

SEEC FORM 20

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



Page 1 of 17

TOWN & CITY CLERK
 2019 APR 10 PM 4:30
 Do Not Mark in This Space For Official Use Only

COVER PAGE

1. NAME OF COMMITTEE			
Re Elect Clarke for City Council			
2. TREASURER NAME			
First Justin	MI K	Last Coleman	Suffix
3. TREASURER ADDRESS			
Street Address 107 Saint Monicas Avenue	City Hartford	State CT	Zip Code 06120
4. ELECTION/REFERENDUM DATE (mm/dd/yyyy) 11/05/2019	5. OFFICE SOUGHT <i>(Complete only if Candidate Committee)</i> City Council Rep		6. DISTRICT NUMBER <i>(If applicable)</i>
7. CANDIDATE NAME <i>(Complete only if Candidate or Exploratory Committee)</i>			
First Thomas	MI J	Last Clarke	Suffix II
8. TYPE OF REPORT <i>(Check One Box)</i>			
<input type="radio"/> January 10 filing	<input type="radio"/> 7th day preceding primary	<input type="radio"/> 7th day preceding referendum	<input type="radio"/> Initial Contribution or Disbursement <i>(PACs ONLY)</i>
<input checked="" type="radio"/> April 10 filing	<input type="radio"/> 30 days following primary	<input type="radio"/> 45 days following referendum	<input type="radio"/> Amendment to
<input type="radio"/> July 10 filing	<input type="radio"/> 7th day preceding election	<input type="radio"/> Deficit	Type of Report: _____
<input type="radio"/> October 10 filing	<input type="radio"/> 12th day preceding election <i>(State Central Committees Only)</i>	<input type="radio"/> Termination	
<input type="radio"/> 24 Hour Independent Expenditure <input type="radio"/> Primary <input type="radio"/> Election	<input type="radio"/> 45 days following election not held in November		
9. PERIOD COVERED			
Beginning Date		Ending Date	
1/2/2019		thru 4/10/2019	
10. CERTIFICATION			
I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete.			
 _____ TREASURER OR DEPUTY TREASURER (SIGNATURE)		JUSTIN COLEMAN _____ PRINT NAME OF SIGNER	
		4/10/2019 _____ DATE (mm/dd/yyyy)	
A person who is found to have knowingly and willfully violated any provisions of the campaign finance statutes faces a civil penalty or imprisonment or both.			

SEEC FORM 20

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

SUMMARY PAGE TOTALS

NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>	TYPE OF REPORT	
Re Elect Clarke for City Council		
	COLUMN A This Period	COLUMN B Aggregate
11. Balance on hand January 1 of current year for ongoing and party committees OR Balance on hand from day committee was formed for all other committees		
12. Balance on hand at the beginning of Reporting Period	0	
13. Contributions Received from Individuals (Sections A and B)	2705.00	
14. Receipts from Other Committees (Sections C1 and C2)	0	
15. Other Monetary Receipts (Sections D through K)	0	
16a. Total Proceeds from Small Purchases (Section L1 Subpart 1 + Subpart 3)	0	
16b. <i>Per Public Act 11-48, effective January 1, 2012. Section L2. removed</i>		
16c. Total Purchases of Advertising—Program Book or Sign (Section L3)	0	
17. Total Monetary Receipts (add totals for Lines 13 through 16c)	0	
18. Subtotals (add totals in Line 12 + 17 in Column A; and in Line 11 + 17 in Column B)	2705.00	
19. Expenses Paid by Committee (Section P)	0	
20. Balance on hand at close of Reporting Period (Subtract Line 19 from Line 18 in both Columns)	2705.00	
21. In-Kind Donations not Considered Contributions Received (Section L4)	0	
22. In-Kind Donations not Considered Contributions — House Party (Section L5)	0	
23. In-Kind Contributions Received (Section M)	0	
24. Refundable Deposit to Telephone Company (Section N)	0	
25. Loan Balance	0	
25a. + Loans Received (Section D)		
25b. + Interest and Penalties on Loan		
25c. - Payments on Loan		
25d. Total Outstanding Loan Amount	0	
26. Campaign Expenses Paid by Candidate (Section Q)	555.00	
27. Expenses Incurred on Committee Credit Card (Section R)	0	
28. Expenses Incurred by Committee During this Period but Not Paid (Section S)	0	
28a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section S)	0	

Section B ADDITIONAL PAGE 1 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF REPORT
Re ELEG CLARKE FOR CITY COUNCIL	APRIL 10
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)	\$ 1,100.00
SUBTOTAL SECTION A	

B. Itemized Contributions from Individuals

Last Name Boghosian	First Karlos	MI
Residential Street Address 1 Ryan Circle	City Simsbury	State CT
		Zip Code 06070

Principal Occupation Chiropractor	Name of Employer SoVita Chiropractic Center	
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 \$250.00
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 checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order	Date Received 3/4/2019	Aggregate Contributions

Last Name Thompson	First Lionel	MI
Residential Street Address 174 west Morningside st	City Hartford	State CT
		Zip Code 06112

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 \$50.00
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 checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order	Date Received 3/1/2019	Aggregate Contributions

Last Name Bailey	First Addison	MI K
Residential Street Address 670 Easton Forest Cir SE	City Palm Bay	State FL
		Zip Code 32909

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 \$100.00
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 checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order	Date Received 2/28/2019	Aggregate Contributions

SUBTOTAL Section B — This Page	\$400.00
TOTAL of additional Section B Pages	16
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)	2705.00

Section B ADDITIONAL PAGE 2 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
RE BLAIR CLARKE FOR CITY COUNCIL		APRIL 10	
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	
Residential Street Address 161 Tremont Street		City Hartford	
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	
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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 01/28/2019	
		Aggregate Contributions	
Last Name Motley		First John	
Residential Street Address 39 Canterbury Road		City Hamden	
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	
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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 1/28/2019	
		Aggregate Contributions	
Last Name Brown		First Norma	
Residential Street Address 181 Overlook Ave		City New Britain	
Principal Occupation Executive Assistant		Name of Employer Cigna	
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 # _____		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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 1/27/2019	
		Aggregate Contributions	
SUBTOTAL Section B — This Page		\$360.00	
TOTAL of additional Section B Pages			
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)		2705.00	

Section B ADDITIONAL PAGE 3 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Re BLAKE CLARKE FOR CITY COUNCIL		APRIL 10	
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		First	
Shortell		Patrick	
Residential Street Address		City	
60 Hyde Rd		West Hartford	
State		Zip Code	
CT		06117	
Principal Occupation		Name of Employer	
Lobbyist		Focus government affairs	
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 checked="" type="radio"/> Yes <input type="radio"/> No		<input type="radio"/> Yes <input type="radio"/> No	
Amount of Contribution		\$100.00	
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	
<input type="radio"/> Cash <input type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		2/3/2019	
Aggregate Contributions			
Last Name		First	
Sanchez		James	
Residential Street Address		City	
370 Freeman Street		Hartford	
State		Zip Code	
CT		06106	
Principal Occupation		Name of Employer	
community outreach		MDC	
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 type="radio"/> No	
Amount of Contribution		\$100.00	
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	
<input type="radio"/> Cash <input type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		2/3/2019	
Aggregate Contributions			
Last Name		First	
Winch		Rjo	
Residential Street Address		City	
359 sigourney st Ste 2		Hartford	
State		Zip Code	
CT		06112	
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 type="radio"/> No	
Amount of Contribution		\$25.00	
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	
<input type="radio"/> Cash <input type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		2/3/2019	
Aggregate Contributions			
SUBTOTAL Section B — This Page		\$225.00	
TOTAL of additional Section B Pages			
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)		2705.00	

Section B ADDITIONAL PAGE 4 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
RE BLAKE CLARK FOR CITY COUNCIL				APRIL 10	
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		First		MI	
Brown		Shante		U	
Residential Street Address		City		State	Zip Code
26 Greenbriar Drive		Bloomfield		CT	06002
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	
				\$30.00	
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 checked="" type="radio"/> Yes <input 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		2/3/2019			
Last Name		First		MI	
Vasquez		Radamos		V	
Residential Street Address		City		State	Zip Code
188 Cleveland Avenue		Hartford		CT	06120
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	
				\$25.00	
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 checked="" type="radio"/> Yes <input 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		2/3/2019			
Last Name		First		MI	
Cloud		Chris			
Residential Street Address		City		State	Zip Code
25 Mountain Spring Road		Farmington		CT	06032
Principal Occupation		Name of Employer			
Lobbyist		EC&K			
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	
				\$150.00	
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 checked="" type="radio"/> Yes <input 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		2/4/2019			
SUBTOTAL Section B — This Page				\$205.00	
TOTAL of additional Section B Pages					
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				\$2705.00	

Section B ADDITIONAL PAGE 5 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Re: <u>BEST CLARKE FOR CITY COUNCIL</u>				APRIL 10	
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 Tartt		First Keyonna		MI L	
Residential Street Address 12B Saint Regis St		City East Hartford		State CT	Zip Code 06108
Principal Occupation Employed		Name of Employer state of connecticut			
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 \$25.00	
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 checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 2/3/2019	Aggregate Contributions		
Last Name Wilson		First Stephen		MI L	
Residential Street Address 98 Wakefiled Circle		City East Hartford		State CT	Zip Code 06118
Principal Occupation Employed		Name of Employer state of connecticut			
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 \$50.00	
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 checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 2/3/2019	Aggregate Contributions		
Last Name Bailey		First LeRoy		MI	
Residential Street Address 7 Tuller Circle		City Simsbury		State CT	Zip Code 06070
Principal Occupation CEO		Name of Employer Brakah Enterprises			
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 \$50.00	
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 checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 2/3/2019	Aggregate Contributions		
SUBTOTAL Section B — This Page				\$125.00	
TOTAL of additional Section B Pages					
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				<u>2705.00</u>	

Section B ADDITIONAL PAGE 6 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
RE BLST CLARKE FOR CITY COUNCIL				APRIL 10	
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		First		MI	
Heslin		John			
Residential Street Address		City		State	Zip Code
235 Kenyon St		Hartford		CT	06105
Principal Occupation		Name of Employer			
Insurance agent		Wentworth DeAngelis, 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			\$100.00
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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		3/14/2019			
Last Name		First		MI	
Pena		Alisha		J	
Residential Street Address		City		State	Zip Code
4 Deer Meadow Drive		Bloomfield		CT	06002
Principal Occupation		Name of Employer			
Unempljes		None			
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			\$10.00
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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		3/31/2019			
Last Name		First		MI	
Ortiz		Jason		J	
Residential Street Address		City		State	Zip Code
239 Farmington ave apt C		Hartford		CT	06105
Principal Occupation		Name of Employer			
Consulting		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			\$25.00
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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		3/31/2019			
SUBTOTAL Section B — This Page				\$135.00	
TOTAL of additional Section B Pages					
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				2705.00	

Section B ADDITIONAL PAGE 2 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
RE EUGEN CLARK FOR CITY COUNCIL				APRIL 10	
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 Taylor		First Ayana		MI	
Residential Street Address 11 Shamrock Circle		City Windsor		State CT	Zip Code 06095
Principal Occupation Employer Developer		Name of Employer Eastern CT State 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		\$10.00	
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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		3/31/2019			
Last Name Watkins		First Dion		MI J	
Residential Street Address 18 Mallard Drive		City Bloomfield		State CT	Zip Code 06002
Principal Occupation Pastor		Name of Employer Mount Olive Church			
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		\$100.00	
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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		3/31/2019			
Last Name Peters		First Norman		MI J	
Residential Street Address 62 Filley Street		City Bloomfield		State CT	Zip Code 06002
Principal Occupation Project Management Specialist		Name of Employer Prudential			
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		\$100.00	
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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		3/12/2019			
SUBTOTAL Section B — This Page				\$210.00	
TOTAL of additional Section B Pages					
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				\$2705.00	

Section B ADDITIONAL PAGE 8 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
RE ELECT CLARKE FOR CITY COUNCIL				APRIL 10	
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		First		MI	
Szewczyk		John			
Residential Street Address		City		State	Zip Code
458 Stage Coach Road		Durham		CT	06422
Principal Occupation		Name of Employer			
Police Sargent		City of Hartford			
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		\$30.00	
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		2/3/2019			
Last Name		First		MI	
Law		Kerwin		R	
Residential Street Address		City		State	Zip Code
1429 Park Street #431		Hartford		CT	06106
Principal Occupation		Name of Employer			
Engineer		UTC			
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		\$50.00	
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 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		2/3/2019			
Last Name		First		MI	
Campbell		Natasha			
Residential Street Address		City		State	Zip Code
100 Hartland Street		Hartford		CT	06112
Principal Occupation		Name of Employer			
Application Analyst		Uconn Health			
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		\$25.00	
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 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		2/3/2019			
SUBTOTAL Section B — This Page				\$105.00	
TOTAL of additional Section B Pages					
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				2705.00	

Section B ADDITIONAL PAGE 9 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
RE ELECT CLARKE FOR CITY COUNCIL		APRIL 10	
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 Winch		First Rjo	
Residential Street Address 359 Sigourney Street Ste 2		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 \$10.00
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 2/3/2019	Aggregate Contributions \$35.00
Last Name Healis		First Anthony	
Residential Street Address 11 Ashley Road		City Windsor	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 \$50.00
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 2/3/2019	Aggregate Contributions
Last Name Perez		First Eddie	
Residential Street Address 64 Catherine Street		City Hartford	State CT
Principal Occupation Transportation Coordinator		Name of Employer CREC	
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 \$50.00
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 2/3/2019	Aggregate Contributions
SUBTOTAL Section B — This Page			\$110.00
TOTAL of additional Section B Pages			
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			27.05.00

Section B ADDITIONAL PAGE 10 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
RE BLET CLARK FOR CITY COUNCIL				APRIL 10	
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		First		MI	
Caesar		Evans			
Residential Street Address		City		State	Zip Code
78 County Club Drive		Windsor		CT	06095
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?		Amount of Contribution	
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No		\$25.00	
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	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		2/3/2019			
Last Name		First		MI	
Cloud		Adam			
Residential Street Address		City		State	Zip Code
1366 Asylum Avenue		Hartford		CT	06105
Principal Occupation			Name of Employer		
City Treasurer			City of Hartford		
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		\$100.00	
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	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		2/3/2019			
Last Name		First		MI	
Johnson		Gregory			
Residential Street Address		City		State	Zip Code
23 North Main Street		Windsor Locks		CT	06096
Principal Occupation			Name of Employer		
Firefighter			City of Hartford		
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		\$25.00	
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	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		2/3/2019			
SUBTOTAL Section B — This Page				\$150.00	
TOTAL of additional Section B Pages					
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				2705.00	

Section B ADDITIONAL PAGE 11 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) RE EBERT CLARKE FOR CITY COUNCIL	TYPE OF REPORT APRIL 10
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 McGee	First Brandon	MI
Residential Street Address 43 Warren Street	City Hartford	State CT
	Zip Code 06120	

Principal Occupation Administrator	Name of Employer CREC
--	---------------------------------

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 \$50.00
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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 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 2/3/2019	Aggregate Contributions
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Last Name Ward	First Randall	MI
Residential Street Address 90 Lawrence Street	City East Hartford	State CT
	Zip Code 06118	

Principal Occupation	Name of Employer
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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 \$55.00
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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 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 2/3/2019	Aggregate Contributions
---	----------------------------------	-------------------------

Last Name Jenkins	First Randall	MI
Residential Street Address 44 FARMSTEAD ROAD	City East Hartford	State CT
	Zip Code 06118	

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 \$50.00
---	---	---

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 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 2/3/2019	Aggregate Contributions
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SUBTOTAL Section B — This Page	\$155.00
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TOTAL of additional Section B Pages	
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TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)	2705.00
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Section B ADDITIONAL PAGE 12 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
RE ELECT CLAREE FOR CITY COUNCIL				APRIL 10	
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		First		MI	
Sako		Albi			
Residential Street Address		City		State	Zip Code
823 Wethersfield Avenue		Hartford		CT	06114
Principal Occupation			Name of Employer		
			City of Hartford		
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		\$20.00	
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 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		2/3/2019			
Last Name		First		MI	
Johnson		Cassandra		R	
Residential Street Address		City		State	Zip Code
60 King Street		East Hartford		CT	06118
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?		Amount of Contribution	
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No		\$20.00	
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 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		2/3/2019			
Last Name		First		MI	
Lockhart		Stephanie		L	
Residential Street Address		City		State	Zip Code
105 Campfield Avenue		Hartford		CT	06114
Principal Occupation			Name of Employer		
			Windsor Public Schools		
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		\$40.00	
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 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		2/3/2019			
SUBTOTAL Section B — This Page				\$80.00	
TOTAL of additional Section B Pages					
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				\$2705.00	

Section B ADDITIONAL PAGE 13 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
RE ELECT CLARKE FOR CITY COUNCIL				APRIL 10	
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		First		MI	
Ruth		Uneeder			
Residential Street Address		City		State	Zip Code
40 Owen st		Hartford		CT	06105
Principal Occupation		Name of Employer			
Manager		YMCA			
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		\$10.00	
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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		2/3/2019			
Last Name		First		MI	
Woodard		Alison		M	
Residential Street Address		City		State	Zip Code
116 Plainfield Street		Hartford		CT	06112
Principal Occupation		Name of Employer			
Social Worker		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?		Amount of Contribution	
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No		\$25.00	
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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		2/2/2019			
Last Name		First		MI	
Beauford		Trevor			
Residential Street Address		City		State	Zip Code
915 Main Street #509		Hartford		CT	06103
Principal Occupation		Name of Employer			
Pastor		Union Baptist Church of Hartford			
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		\$25.00	
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 type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		2/3/2019			
SUBTOTAL Section B — This Page				\$60.00	
TOTAL of additional Section B Pages					
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				\$2705.00	

Section B ADDITIONAL PAGE 14 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
R. E. CLARK FOR CITY COUNCIL				APRIL 10	
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 Sullivan		First Beatrice		MI F	
Residential Street Address 3 East Lane Apt D		City Bloomfield		State CT	Zip Code 06002
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 \$25.00	
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 checked="" type="radio"/> Yes <input type="radio"/> No			
Method of Contribution: <input type="radio"/> Cash <input type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 3/31/2019	Aggregate Contributions		
Last Name Cordner		First Beverne		MI	
Residential Street Address 147 Kent Street		City Hartford		State CT	Zip Code 06112
Principal Occupation Case Manager		Name of Employer State of Connecticut DDS			
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 \$10.00	
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 checked="" type="radio"/> Yes <input type="radio"/> No			
Method of Contribution: <input type="radio"/> Cash <input type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 3/31/2019	Aggregate Contributions		
Last Name Biggs		First Dorothy		MI M	
Residential Street Address 123 Oakland Terrace		City Hartford		State CT	Zip Code 06112
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 \$25.00	
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 checked="" type="radio"/> Yes <input type="radio"/> No			
Method of Contribution: <input type="radio"/> Cash <input type="radio"/> Personal Check <input checked="" type="radio"/> Credit/Debit Card <input type="radio"/> Payroll Deduction <input type="radio"/> Money Order		Date Received 3/31/2019	Aggregate Contributions		
SUBTOTAL Section B — This Page				\$60.00	
TOTAL of additional Section B Pages					
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				2705.00	

Section B ADDITIONAL PAGE 15 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Re Elect Clarke for City Council		April 10	
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 Bidorini		First Christopher	
Residential Street Address 39 Farmington Avenue		City Plainville	State CT
Principal Occupation Social Worker		Name of Employer State of Connecticut	
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 \$25.00
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 2/3/2019	Aggregate Contributions
Last Name Davis		First John	
Residential Street Address 78 Edwards Street		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 \$10.00
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 3/14/2019	Aggregate Contributions
Last Name Redd		First Beverly	
Residential Street Address 1114 Poquonock Avenue		City Windsor	State CT
Principal Occupation Project Coordinator		Name of Employer Hartford Public Library	
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 \$50.00
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 3/14/2019	Aggregate Contributions
SUBTOTAL Section B — This Page			\$85.00
TOTAL of additional Section B Pages			
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			2705.00

Section B ADDITIONAL PAGE 16 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Re Elect Clarke for City Council				April 10	
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 Victorian		First Jonathan		MI	
Residential Street Address 63 Mahl Avenue		City Hartford		State CT	Zip Code 06120
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 \$50.00	
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 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 2/3/2019	Aggregate Contributions		
Last Name Jefferson		First April		MI	
Residential Street Address 15 Grant Street		City Hartford		State CT	Zip Code 06106
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 \$20.00	
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 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 2/3/2019	Aggregate Contributions		
Last Name Graves		First Shantel		MI	
Residential Street Address 406 Farmers Drive		City Windsor		State CT	Zip Code 06095
Principal Occupation		Name of Employer Hartford Hospital			
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 \$20.00	
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 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 2/3/2019	Aggregate Contributions		
SUBTOTAL Section B — This Page				\$90.00	
TOTAL of additional Section B Pages					
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				2705.00	

Section B ADDITIONAL PAGE 17 of 17

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
REBECCA CLARKE FOR CITY COUNCIL				APRIL 10	
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		First		MI	
Nelson		Tonja		D	
Residential Street Address		City		State	Zip Code
28 Harvard Street		Hartford		CT	06106
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?		Amount of Contribution	
<input type="radio"/> Yes <input checked="" type="radio"/> No		<input type="radio"/> Yes <input checked="" type="radio"/> No		\$25.00	
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 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		3/14/2019			
Last Name		First		MI	
Heslin		Patricia			
Residential Street Address		City		State	Zip Code
235 Kenyan Street		Hartford		CT	06112
Principal Occupation			Name of Employer		
Service Rep			Omar Coffee		
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		\$100.00	
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		3/14/2019			
Last Name		First		MI	
Holloway		Shawn			
Residential Street Address		City		State	Zip Code
191 Palm Street		Hartford		CT	06112
Principal Occupation			Name of Employer		
Inspector			City of Hartford		
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		\$25.00	
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 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		3/14/2019			
SUBTOTAL Section B — This Page				\$ 150.00	
TOTAL of additional Section B Pages					
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				\$ 2705.00	

Section Q. ADDITIONAL PAGE 1 of 1

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT	
Re Elect Clarke for City Council			April 10	
Q. Campaign Expenses Paid by Candidate				
Name of Payee (Name of Vendor, Person or Entity who candidate paid directly)			Date of Payment	Is reimbursement claimed?
Phoenix Society			2/1/2019	<input type="radio"/> Yes <input checked="" type="radio"/> No
Street Address		City	State	Zip Code
729 Windsor Street		Hartford	CT	06120
Purpose of Expenditure (by code)	Description	Event #	Amount	
	Venue for Kick off fundrasier		\$250.00	
Name of Payee (Name of Vendor, Person or Entity who candidate paid directly)			Date of Payment	Is reimbursement claimed?
Kevin Food Vendor			2/2/2019	<input type="radio"/> Yes <input checked="" type="radio"/> No
Street Address		City	State	Zip Code
48 Westbrook Street		Hartford	CT	06106
Purpose of Expenditure (by code)	Description	Event #	Amount	
	Catering		\$230.00	
Name of Payee (Name of Vendor, Person or Entity who candidate paid directly)			Date of Payment	Is reimbursement claimed?
Jeffrey Williams			2/16/2019	<input type="radio"/> Yes <input checked="" type="radio"/> No
Street Address		City	State	Zip Code
Purpose of Expenditure (by code)	Description	Event #	Amount	
	Event Flyers		\$75.00	
Name of Payee (Name of Vendor, Person or Entity who candidate paid directly)			Date of Payment	Is reimbursement claimed?
				<input type="radio"/> Yes <input type="radio"/> No
Street Address		City	State	Zip Code
Purpose of Expenditure (by code)	Description	Event #	Amount	
Name of Payee (Name of Vendor, Person or Entity who candidate paid directly)			Date of Payment	Is reimbursement claimed?
				<input type="radio"/> Yes <input type="radio"/> No
Street Address		City	State	Zip Code
Purpose of Expenditure (by code)	Description	Event #	Amount	
Name of Payee (Name of Vendor, Person or Entity who candidate paid directly)			Date of Payment	Is reimbursement claimed?
				<input type="radio"/> Yes <input type="radio"/> No
Street Address		City	State	Zip Code
Purpose of Expenditure (by code)	Description	Event #	Amount	
SUBTOTAL Section Q — This Page			\$555.00	