

| | | | |
|---|---|--|---------------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 Filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name Kinney | | First Stephen | MI |
| Residential Street Address 20 Cromwell Place | | City Old Saybrook | State CT Zip Code 06475 |
| Principal Occupation Lobbyist | | Name of Employer Gaffney Bennett | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="radio"/> Yes <input type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # B _____ <input checked="" type="radio"/> Yes <input type="radio"/> 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="radio"/> Executive <input checked="" type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/16/23 | Aggregate Contributions 1000 |
| Last Name Kotkin | | First Jeffrey | MI |
| Residential Street Address 28 Farms Village Rd | | City Wethersfield | State CT Zip Code 06109 |
| Principal Occupation VIP Investor Relations | | Name of Employer Eversource Energy Service Co | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 500 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # B _____ <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input checked="" type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/16/23 | Aggregate Contributions 500 |
| Last Name Lantigua | | First Milton | MI |
| Residential Street Address 36 Harlan St | | City Manchester | State CT Zip Code 06042 |
| Principal Occupation General Manager | | Name of Employer El Muero Supermarket | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # B _____ <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input checked="" type="radio"/> Legislative <input type="radio"/> Yes <input checked="" type="radio"/> No | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/16/23 | Aggregate Contributions 1000 |
| SUBTOTAL Section B — This Page | | 2500 | |
| TOTAL of additional Section B Pages | | 234710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 236223 | |

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| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 Filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | | |
|---|-------------------|---|--------------------------------|---|--|
| Last Name Leach | First Clifford | State CT | Zip Code 06002 | MI | |
| Residential Street Address 3 Kenmore Rd | | City Bloomfield | | Name of Employer The Hartford | |
| Principal Occupation Atty/Lobbyist | | Name of Employer The Hartford | | Amount of Contribution 150 | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>B</u> | | 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="radio"/> Executive <input type="radio"/> Legislative | | <input checked="" type="radio"/> Yes <input type="radio"/> No | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/16/23 | Aggregate Contributions 150 | | |

| | | | | | |
|---|----------------|---|---------------------------------|---|--|
| Last Name Leroy | First Craig | State CT | Zip Code 06002 | MI | |
| Residential Street Address 2 Carnoustie Circle | | City Bloomfield | | Name of Employer Roy & Leroy | |
| Principal Occupation Lobbyist | | Name of Employer Roy & Leroy | | Amount of Contribution 1000 | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>B</u> | | 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="radio"/> Executive <input type="radio"/> Legislative | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/16/23 | Aggregate Contributions 1000 | | |

| | | | | | |
|---|-----------------|---|--------------------------------|---|--|
| Last Name Looney | First Martin | State CT | Zip Code 06512 | MI | |
| Residential Street Address 132 Fort Hale Rd | | City New Haven | | Name of Employer CT General Assembly/Keyes & Looney | |
| Principal Occupation State Legislator/Attorney | | Name of Employer CT General Assembly/Keyes & Looney | | Amount of Contribution 250 | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>B</u> | | 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="radio"/> Executive <input type="radio"/> Legislative | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/16 | Aggregate Contributions 250 | | |

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|---|--------|
| SUBTOTAL Section B — This Page | 1400 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <small>(Enter total on Line 13, Column A of Summary Page Totals)</small> | 326223 |

Section B ADDITIONAL PAGE 145 of 189

| | | |
|--|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT |
| Fonfara for Hartford | | April 10 Filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | \$ 1513 |
| SUBTOTAL SECTION A | | |

B. Itemized Contributions from Individuals

| | | | |
|--|--|--|--|
| Last Name | | First | MI |
| Morton | | Margaret | |
| Residential Street Address | | City | State Zip Code |
| 12 Highland Creed | | Cromwell | CT 06416 |
| Principal Occupation | | Name of Employer | |
| | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input type="radio"/> No | 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input checked="" type="radio"/> Yes <input type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/16/23 | 1000 |

| | | | |
|--|--|--|--|
| Last Name | | First | MI |
| Malcynsky | | Jay | |
| Residential Street Address | | City | State Zip Code |
| 25 Parkers Point | | Chester | CT 06412 |
| Principal Occupation | | Name of Employer | |
| Attorney/Lobbyist | | Gaffney Bennett | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input checked="" type="radio"/> Yes <input type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input checked="" type="radio"/> Yes <input type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/16/23 | 1000 |

| | | | |
|--|--|--|--|
| Last Name | | First | MI |
| O'Brien | | James | |
| Residential Street Address | | City | State Zip Code |
| 22 Fernwood Rd | | West Hartford | CT 06119 |
| Principal Occupation | | Name of Employer | |
| Attorney/Lobbyist | | The Connecticut Group | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/16 | 1000 |

| | | |
|---|--|--------|
| SUBTOTAL Section B — This Page | | 3000 |
| TOTAL of additional Section B Pages | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 |

Section B ADDITIONAL PAGE 146 of 189

| | | | |
|--|--|--|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 Filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | First | |
| Patricelli | | Caroline | |
| Residential Street Address | | City | State Zip Code |
| PO Box 1788 | | Wilson | WY 83014 |
| Principal Occupation | | Name of Employer | |
| | | Homemaker | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input checked="" type="radio"/> Yes <input type="radio"/> 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 checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/16/23 | 1000 |
| Last Name | | First | |
| Patricelli | | Margaret | |
| Residential Street Address | | City | State Zip Code |
| 77 Hartford Rd | | Simsbury | CT 06070 |
| Principal Occupation | | Name of Employer | |
| Retired | | Retired | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input checked="" type="radio"/> Yes <input type="radio"/> 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 checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/16/23 | 1000 |
| Last Name | | First | |
| Patricelli | | Robert | |
| Residential Street Address | | City | State Zip Code |
| 77 Hartford Rd | | Simsbury | CT 06070 |
| Principal Occupation | | Name of Employer | |
| Retired | | Retired | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input checked="" type="radio"/> Yes <input type="radio"/> 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 checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/16 | 1000 |
| SUBTOTAL Section B — This Page | | | 3000 |
| TOTAL of additional Section B Pages | | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | | 326223 |

Section B ADDITIONAL PAGE 147 of 189

| | | | |
|--|--|--|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 Filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | First | |
| Reynolds | | Kevin | |
| Residential Street Address | | City | |
| 71 Sycamore Rd | | West Hartford | |
| Principal Occupation | | Name of Employer | |
| Lobbyist | | RSG | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? | | Is contributor a principal of a state contractor or prospective state contractor? | |
| If yes, list Event # <u>B</u> | | If yes, indicate which branch or branches of government the contract is with: | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input checked="" type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/16/23 | 1000 |
| Last Name | | First | |
| Riley | | Michael | |
| Residential Street Address | | City | |
| 52 Grove St | | Thomaston | |
| Principal Occupation | | Name of Employer | |
| Lobbyist | | Self | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? | | Is contributor a principal of a state contractor or prospective state contractor? | |
| If yes, list Event # <u>B</u> | | If yes, indicate which branch or branches of government the contract is with: | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input checked="" type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/16/23 | 100 |
| Last Name | | First | |
| Santiago | | Hilda | |
| Residential Street Address | | City | |
| 85 South Ave | | Meridan | |
| Principal Occupation | | Name of Employer | |
| Legislator | | State of CT | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? | | Is contributor a principal of a state contractor or prospective state contractor? | |
| If yes, list Event # <u>B</u> | | If yes, indicate which branch or branches of government the contract is with: | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input checked="" type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/16 | 100 |
| SUBTOTAL Section B — This Page | | | 1200 |
| TOTAL of additional Section B Pages | | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | | 326223 |

Section B ADDITIONAL PAGE 148 **of** 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 Filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | |
|---|---|--------------------------|---------------------------------|--------------------------------|
| Last Name Patricelli | First Thomas | State WY | Zip Code 83014 | MI |
| Residential Street Address PO Box 1788 | City Wilson | | | |
| Principal Occupation Retired | Name of Employer | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | | Amount of Contribution 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>B</u> | 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="radio"/> Executive <input checked="" type="radio"/> Legislative | | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/16/23 | Aggregate Contributions 1000 | |

| | | | | |
|---|---|--------------------------|--------------------------------|-------------------------------|
| Last Name Shortell | First Patrick | State CT | Zip Code 06117 | MI |
| Residential Street Address 60 Hyde Rd | City West Hartford | | | |
| Principal Occupation Lobbyist | Name of Employer Hillside Strategies LLC | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | | Amount of Contribution 100 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>B</u> | 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="radio"/> Executive <input checked="" type="radio"/> Legislative | | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/16/23 | Aggregate Contributions 100 | |

| | | | | |
|--|---|--------------------------|--------------------------------|-------------------------------|
| Last Name Sullivan | First Patrick | State CT | Zip Code 06105 | MI |
| Residential Street Address 1090 Prospect Ave | City Hartford | | | |
| Principal Occupation Lobbyist | Name of Employer Sullivan & LeShane | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | | Amount of Contribution 500 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>B</u> | 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="radio"/> Executive <input checked="" type="radio"/> Legislative | | | |
| Method of Contribution: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/16/23 | Aggregate Contributions 500 | |

| | |
|--|--------|
| SUBTOTAL Section B — This Page | 1600 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | 326223 |

Section B ADDITIONAL PAGE 149 **of** 189

| | |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i> | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | | |
|--|--|--|-------------------------|---|----------|
| Last Name | | First | | MI | |
| Carbone | | Vincent | | | |
| Residential Street Address | | City | | State | Zip Code |
| 25 Garden St | | Wethersfield | | CT | 06109 |
| Principal Occupation | | Name of Employer | | | |
| Restaurant Business | | Self | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | 250 | |
| 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="radio"/> Yes <input checked="" type="radio"/> No | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/17/23 | 250 | | |
| Last Name | | First | | MI | |
| Martino | | Anthony | | | |
| Residential Street Address | | City | | State | Zip Code |
| 374 Highland St | | Wethersfield | | CT | 06109 |
| 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 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | 25 | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E _____ | | 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="radio"/> Yes <input checked="" type="radio"/> No | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 25 | | |
| Last Name | | First | | MI | |
| McLean | | Gloria | | | |
| Residential Street Address | | City | | State | Zip Code |
| 16 Dogwood Court | | Rocky Hill | | CT | 06067 |
| Principal Occupation | | Name of Employer | | | |
| Teacher | | Retired | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | 75 | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E _____ | | 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="radio"/> Yes <input checked="" type="radio"/> No | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | | |
| <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 75 | | |
| SUBTOTAL Section B — This Page | | | | 350 | |
| TOTAL of additional Section B Pages | | | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | | | | 326223 | |

Section B ADDITIONAL PAGE 150 of 189

| | | |
|---|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT |
| Fonfara for Hartford | | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | \$ 1513 |
| SUBTOTAL SECTION A | | |

B. Itemized Contributions from Individuals

| Last Name | | First | State | Zip Code | MI | Amount of Contribution |
|--|--|--|---------------------|--|----|------------------------|
| McMahon | | Dennis | CT | 06109 | | 100 |
| Residential Street Address | | City | Name of Employer | | | |
| 655 Highland St | | Wethersfield | McMahon Law Offices | | | |
| Principal Occupation | | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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? | | |
| Attorney | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E _____ | | 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: | | Aggregate Contributions | | |
| <input checked="" type="radio"/> Yes <input type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | | 100 | | |
| Method of Contribution: | | Date Received | | | | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/23/23 | | | | |
| Last Name | | First | State | Zip Code | MI | Amount of Contribution |
| Moon | | Polly | CT | 06109 | | 100 |
| Residential Street Address | | City | Name of Employer | | | |
| 23 Orchard Brook Dr | | Wethersfield | Retired | | | |
| Principal Occupation | | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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? | | |
| Retired | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E _____ | | 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: | | Aggregate Contributions | | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | | 100 | | |
| Method of Contribution: | | Date Received | | | | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | | | | |
| Last Name | | First | State | Zip Code | MI | Amount of Contribution |
| Morin | | Andrew | CT | 06109 | | 125 |
| Residential Street Address | | City | Name of Employer | | | |
| 495 Brimfield Rd | | Wethersfield | Halloran & Sage | | | |
| Principal Occupation | | Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E _____ | | 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: | | Aggregate Contributions | | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | | 125 | | |
| Method of Contribution: | | Date Received | | | | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | | | | |
| SUBTOTAL Section B — This Page | | | | | | 325 |
| TOTAL of additional Section B Pages | | | | | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | | | | | 326223 |

Section B ADDITIONAL PAGE 151 **of** 189

| | |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 Filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i> | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | |
|--|--|--|---|
| Last Name | | First | MI |
| Morin | | Russell | |
| Residential Street Address | | City | State Zip Code |
| 495 Brimfield Rd | | Wethersfield | CT 06109 |
| Principal Occupation | | Name of Employer | |
| Union Rep | | CEUI | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 250 |
| Last Name | | First | MI |
| Secin | | Ana | |
| Residential Street Address | | City | State Zip Code |
| 61 Church St | | East Hartford | CT 06108 |
| Principal Occupation | | Name of Employer | |
| | | Faro Restaurant | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/28/23 | 100 |

Amount of Contribution
250

Amount of Contribution
100

| | | | |
|--|--|--|---|
| Last Name | | First | MI |
| Vega | | Kevin | |
| Residential Street Address | | City | State Zip Code |
| 25 Pawtucket St | | Hartford | CT 06114 |
| Principal Occupation | | Name of Employer | |
| Supervisor | | SNG | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/31/23 | 100 |

Amount of Contribution
100

| | | |
|---|--|--------|
| SUBTOTAL Section B — This Page | | 450 |
| TOTAL of additional Section B Pages | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | | 326223 |

Section B ADDITIONAL PAGE 152 of 189

| | | |
|---|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT |
| Fonfara for Hartford | | April 10 Filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | \$ 1513 |
| SUBTOTAL SECTION A | | |

B. Itemized Contributions from Individuals

| | | | |
|--|--|--|---|
| Last Name | | First | MI |
| Moran | | Hector | |
| Residential Street Address | | City | State Zip Code |
| 371 Franklin Ave | | Hartford | CT 06114 |
| Principal Occupation | | Name of Employer | |
| | | State of CT | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/29/23 | 100 |
| Last Name | | First | MI |
| Potter | | William | |
| Residential Street Address | | City | State Zip Code |
| 119 Dale Rd | | Wethersfield | CT 06109 |
| Principal Occupation | | Name of Employer | |
| Para Professional | | Retired/BOE Wethersfield | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 125 |

| | | | |
|--|--|--|---|
| Last Name | | First | MI |
| Szepts | | Hollis | |
| Residential Street Address | | City | State Zip Code |
| 260 France St | | Rocky Hill | CT 06067 |
| Principal Occupation | | Name of Employer | |
| Retired | | Retired | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 100 |

| | | |
|--|--|--------|
| SUBTOTAL Section B — This Page | | 325 |
| TOTAL of additional Section B Pages | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 |

Section B ADDITIONAL PAGE 153 **of** 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | | |
|--|--|--|-----------------------|-------------------------|----------|
| Last Name | | First | | MI | |
| Antonacci | | Christopher | | | |
| Residential Street Address | | | City | State | Zip Code |
| 135 Raymond Drive | | | Hampton | MA | 01036 |
| Principal Occupation | | | Name of Employer | | |
| Attorney | | | USA Waste & Recycling | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | 1000 | |
| 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: | | Aggregate Contributions | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | | 1000 | |
| Method of Contribution: | | | Date Received | | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | 3/28/23 | | |

| | | | | | |
|--|--|--|------------------|-------------------------|----------|
| Last Name | | First | | MI | |
| Antonacci | | Guy | | | |
| Residential Street Address | | | City | State | Zip Code |
| 87 Brittany Ln | | | Somers | CT | 06071 |
| Principal Occupation | | | Name of Employer | | |
| | | | Great Horse | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | 1000 | |
| 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: | | Aggregate Contributions | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | | 1000 | |
| Method of Contribution: | | | Date Received | | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | 3/29/23 | | |

| | | | | | |
|--|--|--|------------------|-------------------------|----------|
| Last Name | | First | | MI | |
| Arroyo | | Ramon | | | |
| Residential Street Address | | | City | State | Zip Code |
| 97 Amity St | | | Hartford | CT | 06106 |
| Principal Occupation | | | Name of Employer | | |
| Social Worker Supervisor | | | Retired | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | 300 | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E _____ | | 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: | | Aggregate Contributions | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | | 300 | |
| Method of Contribution: | | | Date Received | | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | 3/22/23 | | |

| | |
|---|--------|
| SUBTOTAL Section B — This Page | 2300 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <small>(Enter total on Line 13, Column A of Summary Page Totals)</small> | 326223 |

Section B ADDITIONAL PAGE 154 of 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | |
|--|--|--|-------------------------|------------------------|
| Last Name | | First | MI | |
| Morrin Bello | | Amy | | |
| Residential Street Address | | City | State | Zip Code |
| 311 Hartford Ave | | Wethersfield | CT | 06109 |
| Principal Occupation | | Name of Employer | | |
| Admin Asst | | Wesleyan University | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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: | | 100 |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 100 | |

| | | | | |
|--|--|--|-------------------------|------------------------|
| Last Name | | First | MI | |
| Antonacci | | Frank | | |
| Residential Street Address | | City | State | Zip Code |
| 100 Maple St | | Somer | CT | 06072 |
| Principal Occupation | | Name of Employer | | |
| Executive | | Self--USA | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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: | | 1000 |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 1000 | |

| | | | | |
|--|--|--|-------------------------|------------------------|
| Last Name | | First | MI | |
| Bradley | | John | | |
| Residential Street Address | | City | State | Zip Code |
| 140 Huyshope Ave Apt 502 | | Hartford | CT | 06106 |
| Principal Occupation | | Name of Employer | | |
| Atty | | Halloran & Sage | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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: | | 100 |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 100 | |

| | | |
|--|--|--------|
| SUBTOTAL Section B — This Page | | 1200 |
| TOTAL of additional Section B Pages | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 |

Section B ADDITIONAL PAGE 155 of 189

| | | | |
|--|--|--|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | First | |
| Brown | | Cynthia | |
| Residential Street Address | | City | |
| 32 Foote Path Ln | | Wethersfield | |
| Principal Occupation | | Name of Employer | |
| Retired | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E _____ | | 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 100 |
| Last Name | | First | |
| Antonacci | | Matthew | |
| Residential Street Address | | City | |
| 20 Pinney Rd | | Somers | |
| Principal Occupation | | Name of Employer | |
| Logistics Manager | | USA Hauling & Recycling | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E _____ | | 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/27/23 | 1000 |
| Last Name | | First | |
| Conneely | | Martha | |
| Residential Street Address | | City | |
| 12 Fairmont St | | Wethersfield | |
| Principal Occupation | | Name of Employer | |
| | | Riverfront Recapture | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E _____ | | 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 250 |
| SUBTOTAL Section B — This Page | | 1350 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 | |

Section B ADDITIONAL PAGE 156 **of** 189

| | |
|--|-----------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i> | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i> | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | |
|--|--|--|-------------------------|------------------------|
| Last Name | | First | MI | |
| Antonacci | | Phillip | | |
| Residential Street Address | | City | State | Zip Code |
| 171 Billings Rd | | Somers | CT | 06071 |
| Principal Occupation | | Name of Employer | | |
| Race Horse Trainer | | Lindy Farms | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> | | 1000 |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/29/23 | 1000 | |

| | | | | |
|--|--|--|-------------------------|------------------------|
| Last Name | | First | MI | |
| Antonacci | | Frank | | |
| Residential Street Address | | City | State | Zip Code |
| 137 Billings Rd | | 06071 | CT | 06071 |
| Principal Occupation | | Name of Employer | | |
| Owner | | Self--USA | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> | | 1000 |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/29/23 | 1000 | |

| | | | | |
|---|--|--|-------------------------|------------------------|
| Last Name | | First | MI | |
| Granato | | Barbara | | |
| Residential Street Address | | City | State | Zip Code |
| 51 Golf Rd | | Wethersfield | CT | 06109 |
| Principal Occupation | | Name of Employer | | |
| Teacher | | Retired BOE | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> | | 100 |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 100 | |

| | | |
|---|--|--------|
| SUBTOTAL Section B — This Page | | 2100 |
| TOTAL of additional Section B Pages | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | | 326223 |

Section B ADDITIONAL PAGE 157 **of** 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| B. Itemized Contributions from Individuals | |

| | | | | | |
|---|---|---|--------------------------------|--|---|
| Last Name Greenblatt | First Cynthia | MI | | | |
| Residential Street Address 35 Broad St | City Wethersfield | State CT | Zip Code 06109 | | |
| Principal Occupation | Name of Employer Retired | | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | | | Amount of Contribution 400 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | | | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/22/23 | Aggregate Contributions 400 | | |

| | | | | | |
|---|---|---|--------------------------------|--|---|
| Last Name Greenblatt | First Howard | MI | | | |
| Residential Street Address 35 Broad St | City Wethersfield | State CT | Zip Code 06109 | | |
| Principal Occupation | Name of Employer Retired | | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | | | Amount of Contribution 400 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | | | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/22/23 | Aggregate Contributions 400 | | |

| | | | | | |
|--|---|---|---------------------------------|--|---|
| Last Name Antonacci | First Jerry | MI | | | |
| Residential Street Address 319 Maple St | City Somers | State CT | Zip Code 06071 | | |
| Principal Occupation Owner | Name of Employer Self--USA | | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | | | Amount of Contribution 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | | | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Method of Contribution: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/27/23 | Aggregate Contributions 1000 | | |

| | |
|---|--------|
| SUBTOTAL Section B — This Page | 1800 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | 326223 |

Section B ADDITIONAL PAGE 158 of 189

| | | | |
|--|--|--|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | First | MI |
| Lesser | | Kenneth | |
| Residential Street Address | | City | State Zip Code |
| 8 Hawthorn Way | | Wethersfield | CT 06109 |
| Principal Occupation | | Name of Employer | |
| | | UPS | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | 100 |
| 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/22/23 | 100 |
| Last Name | | First | MI |
| Ariola | | Thomas | |
| Residential Street Address | | City | State Zip Code |
| 56 Chase Rd | | Middlebury | CT 06762 |
| Principal Occupation | | Name of Employer | |
| Accountant | | Self-employed | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | 250 |
| 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/27/23 | 250 |
| Last Name | | First | MI |
| Arroyo | | Ramon | |
| Residential Street Address | | City | State Zip Code |
| 97 Amity St | | Hartford | CT 06106 |
| Principal Occupation | | Name of Employer | |
| Social Worker | | Retired | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | 300 |
| 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/29/23 | 700 |
| SUBTOTAL Section B — This Page | | 650 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <small>(Enter total on Line 13, Column A of Summary Page Totals)</small> | | 326223 | |

Section B ADDITIONAL PAGE 159 **of** 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | |
|---|---|--|---|----|
| Last Name Lantigua | First Milagros | State CT | Zip Code 06042 | MI |
| Residential Street Address 39 Harlan St | | City Manchester | | |
| Principal Occupation Cashier | | Name of Employer El Merro Supermarket | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 1000 | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # B | 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="radio"/> Executive <input type="radio"/> Legislative | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/11/23 | Aggregate Contributions 1000 | |
| Last Name Fortunato | First Christine | State CT | Zip Code 06109 | MI |
| Residential Street Address 28 Fairmont St | | City Wethersfield | | |
| Principal Occupation Manager | | Name of Employer State of CT | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 100 | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E | 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="radio"/> Executive <input type="radio"/> Legislative | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/22/23 | Aggregate Contributions | |
| Last Name Urbanik | First George | State CT | Zip Code 06109 | MI |
| Residential Street Address 2 Wilcox St | | City Wethersfield | | |
| Principal Occupation Retired | | Name of Employer Retired | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 100 | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # E | 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="radio"/> Executive <input type="radio"/> Legislative | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/22/23 | Aggregate Contributions 100 | |

| | |
|---|--------|
| SUBTOTAL Section B — This Page | 1200 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | 326223 |

Section B ADDITIONAL PAGE 160 of 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | | |
|--|--|--|-------------------------|--|------------------------|
| Last Name | | First | State | Zip Code | MI |
| Khan | | Rashid | CT | 06067 | |
| Residential Street Address | | City | | | |
| 57 Boulder Dr | | Rocky Hill | | | |
| Principal Occupation | | Name of Employer | | | |
| Self-employed--manager | | Mini Mart LLC Self-employed | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution |
| | | | | | 500 |
| Is this contribution associated with an event reported in Section L1? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If 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="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>A</u> | | <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/15/23 | 500 | | |

| | | | | | |
|--|--|--|-------------------------|--|------------------------|
| Last Name | | First | State | Zip Code | MI |
| Rahman | | Saeed | CT | 06111 | |
| Residential Street Address | | City | | | |
| 36 Bushy Hill Dr | | Newington | | | |
| Principal Occupation | | Name of Employer | | | |
| | | Owner | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution |
| | | | | | 1000 |
| Is this contribution associated with an event reported in Section L1? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If 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="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>A</u> | | <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/15/23 | 1000 | | |

| | | | | | |
|--|--|--|-------------------------|--|------------------------|
| Last Name | | First | State | Zip Code | MI |
| Aslam | | Muhammad | CT | 06489 | |
| Residential Street Address | | City | | | |
| 27 Brandywine Pl | | Southington | | | |
| Principal Occupation | | Name of Employer | | | |
| K. Bros Inc Store Manager | | K Bros Inc (Gulf Smoke) | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution |
| | | | | | 500 |
| Is this contribution associated with an event reported in Section L1? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If 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="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>A</u> | | <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/28/23 | 500 | | |

| | | |
|---|--|--------|
| SUBTOTAL Section B — This Page | | 2000 |
| TOTAL of additional Section B Pages | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 |

Section B ADDITIONAL PAGE 161 **of** 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | |
|--|--|--|-------------------------|
| Last Name | | First | MI |
| Hafeez | | Farzana | |
| Residential Street Address | | City | State Zip Code |
| 10 Ramblewood Dr | | Rocky Hill | CT 06067 |
| Principal Occupation | | Name of Employer | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? | | Is contributor a principal of a state contractor or prospective state contractor? | |
| <input checked="" type="radio"/> Yes <input type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>A</u> | | If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/15/23 | 1000 |
| Last Name | | First | MI |
| Mirza | | Hafeez | |
| Residential Street Address | | City | State Zip Code |
| 10 Ramblewood Dr | | Rocky Hill | CT 06067 |
| Principal Occupation | | Name of Employer | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>A</u> | | If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/15/23 | 500 |

| | | | |
|--|--|--|-------------------------|
| Last Name | | First | MI |
| Tanveer | | Sulman | |
| Residential Street Address | | City | State Zip Code |
| 194 Hang Dog Ln | | Wethersfield | CT 06109 |
| Principal Occupation | | Name of Employer | |
| Data Analyst | | Self Employed--675 Stay LLC | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>A</u> | | If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/29/23 | 1000 |

| | | |
|--|--|--------|
| SUBTOTAL Section B — This Page | | 2500 |
| TOTAL of additional Section B Pages | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 |

Section B ADDITIONAL PAGE 162 of 189

| | | | |
|--|--|--|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | First | |
| Hodzic | | Bahira | |
| Residential Street Address | | City | |
| 271 Linnmoore St | | Hartford | |
| Principal Occupation | | Name of Employer | |
| Machine Operator | | Broadridge | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>C</u> | | If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/18/23 | |
| | | Aggregate Contributions | |
| | | 100 | |
| Last Name | | First | |
| Hodzic | | Samir | |
| Residential Street Address | | City | |
| 271 Linnmoore St | | Hartford | |
| Principal Occupation | | Name of Employer | |
| Truck Driver | | S&H Transport LLC | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>C</u> | | If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/18/23 | |
| | | Aggregate Contributions | |
| | | 100 | |
| Last Name | | First | |
| Kuljancic | | Berina | |
| Residential Street Address | | City | |
| 60 Prospect St | | Wethersfield | |
| Principal Occupation | | Name of Employer | |
| R.N. | | Hartford Hospital | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>C</u> | | If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | |
| <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/18/23 | |
| | | Aggregate Contributions | |
| | | 100 | |
| SUBTOTAL Section B — This Page | | 300 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 | |

Section B ADDITIONAL PAGE 161 of 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | |
|----------------------------|------------------|-------|----------|
| Last Name | First | State | Zip Code |
| Hafeez | Farzana | CT | 06067 |
| Residential Street Address | City | MI | |
| 10 Ramblewood Dr | Rocky Hill | | |
| Principal Occupation | Name of Employer | | |

| | | | | |
|--|---|--|---|-------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution |
| Is this contribution associated with an event reported in Section L1? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If yes, indicate which branch or branches of government the contract is with: | <input type="radio"/> Executive <input type="radio"/> Legislative | 1000 |
| Method of Contribution: | Date Received | | | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/15/23 | | | 1000 |

| | | | |
|----------------------------|------------------|-------|----------|
| Last Name | First | State | Zip Code |
| Mirza | Hafeez | CT | 06067 |
| Residential Street Address | City | MI | |
| 10 Ramblewood Dr | Rocky Hill | | |
| Principal Occupation | Name of Employer | | |

| | | | | |
|--|---|--|---|-------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution |
| Is this contribution associated with an event reported in Section L1? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If yes, indicate which branch or branches of government the contract is with: | <input type="radio"/> Executive <input type="radio"/> Legislative | 500 |
| Method of Contribution: | Date Received | | | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/15/23 | | | 500 |

| | | | |
|----------------------------|-----------------------------|-------|----------|
| Last Name | First | State | Zip Code |
| Tanveer | Sulman | CT | 06109 |
| Residential Street Address | City | MI | |
| 194 Hang Dog Ln | Wethersfield | | |
| Principal Occupation | Name of Employer | | |
| Data Analyst | Self Employed--675 Stay LLC | | |

| | | | | |
|--|---|--|---|-------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution |
| Is this contribution associated with an event reported in Section L1? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If yes, indicate which branch or branches of government the contract is with: | <input type="radio"/> Executive <input type="radio"/> Legislative | 1000 |
| Method of Contribution: | Date Received | | | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/29/23 | | | 1000 |

| | |
|--|--------|
| SUBTOTAL Section B — This Page | 2500 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | 326223 |

Section B ADDITIONAL PAGE 163 **of** 189

| | |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |

| | |
|--|--------------------------------------|
| A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i> | SUBTOTAL SECTION A \$ 1513 |
|--|--------------------------------------|

B. Itemized Contributions from Individuals

| | | | | |
|---|---|--------------------------------------|---|----|
| Last Name Kuljancic | First Almedin | State CT | Zip Code 06109 | MI |
| Residential Street Address 60 Prospect St | | City Wethersfield | | |
| Principal Occupation Security Supervisor | | Name of Employer Allied Universal | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 100 | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>C</u> | 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="radio"/> Executive <input type="radio"/> Legislative | | <input checked="" type="radio"/> Yes <input type="radio"/> No | |
| Method of Contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/18/23 | Aggregate Contributions 100 | |

| | | | | |
|---|---|---------------------------------------|---|----|
| Last Name Muminovic | First Jasna | State CT | Zip Code 06067 | MI |
| Residential Street Address 50 Old Main St | | City Rocky Hill | | |
| Principal Occupation Marketing | | Name of Employer Juniper Home Care | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 100 | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>C</u> | 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="radio"/> Executive <input type="radio"/> Legislative | | <input checked="" type="radio"/> Yes <input type="radio"/> No | |
| Method of Contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/18/23 | Aggregate Contributions 100 | |

| | | | | |
|---|---|---|---|----|
| Last Name Muminovic | First Mikzet | State CT | Zip Code 06067 | MI |
| Residential Street Address 50 Old Main St | | City Rocky Hill | | |
| Principal Occupation Hispanic Health Council | | Name of Employer Hispanic Health Council | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 100 | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>C</u> | 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="radio"/> Executive <input type="radio"/> Legislative | | <input checked="" type="radio"/> Yes <input type="radio"/> No | |
| Method of Contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/18/23 | Aggregate Contributions 100 | |

| | |
|---|--------|
| SUBTOTAL Section B — This Page | 300 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | 326223 |

Section B ADDITIONAL PAGE 164 of 189

| | | | |
|--|--|---|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | MI | |
| Paraganlija | | Fadila | |
| Residential Street Address | | City | State Zip Code |
| 65 Chester St | | Hartford | CT 06114 |
| Principal Occupation | | Name of Employer | |
| | | Homemaker | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | Amount of Contribution | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | 100 | |
| If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? | | If yes, indicate which branch or branches of government the contract is with: | |
| <input checked="" type="radio"/> Yes <input type="radio"/> No | | <input type="radio"/> Executive <input checked="" type="radio"/> Legislative | |
| If yes, list Event # <u>C</u> | | Date Received | Aggregate Contributions |
| Method of Contribution: | | 3/18/23 | 100 |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | |
| Last Name | | MI | |
| Paraganlija | | Samir | |
| Residential Street Address | | City | State Zip Code |
| 65 Chester St | | Hartford | CT 06114 |
| Principal Occupation | | Name of Employer | |
| Gutter Inst. | | Self Employed | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | Amount of Contribution | |
| <input checked="" type="radio"/> Yes <input type="radio"/> No | | 100 | |
| If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? | | If yes, indicate which branch or branches of government the contract is with: | |
| <input checked="" type="radio"/> Yes <input type="radio"/> No | | <input type="radio"/> Executive <input checked="" type="radio"/> Legislative | |
| If yes, list Event # <u>C</u> | | Date Received | Aggregate Contributions |
| Method of Contribution: | | 3/18/23 | 100 |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | |
| Last Name | | MI | |
| Sejfic | | Samel | |
| Residential Street Address | | City | State Zip Code |
| 134 Chester St | | Hartford | CT 06114 |
| Principal Occupation | | Name of Employer | |
| Owner | | MSM Transport | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | Amount of Contribution | |
| <input checked="" type="radio"/> Yes <input type="radio"/> No | | 100 | |
| If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? | | If yes, indicate which branch or branches of government the contract is with: | |
| <input checked="" type="radio"/> Yes <input type="radio"/> No | | <input type="radio"/> Executive <input checked="" type="radio"/> Legislative | |
| If yes, list Event # <u>C</u> | | Date Received | Aggregate Contributions |
| Method of Contribution: | | 3/19/23 | 100 |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | |
| SUBTOTAL Section B — This Page | | 300 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 | |

Section B ADDITIONAL PAGE 165 of 189

| | |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i> | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | |
|--|--|--|-------------------------|------------------------|
| Last Name | First | State | Zip Code | |
| Amodeo | April | CT | 06033 | MI |
| Residential Street Address | | City | | |
| 18 SmithbrookTerr | | Glastonbury | | |
| Principal Occupation | | Name of Employer | | |
| Hairdresser | | Self-employed | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> | | 500 |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative <input checked="" type="radio"/> No | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/21/23 | 500 | |

| | | | | |
|--|--|--|-------------------------|------------------------|
| Last Name | First | State | Zip Code | |
| Beaudoin | Lisa | CT | 06067 | MI |
| Residential Street Address | | City | | |
| 12 Rocamora Rd | | Rocky Hill | | |
| Principal Occupation | | Name of Employer | | |
| Teacher | | Town of Avon | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> | | 1000 |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative <input checked="" type="radio"/> No | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/21/23 | 1000 | |

| | | | | |
|--|--|--|-------------------------|------------------------|
| Last Name | First | State | Zip Code | |
| Beaudoin | GT | CT | 06067 | MI |
| Residential Street Address | | City | | |
| 12 Rocamora Rd | | Rocky Hill | | |
| Principal Occupation | | Name of Employer | | |
| President | | Electrical Contractoy | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input type="radio"/> No | | |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> | | 1000 |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative <input checked="" type="radio"/> No | | |
| Method of Contribution: | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/21/23 | 1000 | |

| | |
|---|--------|
| SUBTOTAL Section B — This Page | 2500 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | 326223 |

Section B ADDITIONAL PAGE 166 of 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| B. Itemized Contributions from Individuals | |

| | | | | | |
|--|--|--|------------------|--|------------------------|
| Last Name | | First | | MI | |
| Boyle | | Kevin | | | |
| Residential Street Address | | | City | State | Zip Code |
| 10 Greenview | | | Middlefield | CT | 06455 |
| Principal Occupation | | | Name of Employer | | |
| Construction Manager | | | CE Floyd | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution |
| | | | | 200 | |
| Is this contribution associated with an event reported in Section L1? | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>D</u> | | If yes, indicate which branch or branches of government the contract is with: | | | |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| Method of Contribution: | | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | 3/21/23 | 200 | |

| | | | | | |
|--|--|--|--------------------------------|--|------------------------|
| Last Name | | First | | MI | |
| Conaci | | Francesco | | | |
| Residential Street Address | | | City | State | Zip Code |
| 295 Hampton Court | | | Newington | CT | 06111 |
| Principal Occupation | | | Name of Employer | | |
| Office Manager | | | T&T Electrical Contractors Inc | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution |
| | | | | 1000 | |
| Is this contribution associated with an event reported in Section L1? | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>D</u> | | If yes, indicate which branch or branches of government the contract is with: | | | |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| Method of Contribution: | | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | 3/21/23 | 1000 | |

| | | | | | |
|--|--|--|------------------|--|------------------------|
| Last Name | | First | | MI | |
| Citino | | Frank | | | |
| Residential Street Address | | | City | State | Zip Code |
| 387 Wells Rd | | | Wethersfield | CT | 06109 |
| Principal Occupation | | | Name of Employer | | |
| | | | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution |
| | | | | 1000 | |
| Is this contribution associated with an event reported in Section L1? | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| If yes, list Event # <u>D</u> | | If yes, indicate which branch or branches of government the contract is with: | | | |
| | | <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| Method of Contribution: | | | Date Received | Aggregate Contributions | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | 3/21/23 | 1000 | |

| | | |
|--|--|--------|
| SUBTOTAL Section B — This Page | | 2200 |
| TOTAL of additional Section B Pages | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 |

Section B ADDITIONAL PAGE 167 **of** 189

| | |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i> | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | |
|--|--|---|-------------------------|
| Last Name | | First | MI |
| Cristofaro | | Victor | |
| Residential Street Address | | City | State Zip Code |
| 87 Barry Place | | Rocky Hill | CT 06067 |
| Principal Occupation | | Name of Employer | |
| School Principal | | Hartford Public Schools | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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 |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> <u>D</u> | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/21/23 | 400 |
| Last Name | | First | MI |
| Downes | | Edward | |
| Residential Street Address | | City | State Zip Code |
| 40 Woodsedge 6A | | Newington | CT 06111 |
| Principal Occupation | | Name of Employer | |
| | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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 |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> <u>D</u> | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/21/23 | 100 |
| Last Name | | First | MI |
| Downes | | Stephen | |
| Residential Street Address | | City | State Zip Code |
| 250 Patton Dr | | Cheshire | CT 06410 |
| Principal Occupation | | Name of Employer | |
| Liquor Store Owner | | CT Beverage Mart | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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 |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> <u>D</u> | <input type="radio"/> Yes <input checked="" type="radio"/> No | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/21/23 | 500 |

| | |
|---|--------|
| SUBTOTAL Section B — This Page | 900 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | 326223 |

Section B ADDITIONAL PAGE 168 of 189

| | |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |

| | | |
|---|---------------------------|---------|
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | SUBTOTAL SECTION A | \$ 1513 |
|---|---------------------------|---------|

B. Itemized Contributions from Individuals

| | | | |
|---|---|--|---------------------------------|
| Last Name Elmer | | First John | MI |
| Residential Street Address 675 Newfield St Unit 4 | | City Middletown | State CT Zip Code 06457 |
| Principal Occupation Comptroller | | Name of Employer T&T Electrical Contractors Inc | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>D</u> | 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="radio"/> Executive <input checked="" type="radio"/> Legislative | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/21/23 | Aggregate Contributions 1000 |

| | | | |
|---|---|-----------------------------------|--------------------------------|
| Last Name Filomena | | First Daniel | MI |
| Residential Street Address 1178 Silas Deane Hwy | | City Wethersfield | State CT Zip Code 06109 |
| Principal Occupation Contractor | | Name of Employer Acoustics Inc | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 250 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>D</u> | 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="radio"/> Executive <input checked="" type="radio"/> Legislative | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/21/23 | Aggregate Contributions 250 |

| | | | |
|---|---|----------------------------------|---------------------------------|
| Last Name Garcla | | First Jason | MI |
| Residential Street Address 53 Celentano Dr | | City Naugatuck | State CT Zip Code 06770 |
| Principal Occupation Prefabrication Design/BIM Coordinator | | Name of Employer T&T Electric | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>D</u> | 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="radio"/> Executive <input checked="" type="radio"/> Legislative | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/21/23 | Aggregate Contributions 1000 |

| | |
|--|--------|
| SUBTOTAL Section B — This Page | 2250 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | 326223 |

Section B ADDITIONAL PAGE 169 of 189

| | | | |
|--|--|--|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | First | MI |
| Cronin Hughes | | Jean | |
| Residential Street Address | | City | State Zip Code |
| 88 Sheffield St | | Old Saybrook | CT 06475 |
| Principal Occupation | | Name of Employer | |
| Lobbyist | | Hughes & Cronin | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input checked="" type="radio"/> Yes <input type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input checked="" type="radio"/> Yes <input type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/21/23 | 1000 |
| Last Name | | First | MI |
| Barbarotta | | Alfonso | |
| Residential Street Address | | City | State Zip Code |
| 28 Unity Dr | | Trumbull | CT 06611 |
| Principal Occupation | | Name of Employer | |
| Lighting Specialist | | Allphase | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input checked="" type="radio"/> Yes <input type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input checked="" type="radio"/> Yes <input type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/28/23 | 1000 |
| Last Name | | First | MI |
| Barela | | Kenneth | |
| Residential Street Address | | City | State Zip Code |
| 1212 Main St | | Hartford | CT 06103 |
| Principal Occupation | | Name of Employer | |
| CEO | | Hispanic Health Council | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input checked="" type="radio"/> Yes <input type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input type="radio"/> No | 150 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input checked="" type="radio"/> Yes <input type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/28/23 | 150 |
| SUBTOTAL Section B — This Page | | | 2150 |
| TOTAL of additional Section B Pages | | | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | | 326223 |

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| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | | | | |
|--|--|--|---------------|--|------------------|---|-------------------------|
| Last Name | | First | State | | Zip Code | Amount of Contribution | |
| Misseri | | Paul | CT | | 06109 | | 100 |
| Residential Street Address | | | City | | Name of Employer | | |
| 78 Two Rod Highway | | | Wethersfield | | Self-employed | | |
| Principal Occupation | | | Date Received | | | | Aggregate Contributions |
| | | | 3/21/23 | | | | 100 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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? | | 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | D _____ | | <input type="radio"/> Executive <input type="radio"/> Legislative <input checked="" type="radio"/> No | |
| Method of Contribution: | | | Date Received | | | | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | 3/21/23 | | | | 100 |

| | | | | | | | |
|--|--|--|---------------|--|------------------|---|-------------------------|
| Last Name | | First | State | | Zip Code | Amount of Contribution | |
| Nicotera | | Frank | CT | | 06109 | | 250 |
| Residential Street Address | | | City | | Name of Employer | | |
| 179 Griswold Rd | | | Wethersfield | | | | |
| Principal Occupation | | | Date Received | | | | Aggregate Contributions |
| | | | 3/21/23 | | | | 250 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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? | | 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | D _____ | | <input type="radio"/> Executive <input type="radio"/> Legislative <input checked="" type="radio"/> No | |
| Method of Contribution: | | | Date Received | | | | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | 3/21/23 | | | | 250 |

| | | | | | | | |
|---|--|--|---------------|--|------------------------------|---|-------------------------|
| Last Name | | First | State | | Zip Code | Amount of Contribution | |
| Parente | | Ciro | CT | | 06790 | | 1000 |
| Residential Street Address | | | City | | Name of Employer | | |
| 200 Chestnut Hill Rd | | | Torrington | | T&T Electric Contractors Inc | | |
| Principal Occupation | | | Date Received | | | | Aggregate Contributions |
| Service Manager | | | 3/21/23 | | | | 1000 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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? | | 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | D _____ | | <input type="radio"/> Executive <input type="radio"/> Legislative <input checked="" type="radio"/> No | |
| Method of Contribution: | | | Date Received | | | | Aggregate Contributions |
| <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | 3/21/23 | | | | 1000 |

| | |
|--|--------|
| SUBTOTAL Section B — This Page | 1350 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | 326223 |

Section B ADDITIONAL PAGE 171 of 189

| | |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |

| | | |
|---|---------------------------|---------|
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | SUBTOTAL SECTION A | \$ 1513 |
|---|---------------------------|---------|

B. Itemized Contributions from Individuals

| | | |
|--|--|-------------------------|
| Last Name | First | MI |
| Richloff | Steven | |
| Residential Street Address | City | State |
| 13 Hamilton Court | Enfield | CT |
| Principal Occupation | Name of Employer | Zip Code |
| Project Manager | T&T Electrical Contractors Inc. | 06082 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>D</u> | 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/21/23 | 1000 |

| | | |
|--|--|-------------------------|
| Last Name | First | MI |
| Sala | Salvatore | |
| Residential Street Address | City | State |
| 21 Garfield Rd | Rocky Hill | CT |
| Principal Occupation | Name of Employer | Zip Code |
| Owner | S&S Centerless Grinding | 06067 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | 500 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>D</u> | 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/21/23 | 500 |

| | | |
|---|--|-------------------------|
| Last Name | First | MI |
| Traina | Sebastiano | |
| Residential Street Address | City | State |
| 83 School House Crossing | Wethersfield | CT |
| Principal Occupation | Name of Employer | Zip Code |
| | | 06109 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | 500 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>D</u> | 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/21/23 | 500 |

| | |
|--|--------|
| SUBTOTAL Section B — This Page | 2000 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | 326223 |

Section B ADDITIONAL PAGE 172 of 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | |
|--|--|-------------------------|-------------------------------------|----|
| Last Name | First | State | Zip Code | MI |
| Lazowski | Alan | CT | 06105 | |
| Residential Street Address | City | | | |
| 170 Scarborough St | Hartford | | | |
| Principal Occupation | Name of Employer | | | |
| Chairman & CEO | LAZ Parking | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> No | <input checked="" type="radio"/> No | | 1000 | |
| Is this contribution associated with an event reported in Section L1? | Is contributor a principal of a state contractor or prospective state contractor? | | <input checked="" type="radio"/> No | |
| <input checked="" type="radio"/> No | If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| If yes, list Event # B | Date Received | Aggregate Contributions | | |
| | 3/11/23 | 1000 | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | | |

| | | | | |
|--|--|-------------------------|-------------------------------------|----|
| Last Name | First | State | Zip Code | MI |
| Collins | Sean | GA | 30004 | |
| Residential Street Address | City | | | |
| 15405Thompson Way | Milton | | | |
| Principal Occupation | Name of Employer | | | |
| Lobbyist | | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> No | <input checked="" type="radio"/> No | | 1000 | |
| Is this contribution associated with an event reported in Section L1? | Is contributor a principal of a state contractor or prospective state contractor? | | <input checked="" type="radio"/> No | |
| <input checked="" type="radio"/> No | If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| If yes, list Event # | Date Received | Aggregate Contributions | | |
| | 3/15/23 | | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | | |

| | | | | |
|---|--|-------------------------|-------------------------------------|----|
| Last Name | First | State | Zip Code | MI |
| Schiessl | Carl | CT | 06096 | |
| Residential Street Address | City | | | |
| 93 Raymond Rd | Windsor Locks | | | |
| Principal Occupation | Name of Employer | | | |
| Senior Director, Regulatory Advocacy | Connecticut Hospital Association | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> No | <input checked="" type="radio"/> No | | 250 | |
| Is this contribution associated with an event reported in Section L1? | Is contributor a principal of a state contractor or prospective state contractor? | | <input checked="" type="radio"/> No | |
| <input checked="" type="radio"/> No | If yes, indicate which branch or branches of government the contract is with: <input type="radio"/> Executive <input type="radio"/> Legislative | | | |
| If yes, list Event # | Date Received | Aggregate Contributions | | |
| | | 250 | | |
| Method of Contribution: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | | | |

| | |
|--|--------|
| SUBTOTAL Section B — This Page | 2250 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | 326223 |

| | |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |

| | |
|---|--------------------------------------|
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | SUBTOTAL SECTION A \$ 1513 |
|---|--------------------------------------|

B. Itemized Contributions from Individuals

| | | | | |
|---|------------------|---|---------------------------------|------------------------------------|
| Last Name Hoffman | First Jeffrey | State CT | Zip Code 06107 | MI |
| Residential Street Address 85 Memorial Rd Unit 510 | | City West Hartford | | |
| Principal Occupation Co-chairman Hoffman Auto Group | | Name of Employer | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 1000 |
| 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: | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/21/23 | Aggregate Contributions 1000 | |

| | | | | |
|---|---------------|---|---------------------------------|------------------------------------|
| Last Name Denovellis | First Enzo | State CT | Zip Code 06067 | MI |
| Residential Street Address 156 Lavender Ln | | City Rocky Hill | | |
| Principal Occupation Business Owner | | Name of Employer Self | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 1000 |
| 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: | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/21/23 | Aggregate Contributions 1000 | |

| | | | | |
|--|--------------|---|--------------------------------|-----------------------------------|
| Last Name Messina | First Dan | State CT | Zip Code 06109 | MI |
| Residential Street Address 416 Old Reservoir Rd | | City Wethersfield | | |
| Principal Occupation Self | | Name of Employer Mason Contractor | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 250 |
| 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: | | |
| Method of Contribution: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received | Aggregate Contributions 250 | |

| | |
|---|--------|
| SUBTOTAL Section B — This Page | 2250 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | 326223 |

Section B ADDITIONAL PAGE 174 **of** 189

| | |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i> | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | |
|---|--------------------|-------------|-------------------|
| Last Name Carmon | First John | | MI |
| Residential Street Address PO Box 1099 | City Anna Maria | State FL | Zip Code 34216 |
| Principal Occupation | Name of Employer | | |

| | | |
|---|---|--------------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution 300 |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> <u>G</u> | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/30/23 |
| | | Aggregate Contributions 300 |

| | | | |
|--|--------------------------|-------------|-------------------|
| Last Name Cascio | First John | | MI |
| Residential Street Address 33 Colonial Dr | City Wethersfield | State CT | Zip Code 06109 |
| Principal Occupation Executive Director | Name of Employer CFDA | | |

| | | |
|---|---|-------------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution 50 |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> _____ | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/30/23 |
| | | Aggregate Contributions 50 |

| | | | |
|---|--------------------------------------|-------------|-------------------|
| Last Name Klarman | First Jeffrey | | MI |
| Residential Street Address 38 Parish Farm Rd | City Branford | State CT | Zip Code 06405 |
| Principal Occupation W.J. Clancy Memorial Home | Name of Employer Funeral Director | | |

| | | |
|--|---|--------------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution 250 |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> <u>G</u> | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: <input type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/30/23 |
| | | Aggregate Contributions 250 |

| | |
|---|--------|
| SUBTOTAL Section B — This Page | 600 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | 326223 |

Section B ADDITIONAL PAGE 175 of 189

| | | | |
|--|--|--|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | First | MI |
| Klett | | Janet | |
| Residential Street Address | | City | State Zip Code |
| 78 N Cove Rd | | Old Saybrook | CT 06475 |
| Principal Occupation | | Name of Employer | |
| R.N | | D'Esopo Funeral Chapel | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>G</u> | | 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="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/24/23 | 500 |
| Amount of Contribution | | 500 | |
| Last Name | | First | MI |
| Klett | | Michael | |
| Residential Street Address | | City | State Zip Code |
| 78 N Cove Rd | | Old Saybrook | CT 06475 |
| Principal Occupation | | Name of Employer | |
| Funeral Director | | D'Esopo Funeral Chapel | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>G</u> | | 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="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/24 | 500 |
| Amount of Contribution | | 500 | |
| Last Name | | First | MI |
| Lessard | | Lionel | |
| Residential Street Address | | City | State Zip Code |
| 34 Heritage Ln | | East Hartford | CT 06118 |
| Principal Occupation | | Name of Employer | |
| General Manager/Director | | D'Esopo Funeral Chapels Inc | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>G</u> | | 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="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/30/23 | 200 |
| Amount of Contribution | | 200 | |
| SUBTOTAL Section B — This Page | | 1000 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | | 326223 | |

Section B ADDITIONAL PAGE 176 **of** 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | | | |
|--|-----------------|---|-------------------|----|
| Last Name Paquette | First Nicole | State CT | Zip Code 06010 | MI |
| Residential Street Address 8 Strawberry Hill Rd | | City Bristol | | |
| Principal Occupation Funeral Director | | Name of Employer Alderson-Ford Funeral Home In | | |

| | | | | |
|---|--|--|--|-------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>G</u> | | 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="radio"/> Executive <input type="radio"/> Legislative | | 250 |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/30/23 | Aggregate Contributions 250 | |

| | | | | |
|--|------------------|-----------------------------|-------------------|----|
| Last Name Berger | First Jeffrey | State CT | Zip Code 06708 | MI |
| Residential Street Address 134 Gaylord Dr | | City Waterbury | | |
| Principal Occupation Retired | | Name of Employer Retired | | |

| | | | | |
|---|--|--|--|-------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | | 250 |
| Method of Contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/28/23 | Aggregate Contributions 250 | |

| | | | | |
|---|------------------|---------------------------------------|-------------------|----|
| Last Name Healis | First Anthony | State CT | Zip Code 06095 | MI |
| Residential Street Address 11 Ashley Rd | | City Windsor | | |
| Principal Occupation Real Estate Developer | | Name of Employer The Cloud Company | | |

| | | | | |
|---|--|--|--|-------------------------------|
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | | 250 |
| Method of Contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/29/23 | Aggregate Contributions 250 | |

| | |
|--|--------|
| SUBTOTAL Section B — This Page | 750 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | 326223 |

Section B ADDITIONAL PAGE 177 of 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | |
|--|--|-------------------------|
| Last Name | First | MI |
| Lopez | Andrea | |
| Residential Street Address | City | State |
| 132 Sherbrooke Ave | Hartford | CT |
| Principal Occupation | Name of Employer | Zip Code |
| | Retired | 06106 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/30/23 | 5 |
| Amount of Contribution | | 5 |

| | | |
|--|--|-------------------------|
| Last Name | First | MI |
| Lopez | Fidel | |
| Residential Street Address | City | State |
| 65 Eaton St Apt 109 | Hartford | CT |
| Principal Occupation | Name of Employer | Zip Code |
| | Retired | 06114 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/27/23 | 5 |
| Amount of Contribution | | 5 |

| | | |
|--|--|-------------------------|
| Last Name | First | MI |
| Calderon | Raquel | |
| Residential Street Address | City | State |
| 163 Adelaide St | Hartford | CT |
| Principal Occupation | Name of Employer | Zip Code |
| Educator | Hartford Public Schools | 06114 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/30/23 | 180 |
| Amount of Contribution | | 180 |

| | |
|--|--------|
| SUBTOTAL Section B — This Page | 190 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | 326223 |

Section B ADDITIONAL PAGE 178 of 189

| | | | |
|---|---|--|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name Fonfara | | First Beverly | MI |
| Residential Street Address 272 Linnmoore St | | City Hartford | State CT |
| Principal Occupation | | Name of Employer Retired | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 250 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/31/23 | Aggregate Contributions 250 |
| Last Name Fonfara | | First Stella | MI |
| Residential Street Address 272 Linnmoore | | City Hartford | State CT |
| Principal Occupation | | Name of Employer Retired | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/31/23 | Aggregate Contributions 1000 |
| Last Name Fonfara | | First Walter | MI |
| Residential Street Address 272 Linnmoore | | City Hartford | State CT |
| Principal Occupation Retired | | Name of Employer | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Method of Contribution: <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/31/23 | Aggregate Contributions 1000 |
| SUBTOTAL Section B — This Page | | 2250 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 | |

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| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| SUBTOTAL SECTION A | |

B. Itemized Contributions from Individuals

| | | |
|--|--|-------------------------|
| Last Name | First | MI |
| Hollander | Ross | |
| Residential Street Address | City | State Zip Code |
| 7 Kensington Park | Bloomfield | CT 06002 |
| Principal Occupation | Name of Employer | |
| Executive | Hartford Distributors Inc | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | 1000 |
| 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/30/23 | 1000 |

| | | |
|--|--|-------------------------|
| Last Name | First | MI |
| Jez | Christopher | |
| Residential Street Address | City | State Zip Code |
| 15 Lacabana Rd | Somers | CT 06071 |
| Principal Occupation | Name of Employer | |
| | Murphy Road Recycling | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | 1000 |
| 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input checked="" type="radio"/> Cash <input type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/29/23 | 1000 |

| | | |
|--|--|-------------------------|
| Last Name | First | MI |
| Arroyo | Ramon | |
| Residential Street Address | City | State Zip Code |
| 97 Amity St | Hartford | CT 06106 |
| Principal Occupation | Name of Employer | |
| Retired | Social Worker | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | 400 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # H _____ | 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="radio"/> Executive <input type="radio"/> Legislative | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/31/23 | 700 |

| | |
|--|--------|
| SUBTOTAL Section B — This Page | 2400 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | 326223 |

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| | | | |
|--|--|--|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | First | |
| Colan | | Miguel | |
| Residential Street Address | | City | |
| 30 Hawthorne Circle | | Rocky Hill | |
| Principal Occupation | | Name of Employer | |
| Chiropractor | | Connecticut Chiropractic Center | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>H</u> | | 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/31/23 | 250 |
| Last Name | | First | |
| Freeman | | Justin | |
| Residential Street Address | | City | |
| 90 Brainard Rd | | Hartford | |
| Principal Occupation | | Name of Employer | |
| Attorney | | Attorney | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>H</u> | | 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/31/23 | 1000 |
| Last Name | | First | |
| Helena | | Antonia | |
| Residential Street Address | | City | |
| 245 Sigourney St | | Hartford | |
| Principal Occupation | | Name of Employer | |
| Owner | | William Grocery | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Yes <input checked="" type="radio"/> No | |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # <u>H</u> | | 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/31/23 | 500 |
| SUBTOTAL Section B — This Page | | 1750 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326233 | |

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| | | | |
|--|--|--|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | First | |
| Lallier | | Russ | |
| Residential Street Address | | City | |
| 170 Church St | | Newington | |
| Principal Occupation | | Name of Employer | |
| | | All Waste Inc | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | Amount of Contribution | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | 1000 | |
| If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/29/23 | |
| | | Aggregate Contributions | |
| | | 1000 | |
| Last Name | | First | |
| Mozzicato | | Paolo | |
| Residential Street Address | | City | |
| 33 Oak Bl Rd | | Avon | |
| Principal Occupation | | Name of Employer | |
| | | Smith Brothers Insurance | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | Amount of Contribution | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | 250 | |
| If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/29/23 | |
| | | Aggregate Contributions | |
| | | 250 | |
| Last Name | | First | |
| Needleman | | Marc | |
| Residential Street Address | | City | |
| 5 Adams Rd | | Bloomfield | |
| Principal Occupation | | Name of Employer | |
| Attorney | | Law Offices of Marc N. Needleman | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | Amount of Contribution | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | 100 | |
| If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No | | <input type="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/30/23 | |
| | | Aggregate Contributions | |
| | | 100 | |
| SUBTOTAL Section B — This Page | | 1350 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 | |

| | | | |
|---|--|--|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name Paolillo | | First Alphonse | |
| Residential Street Address 151 Huntington Rd | | City New Haven | State CT |
| Principal Occupation Financial Advisor | | Name of Employer Royal Alliance | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/29/23 | Aggregate Contributions 100 |
| Last Name Quint | | First James | |
| Residential Street Address 49 Wilson St | | City Hartford | State CT |
| Principal Occupation Retired | | Name of Employer Retired | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/20/23 | Aggregate Contributions 500 |
| Last Name Sanchez | | First Jacqueline | |
| Residential Street Address 370 Freeman St | | City Hartford | State CT |
| Principal Occupation Banker | | Name of Employer Bank of America | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/29/23 | Aggregate Contributions 250 |
| SUBTOTAL Section B — This Page | | 850 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 | |

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| | | | |
|---|---|---|---|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i> | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i> | | SUBTOTAL SECTION A \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name Sandler | | First James | MI |
| Residential Street Address 800 Cottage Grove Rd | | City Bloomfield | State CT |
| Principal Occupation Attorney | | Name of Employer Sandler & Mara PC | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution 500 | |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> | <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/28/23 | Aggregate Contributions 500 |
| Last Name Calafiore | | First Joseph | MI |
| Residential Street Address 82 Sycamore Rd | | City West Hartford | State CT |
| Principal Occupation | | Name of Employer Alca CONstruction Co Inc | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution 1000 | |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> | <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/30/23 | Aggregate Contributions 1000 |
| Last Name Elliot | | First Douglas | MI |
| Residential Street Address 121 Broad St | | City Wethersfield | State CT |
| Principal Occupation | | Name of Employer Retired | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | Amount of Contribution 250 | |
| Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> | Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> | <input type="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/22/23 | Aggregate Contributions 250 |
| SUBTOTAL Section B — This Page | | 1750 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i> | | 326223 | |

Section B ADDITIONAL PAGE 184 **of** 186

| | | | |
|---|---|--|---------------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ | |
| B. Itemized Contributions from Individuals | | | |
| Last Name Hennessy | | First Matthew | MI |
| Residential Street Address 161 Tremont St | | City Hartford | State CT |
| Principal Occupation Managing Director | | Name of Employer Tremont Public Advisors | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 200 |
| 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="radio"/> Executive <input type="radio"/> Legislative | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/22/23 | Aggregate Contributions 200 |
| Last Name Hussain | | First Michael | MI |
| Residential Street Address 190 Shadow Lake Rd | | City Ridgefield | State CT |
| Principal Occupation | | Name of Employer GRHUSA Properties | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 1000 |
| 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="radio"/> Executive <input type="radio"/> Legislative | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/25/23 | Aggregate Contributions 1000 |
| Last Name Morin | | First Grace | MI |
| Residential Street Address 495 Brimfield Rd | | City Wethersfield | State CT |
| Principal Occupation Dental Assistant | | Name of Employer Thomsen Family Dentistry | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | | Amount of Contribution 200 |
| 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="radio"/> Executive <input type="radio"/> Legislative | | |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/27/23 | Aggregate Contributions 200 |
| SUBTOTAL Section B — This Page | | 1400 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 | |

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| | | | |
|--|--|--|-------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | First | MI |
| Clifford | | Michael | |
| Residential Street Address | | City | State Zip Code |
| 51 Treborough Dr | | West Hartford | CT 06117 |
| Principal Occupation | | Name of Employer | |
| | | | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/29/23 | 1000 |
| Last Name | | First | MI |
| Habesch | | Najib | |
| Residential Street Address | | City | State Zip Code |
| 101 Highland St | | Wethersfield | CT 06109 |
| Principal Occupation | | Name of Employer | |
| Civil Engineer | | Beta Group Inc. | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | 500 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/28/23 | 00 |
| Last Name | | First | MI |
| Jiminian | | Cristobal | |
| Residential Street Address | | City | State Zip Code |
| 227 Sisson Ave | | Hartford | CT 06106 |
| Principal Occupation | | Name of Employer | |
| Manager | | Cristina grocery | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Executive <input type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/30/23 | 1000 |
| SUBTOTAL Section B — This Page | | 2500 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 | |

| | | | |
|---|--|--|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name Ortiz | | First Carlos | MI |
| Residential Street Address 5 midland Rd | | City Windsor Locks | State CT |
| | | Zip Code 06096 | |
| Principal Occupation Owner | | Name of Employer | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| | | | Amount of Contribution 500 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | Date Received 3/30/23 | Aggregate Contributions 500 |
| Last Name Strong | | First Edris | MI |
| Residential Street Address 120 Fieldstone Drive | | City Windsor | State CT |
| | | Zip Code 06095 | |
| Principal Occupation Retired | | Name of Employer | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| | | | Amount of Contribution 1000 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | Date Received 3/30/23 | Aggregate Contributions 1000 |
| Last Name Romanik | | First Margaret | MI |
| Residential Street Address 355 Fairfield Ave | | City Hartford | State CT |
| | | Zip Code 06114 | |
| Principal Occupation Retired | | Name of Employer Retired | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| | | | Amount of Contribution 500 |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: | <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | Date Received 3/31/23 | Aggregate Contributions 500 |
| SUBTOTAL Section B — This Page | | 2000 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 | |

Section B ADDITIONAL PAGE 187 **of** 189

| | | | |
|---|--|--|---|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name Tyson | | First Patricia | MI |
| Residential Street Address 196 Duncaster Rd | | City Bloomfield | State CT Zip Code 06002 |
| Principal Occupation Retired | | Name of Employer Retired | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/30/23 | Aggregate Contributions 1000 |
| Last Name Parrott | | First Christopher | MI |
| Residential Street Address 971 Hopmeadow St | | City Simsbury | State CT Zip Code 06070 |
| Principal Occupation Manager | | Name of Employer Capitol Mix LLC | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/31/23 | Aggregate Contributions 500 |
| Last Name Zayas | | First Richard | MI |
| Residential Street Address 7 Hungerford St | | City Hartford | State CT Zip Code 06070 |
| Principal Occupation Lawyer | | Name of Employer Zayas Law | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | <input type="radio"/> Yes <input checked="" type="radio"/> No | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No |
| Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ | <input type="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Executive <input type="radio"/> Legislative |
| Method of Contribution: <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | Date Received 3/31/23 | Aggregate Contributions 500 |
| SUBTOTAL Section B — This Page | | 2000 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 | |

Section B ADDITIONAL PAGE 188 of 189

| | |
|---|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | \$ 1513 |
| B. Itemized Contributions from Individuals | |

| | | |
|--|--|-------------------------|
| Last Name | First | MI |
| Erlkson | Arthur | |
| Residential Street Address | City | State |
| PO Box 185716 | Hamden | CT |
| Principal Occupation | Name of Employer | Zip Code |
| Funeral Director | Beecher & Bennet Inc | 06518 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | 100 |
| 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="radio"/> Yes <input checked="" type="radio"/> No G | <input type="radio"/> Executive <input type="radio"/> Legislative <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/30/23 | 100 |

| | | |
|--|--|-------------------------|
| Last Name | First | MI |
| Jara | Darka | |
| Residential Street Address | City | State |
| 589 Nott St | Wethersfield | CT |
| Principal Occupation | Name of Employer | Zip Code |
| | | 08109 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | 700 |
| 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Executive <input type="radio"/> Legislative <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/30/23 | 700 |

| | | |
|--|--|-------------------------|
| Last Name | First | MI |
| Nedelcu | John | |
| Residential Street Address | City | State |
| 315 Woodland St | South Glastonbury | CT |
| Principal Occupation | Name of Employer | Zip Code |
| Optometrist | West End Eye Care | 06073 |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Yes <input checked="" type="radio"/> No | 100 |
| 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="radio"/> Yes <input checked="" type="radio"/> No | <input type="radio"/> Executive <input type="radio"/> Legislative <input checked="" type="radio"/> No | |
| Method of Contribution: | Date Received | Aggregate Contributions |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | 3/31/23 | 100 |

| | |
|--|--------|
| SUBTOTAL Section B — This Page | 900 |
| TOTAL of additional Section B Pages | 324710 |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | 326223 |

Section B ADDITIONAL PAGE 189 of 189

| | | | |
|--|--|--|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor) | | SUBTOTAL SECTION A | |
| | | \$ 1513 | |
| B. Itemized Contributions from Individuals | | | |
| Last Name | | First | |
| Lallier | | Colleen | |
| Residential Street Address | | City | |
| 14 Mulberry St | | Old Saybrook | |
| Principal Occupation | | State | |
| | | CT | |
| Name of Employer | | Zip Code | |
| | | 06475 | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | Amount of Contribution | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | 1000 | |
| If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No F | | <input type="radio"/> Executive <input checked="" type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/28/23 | |
| | | Aggregate Contributions | |
| | | 1000 | |
| Last Name | | First | |
| Saqad | | Khalid | |
| Residential Street Address | | City | |
| 61 Deerbrook Ln | | Southington | |
| Principal Occupation | | State | |
| | | CT | |
| Name of Employer | | Zip Code | |
| Five Star Food Mart | | 06489 | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | Amount of Contribution | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | 500 | |
| If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No A | | <input type="radio"/> Executive <input checked="" type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/30/23 | |
| | | Aggregate Contributions | |
| | | 500 | |
| Last Name | | First | |
| Khan | | Rashid | |
| Residential Street Address | | City | |
| 57 Boulder Dr | | Rocky Hill | |
| Principal Occupation | | State | |
| Owner | | CT | |
| Name of Employer | | Zip Code | |
| HBR Enterprises | | 06067 | |
| Is contributor a lobbyist, spouse, or dependent child of a lobbyist? | | Amount of Contribution | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No | | 500 | |
| If contribution is in excess of \$400 to a candidate 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="radio"/> Yes <input checked="" type="radio"/> 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="radio"/> Yes <input checked="" type="radio"/> No A | | <input type="radio"/> Executive <input checked="" type="radio"/> Legislative | |
| Method of Contribution: | | Date Received | |
| <input type="radio"/> Cash <input checked="" type="radio"/> Personal Check <input type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order | | 3/31/23 | |
| | | Aggregate Contributions | |
| | | 500 | |
| SUBTOTAL Section B — This Page | | 2000 | |
| TOTAL of additional Section B Pages | | 324710 | |
| TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals) | | 326223 | |

I. MONETARY RECEIPTS (Sections A—K)

| | | | | | | | |
|---|---|---|---|--|-------------------|--------------------------------|--|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i> | | | | | | TYPE OF REPORT | |
| C1. Contributions from Other Committees | | | | | | | |
| Name of Committee Cabrera for the People | | | | Name of Treasurer Sean Grace | | | |
| Address 852 Wintergreen Ave | | | Is this contribution associated with an event reported in Section L1? <input type="radio"/> Yes <input checked="" type="radio"/> No <i>If yes, list Event # _____</i> | | | Amount of Contribution 1000 | |
| City Hamden | State CT | Zip Code 06514 | Date Received 2/8/23 | Aggregate Contributions 1000 | | | |
| Name of Committee Third Street PAC | | | | Name of Treasurer Shirley Skyers-Thomas | | | |
| Address 8 Horseshoe Hill Rd | | | Is this contribution associated with an event reported in Section L1? <input type="radio"/> Yes <input checked="" type="radio"/> No <i>If yes, list Event # _____</i> | | | Amount of Contribution 1000 | |
| City Bethany | State CT | Zip Code 06524 | Date Received 2/9/23 | Aggregate Contributions 1000 | | | |
| Name of Committee Ten Town PAC | | | | Name of Treasurer Christopher Marino | | | |
| Address 334 Fairview Rd | | | Is this contribution associated with an event reported in Section L1? <input type="radio"/> Yes <input checked="" type="radio"/> No <i>If yes, list Event # _____</i> | | | Amount of Contribution 1000 | |
| City Westbrook | State CT | Zip Code 06498 | Date Received 3/10/23 | Aggregate Contributions 1000 | | | |
| C2. Reimbursements or Surplus Distributions from other Committees | | | | | | | |
| Name of Committee | | | | Name of Treasurer | | | |
| Address | | | City | | State | Zip Code | |
| Date Received | Expenditure # <i>(if applicable)</i> | Payment Type <input type="radio"/> Reimbursement for shared expense <input type="radio"/> Surplus Distribution | | | Amount of Receipt | | |
| Description | | | | | | | |
| Name of Committee | | | | Name of Treasurer | | | |
| Address | | | City | | State | Zip Code | |
| Date Received | Expenditure # <i>(if applicable)</i> | Payment Type <input type="radio"/> Reimbursement for shared expense <input type="radio"/> Surplus Distribution | | | Amount of Receipt | | |
| Description | | | | | | | |
| SUBTOTAL Section C — This Page | | | | | | | |
| TOTAL of additional Section C Pages | | | | | | | |
| TOTAL OF ALL COMMITTEE CONTRIBUTIONS AND RECEIPTS <i>(Sections C1 + C2) (Enter total on Line 14, Column A of Summary Page Totals)</i> | | | | | | | |

Section C1. ADDITIONAL PAGE 2 of 2

| | |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |

C1. Contributions from Other Committees

| | | | | | | |
|--------------------|-------|----------|---|-------------------------|--|------------------------|
| Name of Committee | | | | Name of Treasurer | | Amount of Contribution |
| Unite for Progress | | | | Kate Conetta | | |
| Address | | | Is this contribution associated with an event reported in Section L1? <input type="radio"/> Yes <input checked="" type="radio"/> No | | | 1000 |
| 4 Topfield Rd | | | If yes, list Event # _____ | | | |
| City | State | Zip Code | Date Received | Aggregate Contributions | | |
| Danbury | CT | 06811 | 3/25 | 1000 | | |

| | | | | | | |
|-------------------|-------|----------|---|-------------------------|--|------------------------|
| Name of Committee | | | | Name of Treasurer | | Amount of Contribution |
| Mohegan Sun PAC | | | | Charles Bunnell | | |
| Address | | | Is this contribution associated with an event reported in Section L1? <input type="radio"/> Yes <input checked="" type="radio"/> No | | | 1500 |
| 5 Crow Hill Rd | | | If yes, list Event # _____ | | | |
| City | State | Zip Code | Date Received | Aggregate Contributions | | |
| Uncasville | CT | 06382 | 3/31/23 | 1500 | | |

| | | | | | | |
|-------------------|-------|----------|---|-------------------------|--|------------------------|
| Name of Committee | | | | Name of Treasurer | | Amount of Contribution |
| | | | | | | |
| Address | | | Is this contribution associated with an event reported in Section L1? <input type="radio"/> Yes <input checked="" type="radio"/> No | | | |
| | | | If yes, list Event # _____ | | | |
| City | State | Zip Code | Date Received | Aggregate Contributions | | |
| | | | | | | |

C2. Reimbursements or Surplus Distributions from other Committees

| | | | | | | |
|-------------------|-------------------------------|--|------|-------------------|-------------------|-------------------|
| Name of Committee | | | | Name of Treasurer | | Amount of Receipt |
| | | | | | | |
| Address | | | City | State | Zip Code | |
| | | | | | | |
| Date Received | Expenditure # (if applicable) | Payment Type | | | Amount of Receipt | |
| | | <input type="radio"/> Reimbursement for shared expense <input checked="" type="radio"/> Surplus Distribution | | | | |
| Description | | | | | | |
| | | | | | | |

| | | | | | | |
|-------------------|-------------------------------|--|------|-------------------|-------------------|-------------------|
| Name of Committee | | | | Name of Treasurer | | Amount of Receipt |
| | | | | | | |
| Address | | | City | State | Zip Code | |
| | | | | | | |
| Date Received | Expenditure # (if applicable) | Payment Type | | | Amount of Receipt | |
| | | <input type="radio"/> Reimbursement for shared expense <input checked="" type="radio"/> Surplus Distribution | | | | |
| Description | | | | | | |
| | | | | | | |

SUBTOTAL Section C — This Page 2500

Section C1. ADDITIONAL PAGE 1 of 2

| | |
|--|-----------------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i> | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |

C1. Contributions from Other Committees

| | | | | | |
|-------------------------------|--------------|-----------------|--|--------------------------------|-------------------------------|
| Name of Committee | | | | Name of Treasurer | |
| AT&T Connecticut Employee PAC | | | | Donald McGregor | |
| Address | | | Is this contribution associated with an event reported in Section L1? | | Amount of Contribution |
| 2 Science Park 2nd Fl | | | <input type="radio"/> Yes <input checked="" type="radio"/> No <i>If yes, list Event # _____</i> | | |
| City | State | Zip Code | Date Received | Aggregate Contributions | |
| New Haven | CT | 06511 | 3/15/23 | 1000 | 1000 |

| | | | | | |
|--------------------------|--------------|-----------------|--|--------------------------------|-------------------------------|
| Name of Committee | | | | Name of Treasurer | |
| CFD PAC | | | | Thomas O'Brien | |
| Address | | | Is this contribution associated with an event reported in Section L1? | | Amount of Contribution |
| 24 Lincoln Ave | | | <input type="radio"/> Yes <input checked="" type="radio"/> No <i>If yes, list Event # _____</i> | | |
| City | State | Zip Code | Date Received | Aggregate Contributions | |
| Bristol | CT | 06010 | 2/23/23 | 1500 | 1500 |

| | | | | | |
|-------------------------------|--------------|-----------------|--|--------------------------------|-------------------------------|
| Name of Committee | | | | Name of Treasurer | |
| CT Union of Telephone Workers | | | | Paul Hongo | |
| Address | | | Is this contribution associated with an event reported in Section L1? | | Amount of Contribution |
| 3055 Dixwell Ave | | | <input type="radio"/> Yes <input checked="" type="radio"/> No <i>If yes, list Event # _____</i> | | |
| City | State | Zip Code | Date Received | Aggregate Contributions | |
| Hamden | CT | 06518 | 3/27/23 | 1000 | 1000 |

C2. Reimbursements or Surplus Distributions from other Committees

| | | | | | |
|--------------------------|--------------------------------------|--|-------------|--------------------------|-----------------|
| Name of Committee | | | | Name of Treasurer | |
| | | | | | |
| Address | | | City | State | Zip Code |
| | | | | | |
| Date Received | Expenditure # (if applicable) | Payment Type | | Amount of Receipt | |
| | | <input checked="" type="radio"/> Reimbursement for shared expense <input type="radio"/> Surplus Distribution | | | |
| Description | | | | | |
| | | | | | |

| | | | | | |
|--------------------------|--------------------------------------|---|-------------|--------------------------|-----------------|
| Name of Committee | | | | Name of Treasurer | |
| | | | | | |
| Address | | | City | State | Zip Code |
| | | | | | |
| Date Received | Expenditure # (if applicable) | Payment Type | | Amount of Receipt | |
| | | <input type="radio"/> Reimbursement for shared expense <input type="radio"/> Surplus Distribution | | | |
| Description | | | | | |
| | | | | | |

SUBTOTAL Section C — This Page 2150

I. MONETARY RECEIPTS (Sections A—K)

| | |
|---|-----------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i> | TYPE OF REPORT |
| Fonfara for Hartford | April 10 filing |

D. Loans Received this Period

| | | | | |
|---|----------------|---|-------------------|---|
| Name of Lender Rennye Leiler | | Source of Loan: <input type="radio"/> Bank <input type="radio"/> Candidate <input checked="" type="radio"/> Individual <input type="radio"/> Other Committee | | Date of Receipt 1/10/23 |
| Street Address 95 Tuttle Rd | City Durham | State CT | Zip Code 06422 | Is there a Cosigner or Guarantor of this loan? <input type="radio"/> Yes <input checked="" type="radio"/> No |
| Name of Cosigner/Guarantor <i>(if applicable)</i> | | | | Amount Received 500 |
| Street Address | City | State | Zip Code | |
| Name of Lender | | Source of Loan: <input type="radio"/> Bank <input type="radio"/> Candidate <input type="radio"/> Individual <input type="radio"/> Other Committee | | Date of Receipt |
| Street Address | City | State | Zip Code | Is there a Cosigner or Guarantor of this loan? <input type="radio"/> Yes <input type="radio"/> No |
| Name of Cosigner/Guarantor <i>(if applicable)</i> | | | | Amount Received |
| Street Address | City | State | Zip Code | |
| Name of Lender | | Source of Loan: <input type="radio"/> Bank <input type="radio"/> Candidate <input type="radio"/> Individual <input type="radio"/> Other Committee | | Date of Receipt |
| Street Address | City | State | Zip Code | Is there a Cosigner or Guarantor of this loan? <input type="radio"/> Yes <input type="radio"/> No |
| Name of Cosigner/Guarantor <i>(if applicable)</i> | | | | Amount Received |
| Street Address | City | State | Zip Code | |

TOTAL SECTION D

E. Receipts from Entities other than Individuals or Other Committees *(Referendum Committees ONLY)*

| | | | | |
|----------------|-------|----------|-------------------------|-----------------|
| Name of Entity | | | | |
| Street Address | | | Date Received | Amount Received |
| City | State | Zip Code | Aggregate Contributions | |
| Name of Entity | | | | |
| Street Address | | | Date Received | Amount Received |
| City | State | Zip Code | Aggregate Contributions | |
| Name of Entity | | | | |
| Street Address | | | Date Received | Amount Received |
| City | State | Zip Code | Aggregate Contributions | |

TOTAL SECTION E

II. EVENT ACTIVITY (Sections L1—L5)

| | | | | | |
|---|--------|---|---|----------|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | | TYPE OF REPORT | | |
| L1. Event Information | | | | | |
| Event # Date of Event | Letter | Description | Was this a fundraising event? | | |
| 3/16/23 | A | Grocery Owner Fundraiser at Asla Darbar | <input type="radio"/> Yes <input checked="" type="radio"/> No | | |
| Location: Street Address | | City | State | Zip Code | |
| 253 East St | | Plainville | CT | 06062 | |
| Subpart 1: (All Committees) | | | | | |
| Was this event hosted at a personal residence? | | | <input type="radio"/> Yes (If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.) | | |
| | | | <input checked="" type="radio"/> No | | |
| Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100? | | | <input type="radio"/> Yes (If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.) | | |
| | | | <input checked="" type="radio"/> No | | |
| Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100? | | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) | | |
| | | | <input checked="" type="radio"/> No | | |
| Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees) | | | | | |
| Were there purchases of advertising space in a program book or on a sign associated with this fundraiser? | | | <input type="radio"/> Yes (If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.) | | |
| | | | <input checked="" type="radio"/> No | | |
| Subpart 3: (Town Committees ONLY) | | | | | |
| Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser? | | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) | | |
| | | | <input checked="" type="radio"/> No | | |
| Event # Date of Event | Letter | Description | Was this a fundraising event? | | |
| 3/18/23 | B | Officer's Club of Connecticut | <input checked="" type="radio"/> Yes <input type="radio"/> No | | |
| Location: Street Address | | City | State | Zip Code | |
| 360 Broad St | | Hartford | CT | 06105 | |
| Subpart 1: (All Committees) | | | | | |
| Was this event hosted at a personal residence? | | | <input type="radio"/> Yes (If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.) | | |
| | | | <input checked="" type="radio"/> No | | |
| Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100? | | | <input type="radio"/> Yes (If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.) | | |
| | | | <input checked="" type="radio"/> No | | |
| Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100? | | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) | | |
| | | | <input checked="" type="radio"/> No | | |
| Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees) | | | | | |
| Were there purchases of advertising space in a program book or on a sign associated with this fundraiser? | | | <input type="radio"/> Yes (If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.) | | |
| | | | <input checked="" type="radio"/> No | | |
| Subpart 3: (Town Committees ONLY) | | | | | |
| Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser? | | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) | | |
| | | | <input checked="" type="radio"/> No | | |
| SUBTOTAL Section L1—Subpart 1 (All Committees) Total Receipts from Sale of Donated Items — This Page | | | 0 | | |
| SUBTOTAL Section L1—Subpart 3 (Town Committees ONLY) Total Receipts from Food Purchases — This Page | | | 0 | | |
| TOTAL of additional Section L1 Pages | | | 0 | | |
| TOTAL OF ALL RECEIPTS FROM SMALL PURCHASES (Enter total on Line 16a, Column A of Summary Page Totals) | | | 0 | | |

Section L1. ADDITIONAL PAGE 1 of 3

| | | | | |
|---|--------|-------------------------|---|----------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | | TYPE OF REPORT | |
| Fonfara for Hartford | | | April 10 filing | |
| L1. Event Information | | | | |
| Event # Date of Event | Letter | Description | Was this a fundraising event? | |
| 3/18/202 | C | Adriatic Restaurant | <input checked="" type="radio"/> Yes <input type="radio"/> No | |
| Location: Street Address | | City | State | Zip Code |
| 577 Franklin Avenue | | Hartford | CT | 06114 |
| Subpart 1: (All Committees) | | | | |
| Was this event hosted at a personal residence? | | | | |
| <input type="radio"/> Yes (If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.) | | | | |
| <input checked="" type="radio"/> No | | | | |
| Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100? | | | | |
| <input type="radio"/> Yes (If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.) | | | | |
| <input checked="" type="radio"/> No | | | | |
| Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100? | | | | |
| <input type="radio"/> Yes (If yes, enter Total Receipts here.) → \$ | | | | |
| <input checked="" type="radio"/> No | | | | |
| Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees) | | | | |
| Were there purchases of advertising space in a program book or on a sign associated with this fundraiser? | | | | |
| <input type="radio"/> Yes (If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.) | | | | |
| <input checked="" type="radio"/> No | | | | |
| Subpart 3: (Town Committees ONLY) | | | | |
| Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser? | | | | |
| <input type="radio"/> Yes (If yes, enter Total Receipts here.) → \$ | | | | |
| <input checked="" type="radio"/> No | | | | |
| Event # Date of Event | Letter | Description | Was this a fundraising event? | |
| 3/21/202 | D | Hartford BPO Elks Lodge | <input checked="" type="radio"/> Yes <input type="radio"/> No | |
| Location: Street Address | | City | State | Zip Code |
| 34 Prospect Street | | Hartford | CT | 06103 |
| Subpart 1: (All Committees) | | | | |
| Was this event hosted at a personal residence? | | | | |
| <input type="radio"/> Yes (If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.) | | | | |
| <input checked="" type="radio"/> No | | | | |
| Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100? | | | | |
| <input type="radio"/> Yes (If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.) | | | | |
| <input checked="" type="radio"/> No | | | | |
| Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100? | | | | |
| <input type="radio"/> Yes (If yes, enter Total Receipts here.) → \$ | | | | |
| <input checked="" type="radio"/> No | | | | |
| Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees) | | | | |
| Were there purchases of advertising space in a program book or on a sign associated with this fundraiser? | | | | |
| <input type="radio"/> Yes (If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.) | | | | |
| <input checked="" type="radio"/> No | | | | |
| Subpart 3: (Town Committees ONLY) | | | | |
| Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser? | | | | |
| <input type="radio"/> Yes (If yes, enter Total Receipts here.) → \$ | | | | |
| <input checked="" type="radio"/> No | | | | |
| SUBTOTAL Section L1—Subpart 1 (All Committees) Total Receipts from Sale of Donated Items — This Page | | | 0 | |
| SUBTOTAL Section L1—Subpart 3 (Town Committees ONLY) Total Receipts from Food Purchases — This Page | | | | |
| TOTAL of additional Section L1 Pages | | | 0 | |
| TOTAL OF ALL RECEIPTS FROM SMALL PURCHASES (Enter total on Line 16a, Column A of Summary Page Totals) | | | 0 | |

Section L1. ADDITIONAL PAGE 2 of 3

| | | | |
|---|--------|---|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | TYPE OF REPORT | |
| Fonfara for Hartford | | April 10 filing | |
| L1. Event Information | | | |
| Event # Date of Event | Letter | Description | Was this a fundraising event? <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 3/22/202 | E | River Restaurant | |
| Location: Street Address | | City | State Zip Code |
| 100 Great Meadow Road | | Wethersfield | CT 06109 |
| Subpart 1: (All Committees) | | | |
| Was this event hosted at a personal residence? | | <input type="radio"/> Yes (If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.) | |
| | | <input checked="" type="radio"/> No | |
| Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100? | | <input type="radio"/> Yes (If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.) | |
| | | <input checked="" type="radio"/> No | |
| Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100? | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) → \$ <input type="text"/> | |
| | | <input checked="" type="radio"/> No | |
| Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees) | | | |
| Were there purchases of advertising space in a program book or on a sign associated with this fundraiser? | | <input type="radio"/> Yes (If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.) | |
| | | <input checked="" type="radio"/> No | |
| Subpart 3: (Town Committees ONLY) | | | |
| Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser? | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) → \$ <input type="text"/> | |
| | | <input checked="" type="radio"/> No | |
| Event # Date of Event | Letter | Description | Was this a fundraising event? <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 3/29/202 | 3F | Salute Restaurant | |
| Location: Street Address | | City | State Zip Code |
| 100 Trumbull Street | | Hartford | CT 06103 |
| Subpart 1: (All Committees) | | | |
| Was this event hosted at a personal residence? | | <input type="radio"/> Yes (If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.) | |
| | | <input checked="" type="radio"/> No | |
| Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100? | | <input type="radio"/> Yes (If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.) | |
| | | <input checked="" type="radio"/> No | |
| Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100? | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) → \$ <input type="text"/> | |
| | | <input checked="" type="radio"/> No | |
| Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees) | | | |
| Were there purchases of advertising space in a program book or on a sign associated with this fundraiser? | | <input type="radio"/> Yes (If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.) | |
| | | <input checked="" type="radio"/> No | |
| Subpart 3: (Town Committees ONLY) | | | |
| Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser? | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) → \$ <input type="text"/> | |
| | | <input checked="" type="radio"/> No | |
| SUBTOTAL Section L1—Subpart 1 (All Committees) Total Receipts from Sale of Donated Items — This Page | | 0 | |
| SUBTOTAL Section L1—Subpart 3 (Town Committees ONLY) Total Receipts from Food Purchases — This Page | | 0 | |
| TOTAL of additional Section L1 Pages | | 0 | |
| TOTAL OF ALL RECEIPTS FROM SMALL PURCHASES (Enter total on Line 16a, Column A of Summary Page Totals) | | 0 | |

Section L1. ADDITIONAL PAGE 3 of 3

| | | | | |
|---|---------------|---|---|----------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | | TYPE OF REPORT | |
| Fonfara for Hartford | | | April 10 filing | |
| L1. Event Information | | | | |
| Event # Date of Event | Letter | Description | Was this a fundraising event? | |
| 3/30/202 | G | Connecticut Funeral Directors Association | <input checked="" type="radio"/> Yes <input type="radio"/> No | |
| Location: Street Address | | City | State | Zip Code |
| 364 Silas Deane Highway | | Wethersfield | CT | 06109 |
| Subpart 1: (All Committees) | | | | |
| Was this event hosted at a personal residence? | | <input type="radio"/> Yes (If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.) | | |
| | | <input checked="" type="radio"/> No | | |
| Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100? | | <input checked="" type="radio"/> Yes (If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.) | | |
| | | <input type="radio"/> No | | |
| Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100? | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) | | |
| | | <input checked="" type="radio"/> No | | |
| → \$ <input style="width: 100px;" type="text"/> | | | | |
| Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees) | | | | |
| Were there purchases of advertising space in a program book or on a sign associated with this fundraiser? | | <input checked="" type="radio"/> Yes (If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.) | | |
| | | <input type="radio"/> No | | |
| Subpart 3: (Town Committees ONLY) | | | | |
| Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser? | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) | | |
| | | <input checked="" type="radio"/> No | | |
| → \$ <input style="width: 100px;" type="text"/> | | | | |
| Event # Date of Event | Letter | Description | Was this a fundraising event? | |
| 3/31/202 | H | Red Rock Cafe | <input checked="" type="radio"/> Yes <input type="radio"/> No | |
| Location: Street Address | | City | State | Zip Code |
| 369 Capitol Avenue | | Hartford | CT | 06106 |
| Subpart 1: (All Committees) | | | | |
| Was this event hosted at a personal residence? | | <input type="radio"/> Yes (If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.) | | |
| | | <input checked="" type="radio"/> No | | |
| Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100? | | <input checked="" type="radio"/> Yes (If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information.) | | |
| | | <input type="radio"/> No | | |
| Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100? | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) | | |
| | | <input checked="" type="radio"/> No | | |
| → \$ <input style="width: 100px;" type="text"/> | | | | |
| Subpart 2: (Party Committees, Municipal Candidates and Political Committees other than Exploratory Committees) | | | | |
| Were there purchases of advertising space in a program book or on a sign associated with this fundraiser? | | <input checked="" type="radio"/> Yes (If yes, go to Section L3 Purchases of Advertising Space in a Program Book or on a Sign and complete required information.) | | |
| | | <input type="radio"/> No | | |
| Subpart 3: (Town Committees ONLY) | | | | |
| Did your committee sell food or beverage at a fair or similar mass gathering held within the state with this fundraiser? | | <input type="radio"/> Yes (If yes, enter Total Receipts here.) | | |
| | | <input checked="" type="radio"/> No | | |
| → \$ <input style="width: 100px;" type="text"/> | | | | |
| SUBTOTAL Section L1—Subpart 1 (All Committees) Total Receipts from Sale of Donated Items — This Page | | | 0 | |
| SUBTOTAL Section L1—Subpart 3 (Town Committees ONLY) Total Receipts from Food Purchases — This Page | | | | |
| TOTAL of additional Section L1 Pages | | | 0 | |
| TOTAL OF ALL RECEIPTS FROM SMALL PURCHASES <i>(Enter total on Line 16a, Column A of Summary Page Totals)</i> | | | 0 | |

II. EVENT ACTIVITY (Sections L1—L5)

Per Public Act 11-48, effective January 1, 2012 committees are no longer required to itemize small individual purchases from a committee tag sale, auction, or a sale of donated items. *Section L2. removed*

| | | | | | | |
|--|---------|------------------------------------|-------------------------------|-------------------------|--|----------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i> | | | | | TYPE OF REPORT | |
| Fonfara for Hartford | | | | | April 10 Filing | |
| L3. Purchases of Advertising in a Program Book or on a Sign | | | | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Thomas E. Fitzgerald Funeral Home Inc. | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 809 N. Main St Ext | | | Wallingford | | CT | 06492 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/30/2023 | G | 250 | 250 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Propel LLC | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 495 Brimfield Rd | | | Wethersfield | | CT | 06109 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/31/2023 | H | 250 | 250 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Capitol Strategies Group, LLC | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 36 Trumbull St | | | Hartford | | CT | 06103 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/31/2023 | H | 250 | 250 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Government Solutions Group, LLC | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 36 Trumbull St | | | Hartford | | CT | 06103 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/31/2023 | H | 250 | 250 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| LA Law, LLC | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| One Regency Drive | | | Bloomfield | | CT | 06002 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/31/2023 | H | 250 | 250 | | | |
| SUBTOTAL Section L3 Total Purchases of Advertising in Program Book — This Page | | | | | 1250 | |
| SUBTOTAL Section L3 Total Purchases of Advertising on a Sign — This Page | | | | | 0 | |
| TOTAL of additional Section L3 Pages | | | | | 3250 | |
| TOTAL OF ALL PURCHASES OF ADVERTISING IN A PROGRAM BOOK or ON A SIGN <i>(Enter total on Line 16c, Column A of Summary Page Totals)</i> | | | | | 4500 | |

Section L3. ADDITIONAL PAGE 1 of 3

Per Public Act 11-48, effective January 1, 2012 committees are no longer required to itemize small individual purchases from a committee tag sale, auction, or a sale of donated items. *Section L2. removed*

| | | | | | | |
|---|---------|------------------------------------|-------------------------------|-------------------------|--|----------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | | | | TYPE OF REPORT | |
| Fonfara for Hartford | | | | | April 10 Filing | |
| L3. Purchases of Advertising in a Program Book or on a Sign | | | | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Wine & Spirits Wholesalers of Connecticut, Inc. | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 10 Byington Place, Second Floor | | | Norwalk | | CT | 06850 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/16/2023 | B | \$250.00 | \$250.00 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Northeast Beverage Corp of CT | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| P.O. Box 1437 | | | Coventry | | RI | 02816 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/16/2023 | B | \$250.00 | \$250.00 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Allan S, Goodman, Inc. | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 180 Goodwin Street | | | East Hartford | | CT | 06108 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/16/2023 | B | \$250.00 | \$250.00 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Hartley & Parker Limited, Inc. | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 100 Browning Street | | | Stratford | | CT | 06615 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/16/2023 | B | \$250.00 | \$250.00 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Connecticut Distributors, Inc. | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 333 Lordship Blvd. | | | Stratford | | CT | 06615 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/16/2023 | B | \$250.00 | \$250.00 | | | |
| SUBTOTAL Section L3 Total Purchases of Advertising in Program Book — This Page | | | | | 1250 | |
| SUBTOTAL Section L3 Total Purchases of Advertising on a Sign — This Page | | | | | 0 | |
| TOTAL of additional Section L3 Pages | | | | | 3250 | |
| TOTAL OF ALL PURCHASES OF ADVERTISING IN A PROGRAM BOOK or ON A SIGN (Enter total on Line 16c, Column A of Summary Page Totals) | | | | | 4500 | |

Section L3. ADDITIONAL PAGE 2 of 3

Per Public Act 11-48, effective January 1, 2012 committees are no longer required to itemize small individual purchases from a committee tag sale, auction, or a sale of donated items. *Section L2. removed*

| | | | | | | |
|--|---------|------------------------------------|-------------------------------|-------------------------|--|----------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | | | | TYPE OF REPORT | |
| Fonfara for Hartford | | | | | April 10 Filing | |
| L3. Purchases of Advertising in a Program Book or on a Sign | | | | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Eder Bros, Inc. | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 11 Eder Road | | | West Haven | | CT | 06516 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/16/2023 | B | \$250.00 | \$250.00 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Opici Family Distributing of Connecticut | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 210 Old Gate Lane | | | Milford | | CT | 06460 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/16/2023 | B | \$250.00 | \$250.00 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Capitol Consulting LLC | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 23 Viola Drive | | | East Hampton | | CT | 06424 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/30/2023 | G | \$250.00 | \$250.00 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| Carmon Funeral Homes, Inc. | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 807 Bloomfield Avenue | | | Windsor | | CT | 06095 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/30/2023 | G | \$250.00 | \$250.00 | | | |
| Name of Purchaser | | | | | Purchase Made By: | |
| D'Esopo East Hartford Memorial Chapel | | | | | <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship | |
| Street Address | | | City | | State | Zip Code |
| 30 Carter Street | | | East Hartford | | CT | 06118 |
| Date Received | Event # | Aggregate Purchases for All Events | Amount of Program Ad Purchase | Amount of Sign Purchase | | |
| 3/30/2023 | G | \$250.00 | \$250.00 | | | |
| SUBTOTAL Section L3 Total Purchases of Advertising in Program Book — This Page | | | | | 1250 | |
| SUBTOTAL Section L3 Total Purchases of Advertising on a Sign — This Page | | | | | 0 | |
| TOTAL of additional Section L3 Pages | | | | | 3250 | |
| TOTAL OF ALL PURCHASES OF ADVERTISING IN A PROGRAM BOOK or ON A SIGN <i>(Enter total on Line 16c, Column A of Summary Page Totals)</i> | | | | | 4500 | |

Section L3. ADDITIONAL PAGE 2 of 3

Per Public Act 11-48, effective January 1, 2012 committees are no longer required to itemize small individual purchases from a committee tag sale, auction, or a sale of donated items. *Section L2. removed*

| | |
|--|-----------------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i> | TYPE OF REPORT |
| Fonfara for Hartford | April 10 Filing |

L3. Purchases of Advertising in a Program Book or on a Sign

| | |
|--------------------------------------|---|
| Name of Purchaser Eder Bros, Inc. | Purchase Made By: <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship |
|--------------------------------------|---|

| | | | |
|--------------------------------|--------------------|-------------|-------------------|
| Street Address 11 Eder Road | City West Haven | State CT | Zip Code 06516 |
|--------------------------------|--------------------|-------------|-------------------|

| | | | | |
|----------------------------|--------------|--|---|-------------------------|
| Date Received 3/16/2023 | Event # B | Aggregate Purchases for All Events \$250.00 | Amount of Program Ad Purchase \$250.00 | Amount of Sign Purchase |
|----------------------------|--------------|--|---|-------------------------|

| | |
|---|---|
| Name of Purchaser Opici Family Distributing of Connecticut | Purchase Made By: <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship |
|---|---|

| | | | |
|-------------------------------------|-----------------|-------------|-------------------|
| Street Address 210 Old Gate Lane | City Milford | State CT | Zip Code 06460 |
|-------------------------------------|-----------------|-------------|-------------------|

| | | | | |
|----------------------------|--------------|--|---|-------------------------|
| Date Received 3/16/2023 | Event # B | Aggregate Purchases for All Events \$250.00 | Amount of Program Ad Purchase \$250.00 | Amount of Sign Purchase |
|----------------------------|--------------|--|---|-------------------------|

| | |
|---|---|
| Name of Purchaser Capitol Consulting LLC | Purchase Made By: <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship |
|---|---|

| | | | |
|----------------------------------|----------------------|-------------|-------------------|
| Street Address 23 Viola Drive | City East Hampton | State CT | Zip Code 06424 |
|----------------------------------|----------------------|-------------|-------------------|

| | | | | |
|----------------------------|--------------|--|---|-------------------------|
| Date Received 3/30/2023 | Event # G | Aggregate Purchases for All Events \$250.00 | Amount of Program Ad Purchase \$250.00 | Amount of Sign Purchase |
|----------------------------|--------------|--|---|-------------------------|

| | |
|---|---|
| Name of Purchaser Carmon Funeral Homes, Inc. | Purchase Made By: <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship |
|---|---|

| | | | |
|---|-----------------|-------------|-------------------|
| Street Address 807 Bloomfield Avenue | City Windsor | State CT | Zip Code 06095 |
|---|-----------------|-------------|-------------------|

| | | | | |
|----------------------------|--------------|--|---|-------------------------|
| Date Received 3/30/2023 | Event # G | Aggregate Purchases for All Events \$250.00 | Amount of Program Ad Purchase \$250.00 | Amount of Sign Purchase |
|----------------------------|--------------|--|---|-------------------------|

| | |
|--|---|
| Name of Purchaser D'Esopo East Hartford Memorial Chapel | Purchase Made By: <input checked="" type="radio"/> Business Entity <input type="radio"/> Other <input type="radio"/> Individual/Sole Proprietorship |
|--|---|

| | | | |
|------------------------------------|-----------------------|-------------|-------------------|
| Street Address 30 Carter Street | City East Hartford | State CT | Zip Code 06118 |
|------------------------------------|-----------------------|-------------|-------------------|

| | | | | |
|----------------------------|--------------|--|---|-------------------------|
| Date Received 3/30/2023 | Event # G | Aggregate Purchases for All Events \$250.00 | Amount of Program Ad Purchase \$250.00 | Amount of Sign Purchase |
|----------------------------|--------------|--|---|-------------------------|

| | |
|---|------|
| SUBTOTAL Section L3 Total Purchases of Advertising in Program Book — This Page | 1250 |
|---|------|

| | |
|---|---|
| SUBTOTAL Section L3 Total Purchases of Advertising on a Sign — This Page | 0 |
|---|---|

| | |
|---|------|
| TOTAL of additional Section L3 Pages | 3250 |
|---|------|

| | |
|--|------|
| TOTAL OF ALL PURCHASES OF ADVERTISING IN A PROGRAM BOOK or ON A SIGN <i>(Enter total on Line 16c, Column A of Summary Page Totals)</i> | 4500 |
|--|------|

II. EVENT ACTIVITY (Sections L1—L5)

| | | | | |
|--|-------------------------|----------------------|--------------------------------|-------------------------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | | TYPE OF REPORT | |
| Fonfara for Hartford | | | April 10 Filing | |
| L4. In-Kind Donations Not Considered Contributions | | | | |
| Name of Donor Carbone's Prime | | | | |
| Street Address 838 Cromwell Ave | | City Rocky Hill | | State CT |
| | | | | Zip Code 06067 |
| Donation Given By: | Description of Donation | | | Fair Market Value of Donation |
| <input checked="" type="radio"/> Business Entity | Food | | | |
| <input type="radio"/> Individual | Date Received | Event # | Aggregate Value for this Event | 200 |
| <input type="radio"/> Sole Proprietorship | 3/21/23 | D | 400 | |
| Name of Donor Vincent Carbone | | | | |
| Street Address 25 Garden St | | City Wethersfield | | State CT |
| | | | | Zip Code 06109 |
| Donation Given By: | Description of Donation | | | Fair Market Value of Donation |
| <input type="radio"/> Business Entity | Food | | | |
| <input checked="" type="radio"/> Individual | Date Received | Event # | Aggregate Value for this Event | 100 |
| <input type="radio"/> Sole Proprietorship | 3/21/23 | D | 400 | |
| Name of Donor John Carbone | | | | |
| Street Address 18 Cedar Wood Dr | | City Wethersfield | | State CT |
| | | | | Zip Code 06109 |
| Donation Given By: | Description of Donation | | | Fair Market Value of Donation |
| <input type="radio"/> Business Entity | Food | | | |
| <input checked="" type="radio"/> Individual | Date Received | Event # | Aggregate Value for this Event | 100 |
| <input type="radio"/> Sole Proprietorship | 3/21/23 | D | 400 | |
| Name of Donor Conn. Funeral Directors Assoc., Inc. | | | | |
| Street Address 364 Silas Deane Hwy | | City Wethersfield | | State CT |
| | | | | Zip Code 06109 |
| Donation Given By: | Description of Donation | | | Fair Market Value of Donation |
| <input checked="" type="radio"/> Business Entity | Food | | | |
| <input type="radio"/> Individual | Date Received | Event # | Aggregate value for this Event | 145 |
| <input type="radio"/> Sole Proprietorship | 3/30/23 | G | 145 | |
| SUBTOTAL Section L4 — This Page | | | 545 | |
| TOTAL of additional Section L4 Pages | | | 200 | |
| TOTAL OF ALL IN-KIND DONATIONS NOT CONSIDERED CONTRIBUTIONS <i>(Enter total on Line 21, Column A of Summary Page Totals)</i> | | | 745 | |

Section L4. ADDITIONAL PAGE 1 of 1

| | |
|--|-----------------|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | TYPE OF REPORT |
| Fonfara for Hartford | April 10 Filing |

L4. In-Kind Donations Not Considered Contributions

| | | | | |
|---|---------------------------------|------------------|--------------------------------------|-------------------|
| Name of Donor Red Rock Cafe | | | | |
| Street Address 369 Capitol Ave | | City Hartford | State CT | Zip Code 06106 |
| Donation Given By: <input checked="" type="radio"/> Business Entity <input type="radio"/> Individual <input type="radio"/> Sole Proprietorship | Description of Donation Food | | Fair Market Value of Donation 200 | |
| | Date Received 3/31/23 | Event # H | | |

| | | | | |
|--|-------------------------|---------|-------------------------------|----------|
| Name of Donor | | | | |
| Street Address | | City | State | Zip Code |
| Donation Given By: <input type="radio"/> Business Entity <input type="radio"/> Individual <input type="radio"/> Sole Proprietorship | Description of Donation | | Fair Market Value of Donation | |
| | Date Received | Event # | | |

| | | | | |
|--|-------------------------|---------|-------------------------------|----------|
| Name of Donor | | | | |
| Street Address | | City | State | Zip Code |
| Donation Given By: <input type="radio"/> Business Entity <input type="radio"/> Individual <input type="radio"/> Sole Proprietorship | Description of Donation | | Fair Market Value of Donation | |
| | Date Received | Event # | | |

| | | | | |
|--|-------------------------|---------|-------------------------------|----------|
| Name of Donor | | | | |
| Street Address | | City | State | Zip Code |
| Donation Given By: <input type="radio"/> Business Entity <input type="radio"/> Individual <input type="radio"/> Sole Proprietorship | Description of Donation | | Fair Market Value of Donation | |
| | Date Received | Event # | | |

| | |
|--|-----|
| SUBTOTAL Section L4 — This Page | 200 |
|--|-----|

| | |
|--|--|
| | |
|--|--|

IV. EXPENDITURES (Sections P—T)

| | | | | | |
|--|---|-------------|-----------------|-------|--|
| NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) | | | TYPE OF REPORT | | |
| Fonfara for Hartford | | | April 10 filing | | |
| P. Expenses Paid by Committee | | | | | |
| Name of Payee | | | Date of Payment | | Method of Payment: |
| Matthew Bartone | | | 3/23/23 | | <input type="radio"/> Check # 102 <input type="radio"/> Debit Card <input checked="" type="radio"/> EFT |
| Street Address | | City | | State | Zip Code |
| 14 Francis Drive | | Glastonbury | | CT | 06033 |
| Purpose of Expenditure (by code) | Description | | Event # | | Amount |
| WEB | Webpage Development | | | | 1364 |
| Expenditure # (if applicable) | Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) | | | | |
| 1 | <input checked="" type="radio"/> None of the below <input type="radio"/> Coordinated with reimbursement sought (joint expenditure) <input type="radio"/> Independent <input type="radio"/> Coordinated without reimbursement sought (in-kind contribution) <input type="radio"/> Organization <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D | | | | |
| Name of Payee | | | Date of Payment | | Method of Payment: |
| Harland Clarke | | | 1/25/23 | | <input type="radio"/> Check # _____ <input type="radio"/> Debit Card <input checked="" type="radio"/> EFT |
| Street Address | | City | | State | Zip Code |
| 15955 La Cantera Pkwy | | San Antonio | | | |
| Purpose of Expenditure (by code) | Description | | Event # | | Amount |
| BNK | check order fees | | | | 187.34 |
| Expenditure # (if applicable) | Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) | | | | |
| 2 | <input type="radio"/> None of the below <input type="radio"/> Coordinated with reimbursement sought (joint expenditure) <input type="radio"/> Independent <input type="radio"/> Coordinated without reimbursement sought (in-kind contribution) <input type="radio"/> Organization <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D | | | | |
| Name of Payee | | | Date of Payment | | Method of Payment: |
| Anedot | | | 1/18/23-3/31/23 | | <input type="radio"/> Check # _____ <input type="radio"/> Debit Card <input checked="" type="radio"/> EFT |
| Street Address | | City | | State | Zip Code |
| 1340 Poydras Street Sulte 1770 | | New Orleans | | LA | 70112 |
| Purpose of Expenditure (by code) | Description | | Event # | | Amount |
| * +MISC | fees | | | | 9075.32 |
| Expenditure # (if applicable) | Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) | | | | |
| | <input type="radio"/> None of the below <input type="radio"/> Coordinated with reimbursement sought (joint expenditure) <input type="radio"/> Independent <input type="radio"/> Coordinated without reimbursement sought (in-kind contribution) <input type="radio"/> Organization <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D | | | | |
| Name of Payee | | | Date of Payment | | Method of Payment: |
| | | | | | <input type="radio"/> Check # _____ <input type="radio"/> Debit Card <input type="radio"/> EFT |
| Street Address | | City | | State | Zip Code |
| | | | | | |
| Purpose of Expenditure (by code) | Description | | Event # | | Amount |
| | | | | | |
| Expenditure # (if applicable) | Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) | | | | |
| | <input type="radio"/> None of the below <input type="radio"/> Coordinated with reimbursement sought (joint expenditure) <input type="radio"/> Independent <input type="radio"/> Coordinated without reimbursement sought (in-kind contribution) <input type="radio"/> Organization <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D | | | | |
| SUBTOTAL Section P — This Page | | | 10626.66 | | |
| TOTAL of additional Section P Pages | | | 0 | | |
| TOTAL OF ALL EXPENSES PAID BY COMMITTEE <i>(Enter total on Line 19, Column A of Summary Page Totals)</i> | | | 10626.66 | | |

IV. EXPENDITURES (Sections P—T)

| | | | | | |
|--|---|-----------------------------------|--|--------------------------|---|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i> | | | | TYPE OF REPORT | |
| S. Expenses Incurred by Committee but Not Paid During this Period | | | | | |
| Name of Creditor Carbone's Prime | | | | Date Incurred 3/21/23 | |
| Street Address | | City | | State | Zip Code |
| Purpose of Expenditure (by code) FOOD | | Description | | Event # | Amount Incurred <i>(Estimate or Actual)</i> 200 |
| Expenditure # <i>(if applicable)</i> 1 | Type of Expenditure <i>(Itemization in Addendum S Required unless "None of the below" is checked)</i> <input checked="" type="radio"/> None of the below <input type="radio"/> Coordinated with reimbursement sought (joint expenditure) <input type="radio"/> Coordinated without reimbursement sought (in-kind contribution) <input type="radio"/> Independent <input type="radio"/> Organization: <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D | | | | |
| Name of Creditor Salute | | | | Date Incurred 3/29/23 | |
| Street Address 100 Trumbull St | | City Hartford | | State CT | Zip Code 06103 |
| Purpose of Expenditure (by code) FOOD | | Description Food at fundraiser | | Event # F | Amount Incurred <i>(Estimate or Actual)</i> 1055.13 |
| Expenditure # <i>(if applicable)</i> 2 | Type of Expenditure <i>(Itemization in Addendum S Required unless "None of the below" is checked)</i> <input type="radio"/> None of the below <input checked="" type="radio"/> Coordinated with reimbursement sought (joint expenditure) <input type="radio"/> Coordinated without reimbursement sought (in-kind contribution) <input type="radio"/> Independent <input type="radio"/> Organization: <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D | | | | |
| Name of Creditor Great Meadow Cafe | | | | Date Incurred 3/22/23 | |
| Street Address 100 Great Meadow Rd | | City Wethersfield | | State CT | Zip Code 06109 |
| Purpose of Expenditure (by code) FOOD | | Description Food at fundraiser | | Event # E | Amount Incurred <i>(Estimate or Actual)</i> 792.35 |
| Expenditure # <i>(if applicable)</i> 3 | Type of Expenditure <i>(Itemization in Addendum S Required unless "None of the below" is checked)</i> <input type="radio"/> None of the below <input checked="" type="radio"/> Coordinated with reimbursement sought (joint expenditure) <input type="radio"/> Coordinated without reimbursement sought (in-kind contribution) <input type="radio"/> Independent <input type="radio"/> Organization: <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D | | | | |
| SUBTOTAL Section S-This Page | | | | 2047.48 | |
| TOTAL of additional Section S Pages | | | | 2004.83 | |
| TOTAL OF ALL EXPENSES INCURRED BY COMMITTEE DURING THIS PERIOD BUT NOT PAID <i>(Enter total on Line 28, Column A of Summary Page Totals)</i> | | | | 4052.31 | |
| Previously reported Expenses Unpaid and still Outstanding | | | | 0 | |
| TOTAL OF ALL EXPENSES INCURRED BY COMMITTEE BUT NOT PAID <i>(Enter total on Line 28a, Column A of Summary Page Totals)</i> | | | | 4052.31 | |

Section S ADDITIONAL PAGE 1 **of** 1

| | |
|--|-----------------------|
| NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i> | TYPE OF REPORT |
|--|-----------------------|

S. Expenses Incurred by Committee but Not Paid During this Period

| | |
|--|---------------------------------|
| Name of Creditor Officer's Club of Connecticut | Date Incurred 3/16/23 |
|--|---------------------------------|

| | | | |
|---------------------------------------|-------------------------|--------------------|--------------------------|
| Street Address 360 Broad St | City Hartford | State CT | Zip Code 06106 |
|---------------------------------------|-------------------------|--------------------|--------------------------|

| | | | |
|---|---|---------------------|---|
| Purpose of Expenditure (by code) FOOD | Description Food at fundraiser | Event # B | Amount Incurred <i>(Estimate or Actual)</i> 604.91 |
| Expenditure # (if applicable) 4 | Type of Expenditure (Itemization in Addendum S Required unless "None of the below" is checked) <input type="radio"/> None of the below <input type="radio"/> Coordinated with reimbursement sought (joint expenditure) <input type="radio"/> Coordinated without reimbursement sought (in-kind contribution) <input type="radio"/> Independent <input type="radio"/> Organization <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D | | |

| | |
|--|---------------------------------|
| Name of Creditor Adriatic Restaurant | Date Incurred 3/18/23 |
|--|---------------------------------|

| | | | |
|---|-------------------------|--------------------|--------------------------|
| Street Address 575 Franklin Ave | City Hartford | State CT | Zip Code 06114 |
|---|-------------------------|--------------------|--------------------------|

| | | | |
|---|---|---------------------|---|
| Purpose of Expenditure (by code) FOOD | Description Food at fundraiser | Event # C | Amount Incurred <i>(Estimate or Actual)</i> 755.82 |
| Expenditure # (if applicable) 5 | Type of Expenditure (Itemization in Addendum S Required unless "None of the below" is checked) <input type="radio"/> None of the below <input type="radio"/> Coordinated with reimbursement sought (joint expenditure) <input type="radio"/> Coordinated without reimbursement sought (in-kind contribution) <input type="radio"/> Independent <input type="radio"/> Organization <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D | | |

| | |
|--|------------------------------|
| Name of Creditor Asia Darbar | Date Incurred 3/15 |
|--|------------------------------|

| | | | |
|--------------------------------------|---------------------------|--------------------|--------------------------|
| Street Address 253 East St | City Plainville | State CT | Zip Code 06062 |
|--------------------------------------|---------------------------|--------------------|--------------------------|

| | | | |
|---|--|---------------------|---|
| Purpose of Expenditure (by code) FOOD | Description Food at fundraiser | Event # A | Amount Incurred <i>(Estimate or Actual)</i> 644.10 |
| Expenditure # (if applicable) 6 | Type of Expenditure (Itemization in Addendum S Required unless "None of the below" is checked) <input type="radio"/> None of the below <input checked="" type="radio"/> Coordinated with reimbursement sought (joint expenditure) <input type="radio"/> Coordinated without reimbursement sought (in-kind contribution) <input type="radio"/> Independent <input type="radio"/> Organization <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D | | |

| | |
|-------------------------------------|---------|
| SUBTOTAL Section S-This Page | 2004.83 |
|-------------------------------------|---------|

| | |
|--|---------|
| TOTAL of additional Section S Pages | 2004.83 |
|--|---------|

| | |
|--|---------|
| TOTAL OF ALL EXPENSES INCURRED BY COMMITTEE DURING THIS PERIOD BUT NOT PAID <i>(Enter total on Line 28, Column A of Summary Page Totals)</i> | 4052.31 |
|--|---------|

| | |
|--|---|
| Previously reported Expenses Unpaid and still Outstanding | 0 |
|--|---|

| | |
|--|---------|
| TOTAL OF ALL EXPENSES INCURRED BY COMMITTEE BUT NOT PAID <i>(Enter total on Line 28a, Column A of Summary Page Totals)</i> | 4051.32 |
|--|---------|