL of Section B Page		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - E)		\$504,861.00

(Enter total on Line 12, Column A of Summary Page)

TYPE OF RECEIPT		DATE OF RECEIPT		AMOUNT
Bronin for Mayor		April 10 filing		\$0.00
A. Total Cash, Business, Free-Sale Contributions Received (See Form 2015)				
B. Payroll Contributions from Individuals				
Last Name	First	M.I.		
Berlanti	Greg			
Residential Street Address	City	State	Zip Code	
9100 Wishire Blvd, Ste 1000W	Beverly Hills	CA	90212-3463	
Principal Occupation	Name of Employer			
Writer, Producer, Director	Berlanti Productions			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution \$1,000.00
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:		
If yes, list Event #		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution:	Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	01/31/2019		\$1,000.00	
Last Name	First	M.I.		
Berman	John			
Residential Street Address	City	State	Zip Code	
293 Oxford St	Hartford	CT	06105-2249	
Principal Occupation	Name of Employer			
Partner	Berman, Bours, Aaron & Dembo			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution \$200.00
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:		
If yes, list Event #		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution:	Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	03/12/2019		\$200.00	
Last Name	First	M.I.		
Bermudez	Efrain			
Residential Street Address	City	State	Zip Code	
161 Adelaide St	Hartford	CT	06114-1875	
Principal Occupation	Name of Employer			
Warehouse	Information Requested			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution \$5.00
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:		
If yes, list Event #		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution:	Date Received		Aggregate contributions	
<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	03/31/2019		\$5.00	

SUBTOTAL Section B - This Page	\$1,205.00
TOTAL of Section B Pages	\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)	\$504,861.00

(Enter total on Line 23, Column A of Summary Page)

NAME OF CONTRIBUTOR		TYPE OF REPORT		DATE RECEIVED		AMOUNT OF CONTRIBUTION	
Bronin for Mayor		April 10 filing				\$0.00	
<p><i>Contribution from Small Contributor Received by Paid (Only)</i> <i>Contribution by Attorney/Small Contributor</i></p>							
Last Name		First		M.I.			
Bermudez		Pedro					
Residential Street Address		City		State		Zip Code	
233 Pearl St, Ste 16		Hartford		CT		06103-2100	
Principal Occupation		Name of Employer					
Filmmaker		Revisionist					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution	
Is this contribution associated with an event reported in Section L1?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		\$100.00	
If yes, list Event #				Date Received		Aggregate contributions	
				03/25/2019		\$100.00	
Method of contribution:		<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					
Last Name		First		M.I.			
Bernhardt		William					
Residential Street Address		City		State		Zip Code	
116 Oscaleta Rd		Ridgefield		CT		06877-3644	
Principal Occupation		Name of Employer					
Contractor		Heritage Systems					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution	
Is this contribution associated with an event reported in Section L1?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		\$500.00	
If yes, list Event #				Date Received		Aggregate contributions	
				03/26/2019		\$500.00	
Method of contribution:		<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					
Last Name		First		M.I.			
Bermstein		Nancy					
Residential Street Address		City		State		Zip Code	
5 Seminole Way		Bloomfield		CT		06002-2387	
Principal Occupation		Name of Employer					
Health care management		Women's Health USA					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution	
Is this contribution associated with an event reported in Section L1?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		\$300.00	
If yes, list Event #				Date Received		Aggregate contributions	
				03/12/2019		\$300.00	
Method of contribution:		<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					

SUBTOTAL Section B - This Page	\$900.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A-VI)	\$504,861.00
(Enter total on Line 15, Column A of Summary Page)	\$504,861.00

SECTION A		SECTION B		SECTION C		SECTION D	
Name of Candidate		Name of Employer		Name of Employer		Name of Employer	
Bronin for Mayor		April 10 filing				\$0.00	
A. Total Contributions From Non-Candidate Related to Fund Only							
B. Political Contributions							
Last Name		First		M.I.			
Bertram		Bernard		S			
Residential Street Address		City		State		Zip Code	
1542 54th St		Brooklyn		NY		11219-4344	
Principal Occupation		Name of Employer					
Real Estate		Shelbourne Global Solutions					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Aggregate contributions		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$1,000.00		\$1,000.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?		Aggregate contributions			
If yes, list Event # 032619a		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		\$1,000.00			
Method of contribution:		Date Received		Aggregate contributions			
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		03/26/2019		\$1,000.00			
Last Name		First		M.I.			
Bertram		Leah					
Residential Street Address		City		State		Zip Code	
1542 54th St		Brooklyn		NY		11219-4344	
Principal Occupation		Name of Employer					
Homemaker		Homemaker					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Aggregate contributions		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$1,000.00		\$1,000.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?		Aggregate contributions			
If yes, list Event # 032619a		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		\$1,000.00			
Method of contribution:		Date Received		Aggregate contributions			
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		03/26/2019		\$1,000.00			
Last Name		First		M.I.			
Besette		Andy					
Residential Street Address		City		State		Zip Code	
85 Memorial Rd, 506		West Hartford		CT		06107-2440	
Principal Occupation		Name of Employer					
Executive		Travelers Companies Inc.					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Aggregate contributions		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		\$1,000.00		\$1,000.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?		Aggregate contributions			
If yes, list Event #		If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		\$1,000.00			
Method of contribution:		Date Received		Aggregate contributions			
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		02/04/2019		\$1,000.00			

SUBTOTAL Section B - This Page		\$3,000.00
TOTAL of Section B Page		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Section A + B)		\$504,861.00

(Enter total on Line 15, Column A of Summary Page)

Bronin for Mayor		April 10 filing	\$0.00
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Last Name Bettin	First Gail	M.I.	
Residential Street Address 233 Lyme St	City Hartford	State CT	Zip Code 06112-1340

Principal Occupation Homemaker		Name of Employer Retired from the State Government	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #			
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	Date Received 02/15/2019	Aggregate contributions \$25.00	Amount of Contribution \$25.00

Last Name Biggs	First John	M.I.	
Residential Street Address 20 E 47th St	City New York	State NY	Zip Code 10017-1905

Principal Occupation Retired		Name of Employer Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #			
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	Date Received 01/27/2019	Aggregate contributions \$1,000.00	Amount of Contribution \$1,000.00

Last Name Biggs	First Melissa	M.I.	
Residential Street Address 562 Litchfield Ave	City Killingly	State CT	Zip Code 06241-2005

Principal Occupation Government Relations		Name of Employer DePino, Nunez, & Biggs	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #			
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	Date Received 03/27/2019	Aggregate contributions \$250.00	Amount of Contribution \$250.00

SUBTOTAL Section B - This Page	\$1,275.00
TOTAL OF SECTION B PAGES	
TOTAL OF ALL CONTRIBUTIONS FROM MONETARY RECEIPTS (SECTION A - I)	\$504,861.00
<i>(Enter total on Line 33, Column A of Summary Page)</i>	
TOTAL OF ALL CONTRIBUTIONS FROM MONETARY RECEIPTS (SECTION A - I)	\$504,861.00

NAME OF CONTRIBUTOR		DATE OF RECEIPT		AMOUNT OF CONTRIBUTION	
Bronin for Mayor		April 10 filing		\$0.00	
<p>A. Cash Contributions from Social Contributions Received This Period ONLY <i>(Do not include contributions from a spouse, dependent child, or other family member.)</i></p>					
<p>B. Personal Check or Credit/Debit Card</p>					
<p>Blackford</p>					
Last Name		First		M.I.	
Blackford		Vivien			
Residential Street Address		City		State	
204 Dromara Rd		Guilford		CT	
Principal Occupation		Zip Code		06437-2301	
Retired		Name of Employer		Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution	
Is this contribution associated with an event reported in Section L1? If yes, list Event #		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		\$150.00	
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received		Aggregate contributions	
		02/15/2019		\$200.00	
<p>Blackford</p>					
Last Name		First		M.I.	
Blackford		Vivien			
Residential Street Address		City		State	
204 Dromara Rd		Guilford		CT	
Principal Occupation		Zip Code		06437-2301	
Retired		Name of Employer		Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution	
Is this contribution associated with an event reported in Section L1? If yes, list Event #		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		\$50.00	
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received		Aggregate contributions	
		03/24/2019		\$200.00	
<p>Blackwood</p>					
Last Name		First		M.I.	
Blackwood		Annette			
Residential Street Address		City		State	
21 Capitol Ave, A		Hartford		CT	
Principal Occupation		Zip Code		06106-1707	
Retired		Name of Employer		Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution	
Is this contribution associated with an event reported in Section L1? If yes, list Event #		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		\$50.00	
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received		Aggregate contributions	
		03/30/2019		\$50.00	

SUBTOTAL Section B - This Page		\$250.00
TOTAL of Section B Pages		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Section A - B)		\$504,861.00

(Enter total on Line 13, Column A of Summary Page)

NAME OF CONTRIBUTOR		DATE RECEIVED		AMOUNT OF CONTRIBUTION	
Bronin for Mayor		April 10 filing		\$0.00	
<i>(Section A - Individual Contributions from Natural Candidates for Elected Office Received for Period Only)</i>					
<i>(Section B - Individual Contributions from Individuals)</i>					
<i>(Section C - Unrelated Organizations from Individuals)</i>					
Last Name		First		M.I.	
Blair		David			
Residential Street Address		City		State	
1523 31st St NW		Washington		DC	
Principal Occupation		Name of Employer		Zip Code	
Lawyer		Crowell & Moring LLP		20007-3075	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$300.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with:			
If yes, list Event #		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
Method of contribution:		Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		03/10/2019		\$300.00	
Last Name		First		M.I.	
Blankley		John			
Residential Street Address		City		State	
10 Doverton Dr		Greenwich		CT	
Principal Occupation		Name of Employer		Zip Code	
Owner		Flagship Networks Inc.		06831-3318	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with:			
If yes, list Event #		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
Method of contribution:		Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		02/01/2019		\$100.00	
Last Name		First		M.I.	
Blazic		Monica			
Residential Street Address		City		State	
93 Grandview Ter		Hartford		CT	
Principal Occupation		Name of Employer		Zip Code	
Executive Director Chicopee Housing Authority		Executive Director Chicopee Housing Authority		06114-1727	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with:			
If yes, list Event #		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
Method of contribution:		Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		03/24/2019		\$100.00	

SUBTOTAL Section B - This Page		\$500.00
TOTAL OF Section B Page		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (SECTION A + B)		\$504,861.00

(Enter totals on Line 13, Column A of Summary Page)

I. MONETARY RECEIPTS (Sections A-K)

NAME OF CONTRIBUTOR		DATE RECEIVED		AMOUNT OF CONTRIBUTION	
Blonin for Mayor		April 10 filing		\$0.00	
<p><i>Total Contributions from Small Contributors Excluded by Paid Only</i></p> <p><i>See Instructions for Details of Small Contributors</i></p>					
<p>Blinder</p> <p>Residential Street Address 7 Regent St City: Hartford State: CT Zip Code: 06105-3920</p> <p>Principal Occupation Director, Education and Outreach, DCP</p> <p>Name of Employer State of Connecticut</p> <p>Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, list Event #</p> <p>Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative</p> <p>Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order</p> <p>Date Received: 03/21/2019 Aggregate contributions: \$50.00</p> <p>Amount of Contribution: \$50.00</p> <p>Last Name: Blinder First: Catherine M.I.</p>					
<p>Blondin</p> <p>Residential Street Address 379 Prospect St City: Torrington State: CT Zip Code: 06790-5238</p> <p>Principal Occupation Attorney</p> <p>Name of Employer Blondin Law Offices LLC</p> <p>Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, list Event #</p> <p>Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative</p> <p>Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order</p> <p>Date Received: 02/02/2019 Aggregate contributions: \$1,000.00</p> <p>Amount of Contribution: \$1,000.00</p> <p>Last Name: Blondin First: Audrey M.I.</p>					
<p>Bloss</p> <p>Residential Street Address 88 Mulberry Farms Rd City: Guilford State: CT Zip Code: 06437-3215</p> <p>Principal Occupation Attorney</p> <p>Name of Employer Koskoff Koskoff Bieder</p> <p>Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, list Event #</p> <p>Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative</p> <p>Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order</p> <p>Date Received: 01/31/2019 Aggregate contributions: \$1,000.00</p> <p>Amount of Contribution: \$1,000.00</p> <p>Last Name: Bloss First: William M.I.</p>					
SUBTOTAL Section B - This Page				\$2,050.00	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)				\$504,861.00	
(Enter total on Line B, Column A of Summary Page)				\$504,861.00	

SUBTOTAL Section B - This Page		\$2,050.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)		\$504,861.00
(Enter total on Line B, Column A of Summary Page)		\$504,861.00

Bronin for Mayor		April 10 filing		\$0.00
<p><i>(Total Contributions From Non-Candidates Exceeds This Form Only)</i></p>				
<p><i>(Enter total on Line 15, Column A of Summary Page)</i></p>				
Last Name Blumenfeld		First James		M.I.
Residential Street Address 138 MacFarlane Dr		City Delray Beach	State FL	Zip Code 33483-6804
Principal Occupation Marketing Consultant		Name of Employer The WilMark Group		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	Date Received 03/31/2019	Aggregate contributions \$1,000.00
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
Last Name Bock		First Elizabeth		M.I.
Residential Street Address 256 Mount Hamilton Ave, Los Altos		City Los Altos	State CA	Zip Code 94022-2238
Principal Occupation Finance		Name of Employer Bamboo Insurance		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	Date Received 03/26/2019	Aggregate contributions \$250.00
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
Last Name Bodnar		First Seth		M.I.
Residential Street Address 1325 Gerald Ave		City Missoula	State MT	Zip Code 59801-4231
Principal Occupation Executive		Name of Employer University		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	Date Received 03/30/2019	Aggregate contributions \$500.00
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				

SUBTOTAL Section B - This Page	\$1,750.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)	\$504,861.00
(Enter total on Line 15, Column A of Summary Page)	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)	\$504,861.00

TYPE OF REPORT		Date Received		Amount of Contribution		
Bronin for Mayor		April 10 filing		\$0.00		
Bohgosian						
Last Name	First	M.I.				
Boghosian	Karlos					
Residential Street Address	City	State	Zip Code			
24 Lewis St	Hartford	CT	06103-2501			
Principal Occupation	Name of Employer					
Executive	SoVita Chiropractic Center					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If yes, list event #			If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution:	<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check	<input checked="" type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order	Aggregate contributions \$1,000.00
Boon-Bordenave						
Last Name	First	M.I.				
Boon-Bordenave	Jeremy					
Residential Street Address	City	State	Zip Code			
160 Cabnini Blvd, 12	New York	NY	10033-1137			
Principal Occupation	Name of Employer					
Architect	Diller Scofidio + Renfro					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If yes, list event #			If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution:	<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check	<input checked="" type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order	Aggregate contributions \$250.00
Boon-Bordenave						
Last Name	First	M.I.				
Boon-Bordenave	Jeremy					
Residential Street Address	City	State	Zip Code			
160 Cabnini Blvd, 12	New York	NY	10033-1137			
Principal Occupation	Name of Employer					
Architect	Diller Scofidio + Renfro					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If yes, list event #			If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution:	<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check	<input checked="" type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order	Aggregate contributions \$250.00
Boon-Bordenave						
Last Name	First	M.I.				
Boon-Bordenave	Jeremy					
Residential Street Address	City	State	Zip Code			
160 Cabnini Blvd, 12	New York	NY	10033-1137			
Principal Occupation	Name of Employer					
Architect	Diller Scofidio + Renfro					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If yes, list event #			If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution:	<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check	<input checked="" type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order	Aggregate contributions \$250.00
Boon-Bordenave						
Last Name	First	M.I.				
Boon-Bordenave	Jeremy					
Residential Street Address	City	State	Zip Code			
160 Cabnini Blvd, 12	New York	NY	10033-1137			
Principal Occupation	Name of Employer					
Architect	Diller Scofidio + Renfro					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If yes, list event #			If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution:	<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check	<input checked="" type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order	Aggregate contributions \$250.00
Boon-Bordenave						
Last Name	First	M.I.				
Boon-Bordenave	Jeremy					
Residential Street Address	City	State	Zip Code			
160 Cabnini Blvd, 12	New York	NY	10033-1137			
Principal Occupation	Name of Employer					
Architect	Diller Scofidio + Renfro					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If yes, list event #			If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution:	<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check	<input checked="" type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> Payroll Deduction	<input type="checkbox"/> Money Order	Aggregate contributions \$250.00

SUBTOTAL Section B - This Page		\$1,250.00
TOTAL of Section B Page		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)		\$504,861.00
(Enter total on Line 12, Column A of Summary Page)		

I. MONETARY RECEIPTS (Sections A-K)

NAME OF CONTRIBUTOR		DATE OF RECEIPT		AMOUNT OF CONTRIBUTION	
Bronin for Mayor		April 10 filing		\$0.00	
<p><i>A Total of \$250.00 was Received this Period ONLY</i></p> <p><i>Contribution for Lobbyist/Spouse/Dependent Child</i></p>					
Last Name		First		M.I.	
Borden		Robert			
Residential Street Address		City		Zip Code	
12 Copper Beech Ln		Farmington		06032-1631	
Principal Occupation		Name of Employer			
Attorney		Shipman and goodwin			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$250.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with:			
If yes, list Event #		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
Method of contribution:		Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		03/28/2019		\$250.00	
Last Name		First		M.I.	
Bourdeaux		John			
Residential Street Address		City		Zip Code	
212 N Beacon St, Hartford		Hartford		06105-2247	
Principal Occupation		Name of Employer			
fundraiser		Connecticut Science Center			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$500.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with:			
If yes, list Event #		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
Method of contribution:		Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		01/22/2019		\$500.00	
Last Name		First		M.I.	
Boums		Courtney			
Residential Street Address		City		Zip Code	
24 Saddle Ridge Dr		West Hartford		06117-2330	
Principal Occupation		Name of Employer			
Retired		Retired			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$25.00	
Is this contribution associated with an event reported in Section L1?		Is contributor a principal of a state contractor or prospective state contractor?			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, indicate which branch or branches of government the contract is with:			
If yes, list Event #		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
Method of contribution:		Date Received		Aggregate contributions	
<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		01/26/2019		\$25.00	

SUBTOTAL Section B - This Page		\$775.00
TOTAL of Section B Pages		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (SECTIONS A-K)		\$504,861.00

(Enter total on Line 15, Column A of Summary Page)

I. MONETARY RECEIPTS (Sections A-K)

BRONIN FOR MAYOR		April 10 filing	\$0.00
Total Contributions from Cash, Credit/Debit Card, Money Order, Payroll Deduction, or Personal Check			

Last Name Brelloff		First Paul	M.I.
Residential Street Address 418 Willow St		City Lockport	Zip Code 14094-5539
Principal Occupation executive		State NY	
Name of Employer Shortlist			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #	Appropriate contributions \$50.00		
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order Date Received 02/28/2019			

Last Name Bretholz		First Michael	M.I.
Residential Street Address 407 Orange St		City New Haven	Zip Code 06511-6406
Principal Occupation Lawyer		State CT	
Name of Employer Macquane USA			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #	Appropriate contributions \$150.00		
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order Date Received 03/31/2019			

Last Name BRIGER		First PETER	M.I.
Residential Street Address 25 Field Point Cir		City Greenwich	Zip Code 06830-7072
Principal Occupation CEO		State CT	
Name of Employer Hydromine Inc			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #	Appropriate contributions \$1,000.00		
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order Date Received 02/19/2019			

SUBTOTAL Section B - This Page	\$1,200.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)	
Total of Section B Pages	\$504,861.00
Enter total on Line 13, Column A of Summary Page	
Total of Section A Pages	\$504,861.00

NAME OF CONTRIBUTOR (Print Name and Address)									
TYPE OF RECEIPT									
April 10 filing									
\$0.00									
NAME OF CONTRIBUTOR (Print Name and Address)									
TYPE OF RECEIPT									
Retired									
\$500.00									
NAME OF CONTRIBUTOR (Print Name and Address)									
TYPE OF RECEIPT									
Capital Restoration									
\$1,000.00									

Last Name	First	M.I.				
Brody	Steven					
Residential Street Address	City	State	Zip Code			
140 Blue Heron Pond Rd	Johns Island	SC	29455-5824			
Principal Occupation	Name of Employer					
Retired	Retired					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?			
			<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?			
			If yes, indicate which branch or branches of government the contract is with:			
			<input type="checkbox"/> Executive	<input type="checkbox"/> Legislative		
Method of contribution:	Date Received		Aggregate contributions			
<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	03/03/2019		\$500.00			
Last Name	First	M.I.				
Brody	Susanne					
Residential Street Address	City	State	Zip Code			
1365 York Ave, 37E	New York	NY	10021-4035			
Principal Occupation	Name of Employer					
Attorney	Federal Defenders SDNY					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?			
			<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?			
			If yes, indicate which branch or branches of government the contract is with:			
			<input type="checkbox"/> Executive	<input type="checkbox"/> Legislative		
Method of contribution:	Date Received		Aggregate contributions			
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	02/04/2019		\$500.00			
Last Name	First	M.I.				
Bromfield	Douglas					
Residential Street Address	City	State	Zip Code			
390 Homestead Ave	Hartford	CT	06112-2125			
Principal Occupation	Name of Employer					
Businessman	Capital Restoration					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?			
			<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?			
			If yes, indicate which branch or branches of government the contract is with:			
			<input type="checkbox"/> Executive	<input type="checkbox"/> Legislative		
Method of contribution:	Date Received		Aggregate contributions			
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	03/28/2019		\$1,000.00			

SUBTOTAL Section B - This Page	\$2,000.00
TOTAL of Section B Pages	\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B) <i>(Enter total on Line 13, Column A of Summary Page)</i>	\$504,861.00

NAME OF CONTRIBUTOR (Print Name)		DATE RECEIVED		AMOUNT	
Bronin for Mayor		April 10 filing		\$0.00	

Last Name Bronin	First Andrew	City Rye Brook	State NY	Zip Code 10573-2820	M.I.
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Residential Street Address 4 Rye Ridge Plz	Name of Employer Andrew Bronin MD
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Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative

Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	Date Received 01/22/2019	Aggregate contributions \$1,000.00
Last Name Bronin		
First Elaine		
City Greenwich		
State CT		
Zip Code 06831-3702		

Principal Occupation artist		Name of Employer retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		

Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	Date Received 01/22/2019	Aggregate contributions \$1,000.00
Last Name Bronin		
First Sara		
City Hartford		
State CT		
Zip Code 06106-1633		

Residential Street Address 93 Elm St		Name of Employer University of Connecticut School of Law	
Principal Occupation Professor			

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative

Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order	Date Received 01/22/2019	Aggregate contributions \$1,000.00
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SUBTOTAL - Section B - This Page	\$3,000.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - E)	\$504,861.00
(Enter total on Line 15, Column A of Summary Page)	\$504,861.00

I. MONETARY RECEIPTS (Sections A-K)

NAME OF CONTRIBUTOR		DATE OF REPORT	
Bronin for Mayor		April 10 filing	
<i>(Contributions from Small Contributors - Received for Period ONLY - Contributions by Owners of Small Corporations)</i>			
Subtotal			
			\$0.00

NAME OF CONTRIBUTOR		DATE OF REPORT	
Browner		April 10 filing	
<i>(Contributions from Small Contributors - Received for Period ONLY - Contributions by Owners of Small Corporations)</i>			
Subtotal			
			\$600.00

Last Name	Elizabeth		M.I.
Residential Street Address	City	State	Zip Code
2 Silver Brook Rd	Westport	CT	06880-1519
Principal Occupation	Name of Employer		
attorney	Berkowitz, Trager & Trager, LLC		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, list Event #	<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	If yes, indicate which branch or branches of government the contract is with:	
Method of contribution:	Date Received	Aggregate contributions	Amount of Contribution
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	03/27/2019	\$600.00	\$600.00
Last Name: Ellen First: Ellen M.I.:			
Residential Street Address	City	State	Zip Code
777 Prospect Ave, Apt 6	West Hartford	CT	06105-4243
Principal Occupation	Name of Employer		
Retired	retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, list Event #	<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	If yes, indicate which branch or branches of government the contract is with:	
Method of contribution:	Date Received	Aggregate contributions	Amount of Contribution
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	01/27/2019	\$500.00	\$500.00
Last Name: Jeffrey First: Jeffrey M.I.:			
Residential Street Address	City	State	Zip Code
62 Hill St	Glastonbury	CT	06033-1925
Principal Occupation	Name of Employer		
Executive	Newman's Own Foundation		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is this contribution associated with an event reported in Section L1?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, list Event #	<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	If yes, indicate which branch or branches of government the contract is with:	
Method of contribution:	Date Received	Aggregate contributions	Amount of Contribution
<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	03/16/2019	\$500.00	\$500.00

SUBTOTAL Section B - This Page	\$1,600.00
TOTAL OF SECTION B PAGE	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - I)	\$504,861.00
<i>(Enter total on Line 43, Column A of Summary Page)</i>	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - I)	\$504,861.00

I. MONETARY RECEIPTS (Sections A-K)

NAME OF COMMITTEE		DATE OF REPORT	
Bronin for Mayor		April 10 filing	
<p>A. Total Cash/Debit Card Contributions Received by Fund ONLY (Do not include for a Spouse or Spouse's Qualifying Contribution)</p>			
		\$0.00	
B. Personal Check Contributions from Individuals			
<p>1. Contributor: Myles</p>			
<p>Contributor Information: Last Name: BROWN First: Myles M.I.: Residential Street Address: Farmington City: Farmington State: CT Zip Code: 06032-2333</p>		<p>Employer Information: Name of Employer: Amenta emma</p>	
<p>Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative</p>	
<p>If yes, list Event #</p>		<p>Aggregate contributions: \$1,000.00</p>	
<p>Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order</p>			
<p>2. Contributor: Stacey</p>		<p>Employer Information: Name of Employer: InsurTech Hartford</p>	
<p>Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative</p>	
<p>If yes, list Event #</p>		<p>Aggregate contributions: \$250.00</p>	
<p>Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order</p>			
<p>3. Contributor: Shery</p>			
<p>Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>		<p>Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative</p>	
<p>If yes, list Event #</p>		<p>Aggregate contributions: \$500.00</p>	
<p>Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order</p>			
<p>Summary: Date Received: 03/25/2019</p>			
<p>Subtotal for this page: \$1,750.00</p>		<p>Subtotal for this page: \$1,750.00</p>	
<p>Total of all contributions from individuals (Section A + B): \$504,861.00</p>		<p>Total of all contributions from individuals (Section A + B): \$504,861.00</p>	
<p><i>(Enter total on Line 19, Column A of Summary Page)</i></p>			

THE OFFICE OF THE COMPTROLLER OF THE STATE	
Bronin for Mayor	
April 10 filing	
\$0.00	

Last Name Buchanan		First Julie		M.I.	
Residential Street Address 173 Essex St		City Deep River	State CT	Zip Code 06417-1946	
Principal Occupation Retired					
Name of Employer Retired					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution \$1,000.00	
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
If yes, list Event #		Date Received 03/24/2019		Aggregate contributions \$1,000.00	
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					

Last Name Buchanan		First Kevin		M.I.	
Residential Street Address 173 Essex St		City Deep River	State CT	Zip Code 06417-1946	
Principal Occupation Painter					
Name of Employer Fluoropolymer Resources LLC					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution \$500.00	
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
If yes, list Event #		Date Received 02/01/2019		Aggregate contributions \$1,500.00	
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					

Last Name Buchanan		First Kevin		M.I.	
Residential Street Address 173 Essex St		City Deep River	State CT	Zip Code 06417-1946	
Principal Occupation Painter					
Name of Employer Fluoropolymer Resources LLC					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution \$1,000.00	
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			
If yes, list Event #		Date Received 03/06/2019		Aggregate contributions \$1,500.00	
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order					

SUBTOTAL Section B - This Page	\$2,500.00
TOTAL of Section B Pages	\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM MEMBERS (Sections A - E)	\$504,861.00
<small>(Enter total on Line E2, Column A of Summary Page)</small>	

Section A - Receipts from Non-Candidate Sources Received This Period ONLY	
Bronin for Mayor	
April 10 filing	
\$0.00	

Last Name BUDD		First EDWARD	M.I.
Residential Street Address 270 Chestnut Hill Rd		City Glastonbury	Zip Code 06033-4153
Principal Occupation RETIRED		Name of Employer RETIRED	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #	Aggregate contributions \$500.00		

Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 03/24/2019	Aggregate contributions \$500.00
Last Name Bulaong		First Cynthia	M.I.
Residential Street Address 140 Huyshope Ave		City Hartford	Zip Code 06106-2857
Principal Occupation Event Coordinating, Dance Instructor		Name of Employer DBA Boo (Event Coordination)	

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #	Aggregate contributions \$25.00		
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 03/31/2019	Aggregate contributions \$25.00

Last Name Bulman-Pozen		First Jessica	M.I.
Residential Street Address 305 Riverside Dr, 8A		City New York	Zip Code 10025-5286
Principal Occupation Law Professor		Name of Employer Columbia University	

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
If yes, list Event #	Aggregate contributions \$1,000.00		
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 01/31/2019	Aggregate contributions \$1,000.00

SUBTOTAL - Section B - This Page	\$1,525.00
TOTAL OF SECTION B PAGES	\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 15, Column A of Summary Page)</i>	\$504,861.00

APRIL 10 FILING PERIOD	
April 10 filing	
\$0.00	

Bronin for Mayor

(Total Contributions From Non-Candidate Committees Reported for Period Only)

Last Name Bulsara	First Ketan	M.I. ML
Residential Street Address 42 Acom Dr		
City Bethany	State CT	Zip Code 06524-3383
Principal Occupation Surgeon		
Name of Employer UCONN Health		

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount of Contribution \$500.00
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 03/15/2019 Aggregate contributions \$500.00

Last Name Bunnell	First Charles	M.I.
Residential Street Address 204 Niantic River Rd		
City Waterford	State CT	Zip Code 06385-1536
Principal Occupation Chief of Staff		
Name of Employer mohegan tribe		

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount of Contribution \$1,000.00
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 03/29/2019 Aggregate contributions \$1,000.00

Last Name Burchell	First Ken	M.I.
Residential Street Address 26 May St		
City Hartford	State CT	Zip Code 06105-1518
Principal Occupation N/a		
Name of Employer N/a		

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount of Contribution \$20.00
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
Method of contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 02/16/2019 Aggregate contributions \$20.00

SUBTOTAL Section B - This Page	\$1,520.00
TOTAL of Section B Pages	\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)	\$504,861.00

(Enter total on Line 15, Column A, of Summary Page)

TYPE OF REPORT	
April 10 filing	
Total Contributions From Small Contributors Received This Period ONLY	
Subtotal Section A - B	
\$0.00	

Bronin for Mayor	
Last Name Burghoff	First Jillian
Residential Street Address 14 Spencer Ct, 2A	City Brooklyn
State NY	Zip Code 11205-4861
Principal Occupation Coordinator	
Name of Employer Documentary Production Company	

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount of Contribution
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
If yes, list Event #		\$5.00

Method of contribution:		Aggregate contributions
<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	\$5.00
<input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		
Date Received 01/22/2019		

Burke		M.I.
Last Name Burke	First Abigail	
Residential Street Address 348 Ayr Hill Ave NE	City Vienna	Zip Code 22180-4725
State VA		
Principal Occupation Student		

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount of Contribution
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
If yes, list Event #		\$500.00

Method of contribution:		Aggregate contributions
<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	\$500.00
<input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		
Date Received 02/01/2019		

Burke		M.I.
Last Name Burke	First William	
Residential Street Address 348 Ayr Hill Ave NE	City Vienna	Zip Code 22180-4725
State VA		
Principal Occupation Civil Servant		
Name of Employer US Government		

Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Amount of Contribution
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	
If yes, list Event #		\$1,000.00

Method of contribution:		Aggregate contributions
<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	\$1,000.00
<input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		
Date Received 01/30/2019		

SUBTOTAL Section B - This Page	\$1,505.00
TOTAL of Section B Pages	
\$504,861.00	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A - B)	
<i>(Enter total on Line 13, Column A of Summary Page)</i>	
\$504,861.00	

Bronin for Mayor		April 10 filing		\$0.00
Section A: Individual Contributions Received by Person Only				
Contributor: Gregg				
Last Name: Gregg M.L.				
Residential Street Address: Hamden City: Hamden State: CT Zip Code: 06517-1511				
Principal Occupation: Attorney Name of Employer: Carmody Torrance Sandak Hennessey LLP				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution \$1,000.00
If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution \$1,000.00
If yes, list Event # Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative Date Received: 02/07/2019 Aggregate contributions: \$1,000.00		
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
Last Name: Bymes First: Hélène M.L.				
Residential Street Address: 22 Seville Ave City: Rye State: NY Zip Code: 10580-1832				
Principal Occupation: Homemaker Name of Employer: Homemaker				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution \$1,000.00
If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution \$1,000.00
If yes, list Event # Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative Date Received: 01/26/2019 Aggregate contributions: \$1,000.00		
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
Last Name: Bymes First: John M.L.				
Residential Street Address: 20 Colony Rd City: West Hartford State: CT Zip Code: 06117-2214				
Principal Occupation: Insurance Name of Employer: peoples united insurance				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution \$500.00
If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution \$500.00
If yes, list Event # Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative Date Received: 02/23/2019 Aggregate contributions: \$500.00		
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				

SUBTOTAL Section B - This Page	\$2,500.00
TOTAL of Sections B Page	\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A, B, C, D, E, F, G, H, I, J, K, L, M, N, O, P, Q, R, S, T, U, V, W, X, Y, Z)	\$504,861.00

(Enter total on Line F3, Column A of Summary Page)

NAME OF CONTRIBUTOR		DATE RECEIVED		AMOUNT OF CONTRIBUTION	
Bronin for Mayor		April 10 filing		\$0.00	
Section B - Candidates for Public Office					
<p>Section B-1: Candidate for Public Office</p>					
<p>Section B-2: Candidate for Public Office</p>					
<p>Section B-3: Candidate for Public Office</p>					
<p>Section B-4: Candidate for Public Office</p>					
<p>Section B-5: Candidate for Public Office</p>					
<p>Section B-6: Candidate for Public Office</p>					
<p>Section B-7: Candidate for Public Office</p>					
<p>Section B-8: Candidate for Public Office</p>					
<p>Section B-9: Candidate for Public Office</p>					
<p>Section B-10: Candidate for Public Office</p>					
<p>Section B-11: Candidate for Public Office</p>					
<p>Section B-12: Candidate for Public Office</p>					
<p>Section B-13: Candidate for Public Office</p>					
<p>Section B-14: Candidate for Public Office</p>					
<p>Section B-15: Candidate for Public Office</p>					
<p>Section B-16: Candidate for Public Office</p>					
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<p>Section B-18: Candidate for Public Office</p>					
<p>Section B-19: Candidate for Public Office</p>					
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<p>Section B-21: Candidate for Public Office</p>					
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<p>Section B-98: Candidate for Public Office</p>					
<p>Section B-99: Candidate for Public Office</p>					
<p>Section B-100: Candidate for Public Office</p>					

SUBTOTAL Section B - This Page		\$1,020.00
TOTAL of Section B Pages		\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Section A - F)		\$504,861.00

(Enter total on Line 15, Column A of Summary Page)

NAME OF CANDIDATE OR POLITICAL COMMITTEE		April 10 filing		\$0.00
A. Total Contributions from Non-Federal Sources Received for Period (Only Contributions for Primary or General Election)				

Last Name Camilliere	First Rose	M.I. D	State CT	Zip Code 06109-3752
Residential Street Address 148 Ox Yoke Dr		City Wethersfield	Name of Employer Retired	
Principal Occupation Retired		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event #		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 03/31/2019	Aggregate contributions \$100.00	Amount of Contribution \$100.00

Last Name Canno	First Gabrielle	M.I.	State PA	Zip Code 19103-5737
Residential Street Address 220 W Rittenhouse Sq, Apt 25		City Philadelphia	Name of Employer architect	
Principal Occupation architect		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event #		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 03/30/2019	Aggregate contributions \$1,000.00	Amount of Contribution \$1,000.00

Last Name Canno	First Matthew	M.I.	State PA	Zip Code 19103-5737
Residential Street Address 220 W Rittenhouse Sq, Apt 25		City Philadelphia	Name of Employer Iron Stone	
Principal Occupation real estate owner		If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is this contribution associated with an event reported in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event #		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		
Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 01/30/2019	Aggregate contributions \$1,000.00	Amount of Contribution \$1,000.00

SUBTOTAL Section B - This Page	\$2,100.00
TOTAL OF SECTION B PAGES	\$504,861.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (SECTIONS A + B) <i>(Enter total on Line 19, Column A of Summary Page)</i>	\$504,861.00