SEEC FORM 20	
Revised January 2015	

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NAME OF COMMITTEE (Provide Complete Nam	e as Registered with Filir	ng Reposit	ory)		TYPE OF REPORT			
Eddie Perez for Hartford		(m, 10.2) minor, maggg		44 - 24 - 44 - 44 - 44 - 44 - 44 - 44 -	July 10 filing			
A. Total Contributions from Small Contribu	tors - Received this P	eriod ON	VLY					
See instructions for definition of Small Contributor,				Subtotal Section A				\$0.00
	B. Itemized Co	ntributio	ons fro	om Individuals				
Last Name		2000	First					M.I.
Lepere			Cocc					
Residential Street Address		City				State	Zip Code	
147 Kent St		Hartford				CT	06112-1	827
Principal Occupation			Name o	f Employer				
dependent child of a lobbyist?	contribution is in excess of \$4 nicipality does contributor of nicipality valued at more that	r business h	didate c e/she is	ommittee for a chief of associated with have	executive officer of a a contract with said No	Amoun	t of Conti	ribution
Yes	tributor a principal of a state	contractor o	or prospe	ective state contractor	? Yes			\$5.00
V No hrane	s, indicate which branch or ches of government the			[] and all	✓ No			
	act is with:		cutive	Legisla				
Method of contribution: Cash Personal Check Credit/Debit Card	Payroll Deduction	Money Orde	er	Date Received 05/18/2019	Aggregate contributions \$5.00			
Last Name			First	00/10/2010	*			M,I.
Levy			Jay					
Residential Street Address		City	7			State	Zip Code	
65 Stroll Rock Cmn		Fairfield				СТ	06824-2	2467
Principal Occupation				of Employer				
Property Owner			Capit	ol Hartford				
dependent child of a lobbyist?	contribution is in excess of \$4 micipality does contributor of micipality valued at more that	r business h	ididate c ie/she is	ommittee for a chief associated with have	executive officer of a a contract with said No	Amour	nt of Cont	ribution
1 Yes	tributor a principal of a state	contractor (or prosp	ective state contractor	? Yes			\$500.00
event reported in Section L1?	s, indicate which branch or ches of government the	_			. No			Ψ000.01
	ract is with:	Exe	ecutive		ative			
Method of contribution: Cash Personal Check Credit/Debit Card	Payroll Deduction	Money Orde	er	Date Received 06/03/2019	Aggregate contributions \$500.00			
			First	00/03/2010	φοσο.σο	<u> </u>		M.I.
Last Name				I				
Lindsay		O's	Mari	IOI1		State	Zip Code	
Residential Street Address		City Vineyard	d			UT	84059-	5582
260 S Sunset Dr Principal Occupation				of Employer		<u> </u>		
Education Technology			Tech	Trep				
dependent child of a lobbyist?	contribution is in excess of \$- micipality does contributor o micipality valued at more tha	er business l	ndidate o ne/she is	committee for a chief associated with have Yes	executive officer of a a contract with said No	Amoui	nt of Cont	ribution
event reported in Section L1? If ye han	tributor a principal of a state s, indicate which branch or thes of government the				✓ No		\$	1,000.00
	ract is with:	∐Exe	ecutive		ative	1		
Method of contribution: Cash Personal Check Credit/Debit Card	Payroli Deduction	Money Orde	er	Date Received 06/23/2019	Aggregate contributions \$1,000.00			

\$1,505.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with Fi		U //		TYPE OF REPORT			
Eddie Perez for Hartford	constant many responses	SS common confine Con		July 10 filing			
A. Total Contributions from Small Contributors - Received this	Period Ol	NLY					
See instructions for definition of Small Contributor)			ubtotal Section A				\$0.00
See Instructions for definition of limits Constitution	ontributi	ons fro	m Individuals				
		First					M,I.
Last Name		Phillip	n				[
London	City	1 111111	Y		State	Zip Code	'
Residential Street Address	Hartford	I			CT	06112-1	1819
181 Blue Hills Ave Principal Occupation	<u> </u>	Name of	f Employer				
FIREIDA OCCUPACION							
ls contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contributo municipality valued at more	r or business l than \$5,000?	he/she is a	associated with have a	a contract with said	Amoun	t of Cont	ribution
Is this contribution associated with an Yes Is contributor a principal of a sta	ate contractor	or prospe	ective state contractor	? Yes	<u> </u>		\$100.00
event reported in Section L1? If yes, indicate which branch	or			✓ No			•
If yes, list Event # branches of government the contract is with:	☐ Ex	ecutive	Legisla	ative			1
Method of contribution: Z Cash	Money Ord		Date Received 06/17/2019	Aggregate contributions \$100.00			
Cash Personal Check Credit/Debit Card Payroll Deduction	Noney Ord		00/17/2019	ψ100.00	<u> </u>		M.I.
Last Name		First					
Lopez		Carlo	os		State	Zip Code	
Residential Street Address	City	aton			CT	06032-	1638
3 Muls Hill Dr	Farming		£ Employer		1		
Principal Occupation		Retire	of Employer ed				
Retired			C L.:- C	augustius officer of a	Т.		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contribute municipality valued at more	or or business than \$5,000?	he/she is	Yes Yes	No No	Amou	nt of Con	tribution
Is this contribution associated with an Yes Is contributor a principal of a st	tate contractor	or prosp	ective state contractor	r? ∐Yes		\$	1,000.00
event reported in Section L1? If yes, indicate which branch				✓ No			•
If yes, list Event # If No branches of government the contract is with:	E	xecutive			-		
Method of contribution: Cash Payroll Deduction Payroll Deduction	TMonor Om	dor	Date Received 04/09/2019	Aggregate contributions \$1,000.0			
Cash Personal Check Credit/Debit Card Payroll Deduction			04/09/2019	Ψ1,000.0			M.I.
Last Name		First					
Lopez-Jaramillo		Mar	ia		State	Zip Code	<u>.l</u>
Residential Street Address	City	aton			CT	06032	
3 Muls Hill Dr	Farmin	<u> </u>	of Employer		1 -		
Principal Occupation Supervisor			ecticut Parking				
1 12 10 11 11 11	of \$400 to a a	andidate :	committee for a chief	executive officer of a	1	nt of Can	tribution
dependent child of a lobbyist? Wo municipality does contribut municipality valued at more	tor or business e than \$5,000°	s he/she is ?	s associated with have	No No	Ainou	int of Con	ili ibulion
ls this contribution associated with an event reported in Section L1? If yes, indicate which branch		er or prosp	_	√No			\$1,000.00
If yes, list Event # VNo branches of government the contract is with:	E	xecutive	eLegis	lative			
Method of contribution:	Money Or	rder	Date Received 04/09/2019	Aggregate contribution \$1,000.0	s 0		

\$2,100.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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IAME OF COMMITTEE (Provide Complet	e Name as Registered with Fil	ling Reposit	tory)		TYPE OF REPORT			
ddie Perez for Hartford			and the second second	Service and an experience of the service of the ser	July 10 filing			
. Total Contributions from Small Con	tributors - Received this	Period Of	NLY					
See instructions for definition of Small Contr	ibutor)	rasi e es r	Sı	ubtotal Section A				\$0.00
see instructions for definition of amon Com-	B. Itemized C	ontributi	ons fro	m Individuals				20,000
L. W.			First	Machines of military of memorines of the				M.I.
Last Name		1	Jame	s				
Lusa		City				State	Zip Code	
Residential Street Address	!	Willingto	on			CT	06279-2	311
119 Polster Rd Principal Occupation		<u> </u>		Employer				
Director		ļ	Expres	ss kitchens				
is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more to	or business f han \$5,000?	he/she is a	Yes	a contract with said ✓ No	Amoun	it of Conti	ibution
ls this contribution associated with an event reported in Section L1? Yes No If yes, list Event #	Is contributor a principal of a state If yes, indicate which branch of branches of government the contract is with:	or	or prospe	ctive state contractor	ative No			\$500.00
Method of contribution: Cash Personal Check Credit/Debit		Money Ord		Date Received 06/07/2019	Aggregate contributions \$500.00			, <u></u>
Last Name	<u></u>		First					M,l,
			Jenn	ifer				<u> </u>
Lusa Residential Street Address		City				State	Zip Code	0011
119 Polster Rd		Willingt	ton			СТ	06279-2	2311
Principal Occupation				f Employer				
Social Worker			The vi	· ·				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributo municipality valued at more	or or business than \$5,000?	he/she is	Yes Yes	No No	Amou	nt of Cont	ribution
Is this contribution associated with an Yes	Is contributor a principal of a sta	ate contractor	r or prosp	ective state contracto	or? Yes	1		\$500.00
event reported in Section L1?	If yes, indicate which branch	ог			✓No			
If yes, list Event #	branches of government the contract is with:	E:	xecutive			4		
Method of contribution:	oit Card Payroll Deduction		rdor	Date Received 06/07/2019	Aggregate contributions \$500.00			
Cash Personal Check Credit/Deb	it Card Payroll Deduction			00/07/2019	Ψουσίο.			M.I.
Last Name			First					
MacDonald			Dav	ia		State	Zip Code	_
Residential Street Address		City Hartfor	rd			CT	06114	
266 Grandview Ter		Tiartio		of Employer				
Principal Occupation Executive Director			AHN	Α	C. V. Character			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contribut municipality valued at more	or or busines e than \$5,000	ss he/she is)?	s associated with hav	Ve a contract with said ✓ No	Amou	ant of Con	tributio
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a s If yes, indicate which branch	n or		-	✓ No			\$50.0
If yes, list Event #	branches of government the contract is with:		Executive	e Legi:	slative	_		
Method of contribution: Cash ✓ Personal Check Credit/Det		Money O)rdor	Date Received 05/18/2019	Aggregate contribution \$50.0			

\$1,050.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)
	(Enter total on Line 13, Column A of Summary Page

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Revised January	2015

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NAME OF COMMITTEE (Provide Cor	mplete Name as Registered with Fil	ling Reposi	tory)		TYPE OF REPORT			
Eddie Perez for Hartford	The second se				July 10 filing			
A. Total Contributions from Small (See instructions for definition of Small C	Contributor)			Subtotal Section A				\$0.00
	B. Itemized C	ontributi	ons f	rom Individuals				
Last Name			First					M,I,
MacDonald			Kyl	е				
Residential Street Address		City	<u> </u>			State	Zip Code	500
11 Tinker Pond Rd		Bolton				CT	06043-7	599
Principal Occupation Driver			Self	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of municipality does contributor municipality valued at more that	or business l	ndidate nc/she i	committee for a chief e is associated with have Yes	executive officer of a a contract with said	Amoun	t of Conti	ribution
Is this contribution associated with an event reported in Section L1?	If yes, indicate which branch or	г	or pros		☑ 100 ☑No			\$500.00
Method of contribution:		Money Ord	ег	Date Received 06/12/2019	Aggregate contributions \$500.00			
Last Name			First					M.I.
Malave			Sai	ntiago				
Residential Street Address		City	'			State	Zip Code	
12 Roslyn St		Hartford				СТ	06106-4	1149
Principal Occupation HR Director				of Employer n of East Hartford	I			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of municipality does contributor municipality valued at more that	or business	ndidate he/she	committee for a chief is associated with have	executive officer of a a contract with said	Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Is contributor a principal of a stat If yes, indicate which branch o branches of government the contract is with:	er —	or pros	FT	✓ No			\$250.00
Method of contribution:		Money Ord	ler	Date Received 04/27/2019	Aggregate contributions \$250.00		<u></u>	,
Last Name			Firs	t				M.l.
Maletta			Mic	chael			,	
Residential Street Address		City Bristol				State CT	Zip Code 06010-2	2820
14 Illinois Ave Principal Occupation CPA			ŧ	of Employer etta and Compan	y CPAs	J.		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of municipality does contributor municipality valued at more t	or business	he/she	e committee for a chief is associated with have Yes	executive officer of a a contract with said No	Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a sta If yes, indicate which branch of branches of government the	or			✓ No			\$250.00
If yes, list Event #	contract is with:	E	cecutiv		ative			
Method of contribution: ☐ Cash Personal Check Credit	/Debit Card Payroll Deduction	Money Ore	der -	Date Received 06/21/2019	Aggregate contributions \$250.00			

\$1,000.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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Levised January 2013							la.	YPE OF REPORT			
NAME OF COMMITTEE (Provide	Complete	Name as	Registered with Fi	ling Repo	ository)		2520	STATE OF THE PROPERTY OF THE P			
Eddie Perez for Hartford							ال	ıly 10 filing			
A. Total Contributions from Sm	all Cont	ributors	s - Received this	Period	ONLY						\$0.00
See instructions for definition of Sma	all Contri	butor)				Subtotal Section	8808				ψ0,00
			B. Itemized (ontribi		om Individual	S	25, 25, 25, 25, 25, 25, 25, 25, 25, 25,		-	M,I.
Last Name					First						,,,,,,
Malone					Jane				I	Zip Code	
Residential Street Address				City	** - F-1				State MA	01085-3	151
174 Main St				West		of Employer			1,	- 1 - 1	
Principal Occupation Executive Director					Partn	ers for Comm					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes ✓ No	municij municij	ibution is in excess of pality does contributo pality valued at more	r or busine than \$5,00	ss he/she is 0?	associated with ha	ave a c	cutive officer of a ontract with said	Amoun	t of Conti	ribution
Is this contribution associated with an event reported in Section L1?	Yes No	If yes, in	itor a principal of a standicate which branch of government the	or				☐ Yes ✓ No			\$100.00
If yes, list Event #		contract			Executive	Date Received		ve aggregate contributions			
Method of contribution: ☐ Cash Personal Check ☐ Cr	redit/Debit	Card [Payroll Deduction	Money (06/21/2019		\$100.00			M.I.
Last Name					First						''''
Martinez					Chr	istopher			Ctoto	Zip Code	<u> </u>
Residential Street Address				City	ard				State CT	06106-	4118
81 Newington Ave				Hartf		of Employer			<u> </u>	<u> </u>	
Principal Occupation Tow Truck Driver					Lam	orer Towning					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes ✓ No	munic munic	ribution is in excess or ipality does contribute ipality valued at more	or or busin than \$5,0	ess he/she i 00?	S associated with h	nave a	contract with said No	Amoui	nt of Cont	tribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Yes No	If yes, i	utor a principal of a s indicate which branch is of government the it is with:	or _	ctor or pros Executiv	— .	gislati				\$20.00
Method of contribution: ✓ Cash Personal Check C	redit/Debit		Payroll Deduction	Money	Order	Date Received 06/08/2019	,	Aggregate contributions \$20.00			
Last Name	· · · · ·				Firs	t					M.I.
Martinez					Ма	ıry					ļ
Residential Street Address				City	ford				State CT	Zip Code 06120	
7 Mary Shepard Pl				Hari		e of Employer				_1,	
Principal Occupation											
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	munic	stribution is in excess cipality does contribu cipality valued at mor	tor or basing to than \$5,0	ness he/she 100?	Yes	nave a	✓ No	Amou	nt of Con	tribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	☐ Yes ✓ No	If yes, branch	butor a principal of a indicate which brances of government the et is with:	h or	actor or pro		ractor? egisla	✓ No			\$50.0
Method of contribution:	Credit/Debi		Payroll Deduction	Mone	y Order	Date Received 06/04/2019		Aggregate contribution \$50.0			
I VICTORIA CHICAGO											

\$170.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page
	(Enteroperation and Transfer an

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NAME OF COMMITTEE (Provide Comple	te Name as Registered with Fil	ing Reposit	ory)		TYPE OF REPORT			
Eddie Perez for Hartford	9				July 10 filing			
A. Total Contributions from Small Co	ntributors - Received this l	Period Of	NLY.					_
See instructions for definition of Small Com				Subtotal Section A				\$0.00
see instructions for definition of omain com	B. Itemized Co	ontributio	ons fr	om Individuals				
Last Name			First					M.I.
			Yise	nia				
Martinez		City				State	Zip Code	
Residential Street Address 1580 Main St, Apt 3A		Hartford				СТ	06120-2	2718
Principal Occupation			Name	of Employer				
is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes V No Is this contribution associated with an Yes	If contribution is in excess of a municipality does contributor municipality valued at more the scontributor a principal of a state.	or business h ıan \$5,000?	ie/she i:	s associated with have a	No No	Amoun	t of Cont	ribution \$10.00
event reported in Section L1? If yes, list Event #	If yes, indicate which branch or branches of government the contract is with:		ecutive	e Legisla		ļ		•
Method of contribution: Cash Personal Check Credit/Deb		Money Ord	er	Date Received 06/19/2019	Aggregate contributions \$10.00			T > 67
Last Name			First					M.I.
McGee			Noi	ris				<u> </u>
Residential Street Address		City				State	Zip Code 06112-	1734
144 Granby St		Hartford					00112	1704
Principal Occupation			Name	of Employer				ĺ
					50	1		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor municipality valued at more t	r or business than \$5,000?	he/she	is associated with have	No No	Amou	nt of Con	ribution
Is this contribution associated with an Yes	Is contributor a principal of a sta	te contractor	or pros	spective state contractor	T? Yes			\$20.00
event reported in Section L1?	If yes, indicate which branch of branches of government the	_			✓ No			
If yes, list Event #	contract is with:		cecutiv			4		
Method of contribution:	bit Card Payroll Deduction	Money Ord	ler	Date Received 06/08/2019	Aggregate contributions \$20.00			
Cash Personal Check Credit/De	bit Card		Firs	<u> </u>	<u> </u>	·	· · ·	M.I.
Last Name				san				
McMullen		City	Su	Sali		State	Zip Code	
Residential Street Address		North F	(ings	town		RI	02852	-6842
40 Web Ave		1		e of Employer		<u> </u>		
Principal Occupation Retired			Ret		avantive officer of a	T.:		· 'T - 4' · · ·
Is contributor a fobbyist, spouse, or dependent child of a lobbyist?	municipality does contribute municipality valued at more	or or business than \$5,000	he/she	is associated with have	No	Amou	int of Con	tribution
is this contribution associated with an event reported in Section L1?	If yes, indicate which branch branches of government the	or	r or pro xecuti	F7	✓ No			\$50.00
If yes, list Event # Method of contribution:	contract is with:			Date Received	Aggregate contribution	-		
Cash Personal Check Credit/De	ebit Card Payroll Deduction	Money Or	rder	04/26/2019	\$50.0	IU[

\$80.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page
	(Enter total off Line 15, Column A of California) 1-5

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Revised Issuant	2015

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NAME OF COMMITTEE (Provide Com	plete Name as Registered with Fi	iling Reposi	tory)		TYPE OF REPORT			
Eddie Perez for Hartford	The same as a remain through the Control of the same and				July 10 filing			
A. Total Contributions from Small C	Contributors - Received this	Period O	NLY					
(See instructions for definition of Small Co	ontributor)			Subtotal Section A				\$0.00
	B. Itemized C	Contributi	ons f	rom Individuals		8 8 8		
Last Name	Control Contro		First					M.I.
Mendez			Ser	afin				
Residential Street Address		City	_			State	Zip Code	
71 B Imlay St		Hartford				СТ	06105-3	3609
Principal Occupation				of Employer of Connecticut				
College Professor								
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor	r or business l	ndidate he/she	committee for a chief of a special section is associated with have	executive officer of a a contract with said	Amoun	t of Cont	ribution
Is this contribution associated with an Yes	Is contributor a principal of a sta	te contractor	or pros	pective state contractor	? Yes			\$300.00
event reported in Section L1?	If yes, indicate which branch of branches of government the				. ✓ No			Ψ000.00
If yes, list Event #	contract is with:	Ex	ecutiv	e Legisla	ative			
Method of contribution: Cash Personal Check Credit/D	ebit Card Payroll Deduction	Money Ord	ег	Date Received 06/24/2019	Aggregate contributions \$300.00			
Last Name			Firs					M.i.
Mercado			Mir	iam				
Residential Street Address		City	1			State	Zip Code	
65 Roslyn St		Hartford	t			CT	06106-4	4125
Principal Occupation Retired			Name Reti	of Employer red				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality dose contributor	r or business l	ndidate he/she	committee for a chief is associated with have Yes	executive officer of a a contract with said No	Amour	t of Cont	ribution
Is this contribution associated with an event reported in Section L1?	If yes, indicate which branch of		or pros		✓ No			\$100.00
If yes, list Event #	branches of government the contract is with:	Ех	ecutiv	re Legisl	ative			
Method of contribution: Cash Personal Check Credit/D	ebit Card Payroll Deduction	Money Ord	leт	Date Received 05/03/2019	Aggregate contributions \$100.00			
Last Name			Firs	t				M.1.
Mercer			Co	ra				
Residential Street Address		City				State	Zip Code	
489 Norton Pkwy		New Ha	aven			CT	06511-	1637
Principal Occupation			Name	e of Employer				
Is contributor a lobbyist, spouse, or Y dependent child of a lobbyist?	municipality does contribute	r or business	he/she	e committee for a chief is associated with have Yes	executive officer of a a contract with said	Amoui	ıt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	s Is contributor a principal of a sta		or pro	spective state contracto	r? Yes			\$100.00
If yes, list Event #	If yes, indicate which branch branches of government the contract is with:		cecutiv	e Legisl	ative No			
Method of contribution:	Debit Card Payroll Deduction	Money Ord	ler	Date Received 05/03/2019	Aggregate contributions \$100.00			

\$500.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide	Complete	Name as Registered with Fil	ing Reposi	tory)		TYPE OF REPORT			
Eddie Perez for Hartford		pagaga yang tersi ken Demand Arabanda dapan terbah 1960, Arabanda dapan 1961 ili ili ili ili ili interiori Terbah				July 10 filing			
A. Total Contributions from Sm.	all Conti	ibutors - Received this	Period O	NLY					
See instructions for definition of Sma					Subtotal Section A				\$0.00
			ontributi	ons fr	om Individuals				65 (64.66)
Last Name				First					M.I.
Merida				Alex	kander				
Residential Street Address			City	1			State	Zip Code	
1617 Boulevard			West H	artford	į		СТ	06107-2	2502
Principal Occupation				l .	of Employer				
Insurance Sales				Assu	red Partners				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more than	or business l	ndidate he/she is	committee for a chief es associated with have	executive officer of a a contract with said	Amoun	t of Cont	ribution
Is this contribution associated with an	Yes I	s contributor a principal of a state	e contractor	or pros	pective state contractor	? Yes		\$	1,000.00
event reported in Section L1?	No No	If yes, indicate which branch or branches of government the	r			✓No		Ψ	1,000.00
If yes, list Event #	3140	contract is with:	☐Ex	ecutive	Legisla	ative			
Method of contribution: Cash ✓ Personal Check ☐ Cre	edit/Debit C	ard Payroll Deduction	Money Ord	er	Date Received 05/03/2019	Aggregate contributions \$1,000.00			
Last Name		······································		First				•	M.I.
Merida				Dar	niel				
Residential Street Address			City				State	Zip Code	
37 Cranberry Ln			Middlet	own			CT	06457-	5163
Principal Occupation				Name None	of Employer ∋				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business	ndidate he/she i	conunittee for a chief of a sassociated with have Yes	executive officer of a a contract with said No	Amour	t of Cont	ribution
Is this contribution associated with an event reported in Section L1?]Yes I	s contributor a principal of a stat If yes, indicate which branch of		or pros	pective state contractor				\$100.0
If yes, list Event #	Z]No	branches of government the contract is with:	_	ecutiv	eLegisl				
Method of contribution: Cash Personal Check Cre	edit/Debit C	ard Payroll Deduction	Money Ord	ler	Date Received 04/04/2019	Aggregate contributions \$650.00			
Last Name				First		 			M,I.
Merida				Dar	niel				
Residential Street Address			City	í			State	Zip Code	
37 Cranberry Ln			Middlet	own			СТ	06457-	5163
Principal Occupation				Name None	of Employer 9	***			
Is contributor a lobbyist, spouse, or	Yes	If contribution is in excess of	\$400 to a ce	i ndidate	committee for a chief	executive officer of a	A	it of Conf	
1 1 1 1 1 1 1 2 1 1 1 2 2 2 2 2 2 2 2 2	✓ No	municipality does contributor municipality valued at more t	or business	he/she	is associated with have	a contract with said No	Amoui	it or Coni	Hanne
Is this contribution associated with an	Yes	s contributor a principal of a stat	te contractor	or pros	pective state contracto	r? Yes			\$500.0
event reported in Section L1?	No	If yes, indicate which branch of	r			✓No			φυσυ.υ
If yes, list Event#	7170	branches of government the contract is with:	E>	cecutiv	eLegisl	ative			
Method of contribution: Cash Personal Check Cre	edit/Debit C	ard Payroll Deduction	Money Ore	ier	Date Received 05/30/2019	Aggregate contributions \$650.00	1		
					.				

\$1,600.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with Filing	g Reposit	ory)		TYPE OF REPORT			
Eddie Perez for Hartford				July 10 filing	200000000000000000000000000000000000000	ipannipes anama	
A. Total Contributions from Small Contributors - Received this Per	riod ON	VLY					
See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
B. Itemized Con	tributio	ns fr	om Individuals				
Last Name		First					M.I.
Merida	Į.	Dani	ie l				
	City				State	Zip Code	
37 Cranberry Ln	Viiddleto	wn			СТ	06457-5	163
Principal Occupation		None					,,,,,
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$40 municipality does contributor or be municipality valued at more than	business h	didate o e/she is	ommittee for a chief e associated with have a Yes	executive officer of a contract with said	Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state contributor in Section L1? If yes, indicate which branch or	ontractor o	r prosp	ective state contractor	?			\$50.00
If yes, list Event # branches of government the contract is with:	Exe	cutive	Legisla	tive			
Method of contribution:	loney Orde	r	Date Received 06/28/2019	Aggregate contributions \$650.00			
Last Name		First					M.I.
Millet Saez		Myri	na				L
Residential Direct Fadices	City				State	Zip Code	
47 Whiton St	Windsor				СТ	06096	
Principal Occupation Social Worker/ MCM		Name of	of Employer C				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$40 municipality does contributor or municipality valued at more than	business h	ididate o ie/she is	committee for a chief of a ssociated with have Yes	executive officer of a a contract with said	Amour	at of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state of fyes, indicate which branch or branches of government the contract is with:	_	or prosp	 1	✓ No			\$20.00
Method of contribution:	Money Orde	er	Date Received 06/12/2019	Aggregate contributions \$20.00			
Last Name		First					M.I.
Milton		Jam	nes				
Residential Street Address	City Bloomfie	eld			State CT	Zip Code 06002-	3929
Principal Occupation Electrician		Tyso	of Employer n Electric				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$40 municipality does contributor or municipality valued at more than	business 1: n \$5,000?	he/she is	s associated with have	a contract with said No	Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state c If yes, indicate which branch or branches of government the	contractor (or prosj		✓ No			\$20.0
If yes, list Event # contract is with:	Exe	ecutive		ative	-		
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction M	Money Orde	er	Date Received 06/17/2019	Aggregate contributions \$20.00	1		

\$90.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered wit	th Filing Reposi	itory)		TYPE OF REPORT			
Eddie Perez for Hartford	er mengapatan kemendah Pendan Architektur			July 10 filing			
A. Total Contributions from Small Contributors - Received t	his Period O	NLY					
- See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
	ed Contributi	ions fi	om Individuals				- 50 SW
Last Name	STREET SELECTION OF STREET	First					M.I.
Morales		Juli	0				
Residential Street Address	City				State	Zip Code	
105 Pheasant Run	Vernon				СТ	06066-2	2760
Principal Occupation		ł .	of Employer				
		Retir					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in exce municipality does contribution. Yes municipality valued at municipality valued at municipality valued.	butor or business	ndidate he/she i	committee for a chief s associated with have	executive officer of a a contract with said No	Amour	it of Conti	ribution
Is this contribution associated with an event reported in Section L17 Yes Is contributor a principal of If yes, indicate which branches of government the branches of government the section L17.	nch or	or pros		☑ No			\$100.00
## ## ## ## ## ## ## ## ## ## ## ## ##			Date Received 06/28/2019	Aggregate contributions \$100.00			
		First			<u></u>		M.I.
Last Name			aris				
Moralis	City	701	alio		State	Zip Code	J
Residential Street Address	Hartfor	d			СТ	06106-2	2743
56 Norwich St Principal Occupation		Name	of Employer				
LPN		Hop	e Homecare				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excemunicipality does contribution is in excemunicipality does contribution is in excemunicipality does contribution is in excemunicipality.	ibutor or business	he/she	committee for a chief is associated with have	executive officer of a a contract with said No	Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Is contributor a principal of If yes, indicate which bra branches of government to	nch or		<u> </u>	✓ No			\$20.0
If yes, list Event # contract is with:		xecutiv	Date Received	Aggregate contributions			
Method of contribution: ✓ Cash Personal Check Credit/Debit Card Payroll Deduction	on Money Or	der	06/28/2019	\$20.0	. 1		
Last Name		Firs	t				M.I.
Morrison		Ro	bert				
Residential Street Address	City				State	Zip Code	
101 Brookside Cir	Wethe	rsfield			СТ	06109-	1130
Principal Occupation Special police officer		Har	of Employer Iford board of Ed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in exc municipality does contribution is in exc municipality does contribution.	ributor or business more than \$5,000	s he/she ?	is associated with hav	e a contract with said No	Amou	nt of Con	tributio
Is this contribution associated with an event reported in Section L1? Is contributor a principal of If yes, indicate which by branches of government of the section of the	anch or		<u> </u>	√No			\$5.0
If yes, list Event # orances of government contract is with:	<u> </u>	xecuti		lative	4		
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Debit Card ☐ Payroll Deduction	ion Money O	rder	Date Received 06/28/2019	Aggregate contribution \$5.0			

\$125.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Nam	ne as Registered with Filing Repos	itory)		TYPE OF REPORT			
Eddie Perez for Hartford				July 10 filing			
A. Total Contributions from Small Contribu (See instructions for definition of Small Contributor			al Section A				\$0.00
	B. Itemized Contribut	ions from In	dividuals				
Last Name	2000	First					M.I.
Naimah		Shabazz					
Residential Street Address	City				State	Zip Code	
PO Box 1683	Hartfor	d			CT	06144-1	683
Principal Occupation		Name of Emplo					
dependent child of a lobbyist?	contribution is in excess of \$400 to a ca micipality does contributor or business micipality valued at more than \$5,000?	he/she is associa	ee for a chief en ted with have a]Yes	secutive officer of a contract with said No	Amoun	t of Contr	ribution
event reported in Section L1? Yes If ye V No bran	tributor a principal of a state contractor s, indicate which branch or clies of government the ract is with:	or prospective s	tate contractor?	✓ No			\$100.00
Method of contribution: Method of contribution: Credit/Debit Card	Payroll Deduction Money Or	1	eceived 1/2019	Aggregate contributions \$100.00			
Last Name		First					M.I.
Natal		Ana					
Residential Street Address	City	<u> </u>			State	Zip Code	.57.477
27 Sequin St	Hartfor	ď			СТ	06106-3	3/4/
Principal Occupation		Name of Empi					
dependent child of a lobbyist?	contribution is in excess of \$400 to a c unicipality does contributor or business unicipality valued at more than \$5,000	he/she is associa	ted with have a	ontract with said No	Amoun	it of Cont	ribution
event reported in Section L1? If ye	ntributor a principal of a state contractors, indicate which branch or niches of government the E	r or prospective s xecutive	state contractor	✓ No			\$100.00
Method of contribution: Cash Cash Credit/Debit Card	Payroll Deduction Money Or	I .	Received 3/2019	Aggregate contributions \$200.00			
Last Name		First					M.I.
Natal		Ana					
Residential Street Address	City	_			State	Zip Code	2747
27 Sequin St	Hartfo	.,			СТ	06106-3	5/4/
Principal Occupation		Name of Empl	loyer				
dependent child of a lobbyist?	Contribution is in excess of \$400 to a commicipality does contributor or busines unicipality valued at more than \$5,000	s he/she is associ ?	ated with have Yes	a contract with said No	Amour	nt of Cont	ribution
event reported in Section L1?	ntributor a principal of a state contractors, indicate which branch or niches of government the		_	✓ No			\$50.00
	atract is with:	xecutive	Legisla	ative	-		
Method of contribution: Cash ✓ Personal Check Credit/Debit Card	Payroll Deduction Money O		Received 8/2019	Aggregate contributions \$200.00			

\$250.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT					
Eddie Perez for Hartford July 10 filing								
A. Total Contributions from Small Contributors - R	leceived this P	eriod Oi	NLY					
(See instructions for definition of Small Contributor)				Subtotal Section A				\$0.00
F	3. Itemized Co	ntributie	ns fr	om Individuals				
Last Name			First					M.I.
Natal			Ana					
Residential Street Address		City				State CT	Zip Code 06106-3	747
27 Sequin St		Hartford		en 1		CI	00100-3	1/4/
Principal Occupation				of Employer				
dependent child of a lobbyist?	on is in excess of \$4 does contributor or valued at more than	r business h	didate o	committee for a chief of a sassociated with have	executive officer of a a contract with said	Amoun	t of Conti	ribution
event reported in Section L1? If yes, indicate If yes, indicate	e which branch or overnment the		or prosp	ective state contractor	☑ No			\$50.00
Method of contribution:		Money Orde	1	Date Received 06/28/2019	Aggregate contributions \$200.00			
Last Name			First			· · · · · · · · · · · · · · · · · · ·		M.I.
Nelson			Mar	c				
Residential Street Address	3	City				State	Zip Code	1704
72 N Water St		Poughk				NY	12601-1	1/21
Principal Occupation City Manager			City i	of Employer if Poughkeepsie				***
dependent child of a lobbyist? municipality	on is in excess of \$4 does contributor or valued at more tha	r business l	ididate ie/slic i	committee for a chief s associated with have Yes	executive officer of a a contract with said No	Amoun	t of Cont	ribution
Yes		contractor	or pros	pective state contracto	r? Yes			\$100.00
event reported in Section L1? If yes, indicate branches of geometric with the section L1? If yes, list Event #		Exe	ecutive	eLegisl	ative No			
Method of contribution:		Money Ordo	er	Date Received 06/28/2019	Aggregate contributions \$100.00			
Last Name			First					M.I.
Nieves-Cross			Iris			1	I a: a i	
Residential Street Address		City Hartford	Į.			State CT	Zip Code 06112-	1417
129 Cornwall St Principal Occupation		randore		of Employer				
Supervisor			Hisp	anic Health Cou				
dependent child of a lobbyist?	y does contributor o y valued at more tha	or business l an \$5,000?	ne/she i	committee for a chief is associated with have Yes	a contract with said No	Amoun	it of Cont	ribution
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: Executive Legislative			\$50.00					
Method of contribution:	roll Deduction			Date Received 05/03/2019	Aggregate contributions \$50.00)		

\$200.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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IAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT				
Eddie Perez for Hartford				July 10 filing			
A. Total Contributions from Small Contributors	- Received this Period	ONI	LY				
(See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
	B. Itemized Contrib	ution	s from Individuals		651,66	e en Estado	
Last Name		F	First				M.I.
Ortiz		[David				
Residential Street Address	City	1			State	Zip Code	
133 Coolidge St	Hartf	ord			CT	06106-3	776
Principal Occupation			ame of Employer				
SPO		B	oard of Education				
dependent child of a lobbyist?	bution is in excess of \$400 to a ality does contributor or busine ality valued at more than \$5,00	ess he/s 00?	she is associated with have a	contract with said No	Amoun	t of Contr	ibution
event reported in Section L1? If yes, includes the branches of the branches	or a principal of a state contract ficate which branch or of government the	Execu		✓ No			\$25.00
Method of contribution:	Payroll Deduction Money	Order	Date Received 06/08/2019	Aggregate contributions \$25.00			
Last Name		1	First				M.I.
Ortiz			Luldes				
Residential Street Address	City				State	Zip Code	
338 Avery St	Sout	h Wir	ndsor		CT	06074-3	3002
Principal Occupation		N	ame of Employer				
dependent child of a lobbyist?	bution is in excess of \$400 to a ality does contributor or busin ality valued at more than \$5,0	ess he/ 00?	she is associated with have a	contract with said No	Amoun	t of Cont	ribution
event reported in Section L1?	or a principal of a state contract dicate which branch or of government the	ctor or Exec	—	☑ No			\$50.00
Method of contribution:	Payroll Deduction Money	Order	Date Received 06/08/2019	Aggregate contributions \$50.00			
Last Name		"]	First	<u>-</u>			M.I.
Ortiz			Maria				
Residential Street Address	City	J			State	Zip Code	
4 Hansen Dr	Vern	non			СТ	06066-	915
Principal Occupation		N	Jame of Employer				
dependent child of a lobbyist?	ibution is in excess of \$400 to ality does contributor or busin ality valued at more than \$5,0	iess he/ 000?	/she is associated with have	a contract with said No	Amour	nt of Cont	ribution
event reported in Section L1? If yes, in	tor a principal of a state contra dicate which branch or	ictor or	prospective state contractor	? ☐ Yes ✓ No			\$50.00
Hyes, list Event # VNo branches contract is	of government the swith:	Exec	cutiveLegisla	ative			
Method of contribution: ☐ Cash	Payroll Deduction Money	Order	Date Received 06/08/2019	Aggregate contributions \$50.00)		

\$125.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Register	red with Filing Repos	itory)		TYPE OF REPORT			
Eddie Perez for Hartford				July 10 filing			
A. Total Contributions from Small Contributors - Rece	eived this Period O	NLY					
(See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
	temized Contribut	ions fr	om Individuals				
Last Name	Service Committee (Service Service Ser	First					M.I.
Otero		Van	essa				
Residential Street Address	City				State	Zip Code	
1607 Main St	Springf	ield			MA	01103-1	234
Principal Occupation		1	of Employer				
Administrator		PFC					
dependent child of a lobbyist?	in excess of \$400 to a cass contributor or business ued at more than \$5,000?	he/shc is	associated with have Yes	a contract with said No	Amoun	t of Conti	ribution
event reported in Section L1? If yes, indicate when the property of powers of powers.	ament the	or prosp		✓No			\$200.00
If yes, list Event # contract is with: Method of contribution:			Date Received	Aggregate contributions \$200.00			
Cash Personal Check Credit/Debit Card Payroll I	Deduction Money Or		06/21/2019	\$200.00	Ί		M.I.
Last Name		First					171.1.
Pacion		Luis	·		04-4-	Zin Codo	
Residential Street Address	City				State	Zip Code	
Principal Occupation		Name	of Employer				
dependent child of a lobbyist? municipality doe	s in excess of \$400 to a cost contributor or business ued at more than \$5,000	he/she i	committee for a chief s associated with have Yes	executive officer of a a contract with said No	Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, indicate we branches of govern contract is with:	nment the	r or pros xecutive		✓No			\$15.00
Method of contribution:	Deduction Money Or	der	Date Received 06/28/2019	Aggregate contributions \$15.00	.		
Last Name		First					M.I.
Padilla		Sau	ıl				
Residential Street Address	City				State	Zip Code	
37 Foley St	West I				СТ	06110-	112/
Principal Occupation Construction		Name Self	of Employer				
dependent child of a lobbyist? No municipality value of the control of the contr	s in excess of \$400 to a c es contributor or busines fued at more than \$5,000	s he/she i	is associated with have	a contract with said No	Amou	nt of Con	tribution
event reported in Section L1? If yes, indicate w	ncipal of a state contractor which branch or	or pros	pective state contracto	Ш			\$250.0
If yes, list Event # branches of gover contract is with:	mmont the	xecutiv			_		
Method of contribution: Cash ✓ Personal Check ☐ Credit/Debit Card ☐ Payroll	Deduction Money O	rder	Date Received 06/03/2019	Aggregate contribution \$250.0			

\$465.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Comp	lete Name as Registered with Fil	ling Reposi	tory)		TYPE OF REPORT			6.00.0	
Eddie Perez for Hartford					July 10 filing				
A. Total Contributions from Small C (See instructions for definition of Small Co		Period O	NLY	Subtotal Section A				\$0.00	
	B. Itemized C	ontributi	ons f	rom Individuals	a sa Bay sa Bay				
Last Name			First					M.I.	
Pagan			Em	elin					
Residential Street Address		City		<i>"</i>		State CT	Zip Code 06106-3	1525	
255 Hillside Ave		Hartford				CI	00100-3	1000	
Principal Occupation Unemployed			Une	of Employer mployed					
ls contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor municipality valued at more the	or business l han \$5,000?	he/she	is associated with have	a contract with said No	Amoun	t of Cont	ribution	
Is this contribution associated with an event reported in Section L1? If yes, list Event #	ent reported in Section L1? If yes, indicate which branch or Pranches of government the						\$30.00		
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/De		Money Ord	ler	Date Received 06/12/2019	Aggregate contributions \$30.00				
Last Name			Firs	t				M.I.	
Palmer			Bry	/an					
Residential Street Address		City				State	Zip Code	200	
814 Albany Ave		Hartford				CT	06112-	3302	
Principal Occupation Electrician			₽&	e of Employer E Electric LLC			.,		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor municipality valued at more t	or business han \$5,000?	he/she	is associated with have	a contract with said No	Amour	nt of Cont	ribution	
Is this contribution associated with an event reported in Section L1? Yes	Is contributor a principal of a state of yes, indicate which branch of branches of government the contract is with:	or	or pro		✓ No			\$500.00	
Method of contribution: ☐ Cash		Money Ord	ier .	Date Received 06/17/2019	Aggregate contributions \$500.00)			
Last Name			Firs	st				M.I.	
Perez			Br	unilda					
Residential Street Address		City	- 4°-	-d		State CT	Zip Code 06118-		
544 Silver Ln		East H				01	1 00110	1100	
Principal Occupation Administrative Assistant			Har	e of Employer tford Hospital					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor municipality valued at more	r or business than \$5,000?	he/she	is associated with have	a contract with said No	Amou	nt of Con	tribution	
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a sta If yes, indicate which branch of branches of government the	OF			✓ No		\$	31,000.00	
If yes, list Event # Method of contribution:	contract is with:		xecuti	Date Received	Aggregate contributions				
	ebit Card Payroll Deduction	Money Or	der	05/30/2019	\$1,000.0	4			

\$1,530.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with Filing	Reposito	ory)		TYPE OF REPORT			
Eddie Perez for Hartford		(01)C#30/113C5	Control of Control Charles and Charles and Control Charles and Control Charles and Control Charles and Cha	July 10 filing			
A. Total Contributions from Small Contributors - Received this Per	riod ON	ПY					
See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
B, Itemized Cont	tributio	ns fr	om Individuals				
		First					M.I.
Last Name		Jose	•				
Perez	ity	3030			State	Zip Code	
Residential Street Address	ny Springfie	eld			MA	01107-1	169
843 Chestnut St	<u> </u>		of Employer				
Principal Occupation							
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$400 municipality does contributor or b municipality valued at more than	business he \$5,000?	e/she is	associated with have	No No	Amoun	t of Conti	ribution
Is this contribution associated with an event reported in Section L1? Is contributor a principal of a state of If yes, indicate which branch or branches of government the		or prosp ecutive	r—	✓ No			\$500.00
## ## ## ## ## ## ## ## ## ## ## ## ##		T	Date Received 06/21/2019	Aggregate contributions \$500.00			
Last Name		First					M.I.
		San	nuel] [
Perez Residential Street Address	City				State	Zip Code	
92 Flatbush Ave	Hartford				СТ	06106-3	3810
Principal Occupation Union Carpenter			of Employer Istics Inc				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$46 intunicipality does contributor or municipality valued at more than	business l 1 \$5,000?	ne/she i	s associated with have	No No	Amoui	it of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state c If yes, indicate which branch or branches of government the	_	or pros ecutiv		✓No			\$20.00
If yes, list Event # contract is with:		County	Date Received	Aggregate contributions	1		
Method of contribution:	Aoπey Ord	er	04/04/2019	\$40.00			1) ()
Last Name		First					M.i.
Perez		Sai	nuel		1 0: -	1 7:- C- 4e	<u> </u>
Residential Sireel Address	City	a.			State	Zip Code 06106-	
92 Flatbush Ave	Hartford		of Francisco			1 -3.00	
Principal Occupation Union Carpenter		Aco	of Employer ustics Inc		T		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$4 municipality does contributor or municipality valued at more than	r business in \$5,000?	he/she	is associated with have	No No	Amou	nt of Con	tribution
Is this contribution associated with an event reported in Section L1? Yes If yes, indicate which branch or branches of government the	_			✓ No			\$20.00
If yes, list Event # contract is with:	E	kecutiv	Date Received	Aggregate contribution	s		
Method of contribution: ✓ Cash Personal Check Credit/Debit Card Payroll Deduction to Payroll Deduction	Money Or	der	06/17/2019	\$40.0	_		

\$540.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)
	(Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with Filing	Repositor	(ער		TYPE OF REPORT			
			\$ 100 miles 100 miles	July 10 filing			
Eddie Perez for Hartford A. Total Contributions from Small Contributors - Received this Per	ind ON	i.Y					
		S	ubtotal Section A				\$0.00
See instructions for definition of Small Contributor) B. Itemized Cont	teibution	54.24				angras din	
	SCATTAL SECTION SECTIO	First			Selling of the Sellin		M,I,
Last Name		 Willia	m				
Perez		vviilla			State	Zip Code	
Residential Street Address Ci	ity Iartford				CT	06106-3	3470
61 Westbrook St		lame of	Employer				
Principal Occupation Retired	- 1	Retire					
	O to a sandi	idata ar	mmittee for a chief e	xecutive officer of a	A	t of Cont	wibution
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes Hf contribution is in excess of \$400 municipality does contributor or b municipality valued at more than \$100	ousiness he/	she is a	associated with have	a contract with said No	Amoun	it of Cont	LIDUTION
le contributor a principal of a state co		ргоѕре	ctive state contractor	? Yes		4	1,000.00
event reported in Section L1? If yes, indicate which branch or				. ✓No		Ψ	1,000.00
If yes, list Event # branches of government the contract is with:	Exec	cutive	Legisla	tive			
Mathed of contribution:			Date Received	Aggregate contributions			
Cash Personal Cleck Credit/Debit Card Payroll Deduction Mo	oney Order		05/13/2019	\$1,000.00	<u></u>		1 141
Last Name		First					M.I.
Perleche		Lidia					<u> </u>
	City			·	State	Zip Code	1725
91 Henry St	Hartford				СТ	06114-	1735
Principal Occupation		Name o	f Employer				
Is contributor a lobbyist, spouse, or Yes If contribution is in excess of \$40	00 to a cond	didate c	ommittee for a chief	executive officer of a	A mou	nt of Con	tribution
dependent child of a lobbyist? No municipality does contributor or municipality valued at more than	business he s5,000?	e/shc is	Yes Yes	No No		,,, or our	
Is this contribution associated with an Yes Is contributor a principal of a state of	contractor of	r prosp	ective state contracto	r? Yes			\$10.00
event reported in Section L1? If yes, indicate which branch or			_	✓ No			
If yes, list Event # branches of government the contract is with:	Exe	cutive	Legis	ative	4		
Method of contribution:	. 01		Date Received	Aggregate contributions \$10.00			
Cash Personal Check Credit/Debit Card Payroll Deduction M	Ioney Order	<u> </u>	06/08/2019	\$10.0	<u> </u>		M.I.
Last Name		First					1,,,,,
Pittola		Dan	nien		1 0/ 1	Zip Cod	
	City	اما ـ			State MA	01109	
70 Bowdoin St	Springfie		AD 1		1		
Principal Occupation VD of HR		Partr	of Employer ners for Commu				
Is contributor a lobbyist, spouse, or Yes If contribution is in excess of \$4 municipality does contributor or municipality valued at more than	r business h in \$5,000?	ic/she i	s associated with hav	✓ No	Amou	int of Cor	tribution
Is this contribution associated with an Yes Is contributor a principal of a state of	contractor (or pros	pective state contract	or? Yes			\$100.0
event reported in Section L1? If yes, indicate which branch or branches of government the	<u>-</u> -		□ ,	√ No			
If yes, list Event # contract is with:	Exe	ecutiv					
Method of contribution: ✓ Cash Personal Check Credit/Debit Card Payroll Deduction Method of Contribution Personal Check Credit/Debit Card Payroll Deduction	Money Orde	er	Date Received 06/21/2019	Aggregate contribution \$100.0			

\$1,110.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B)
	(Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Com	olete Name as Registered with Fi	ling Reposi	tory)		TYPE OF REPORT			
Eddie Perez for Hartford		and programme of the second second second			July 10 filing			
A. Total Contributions from Small C	ontributors - Received this	Period O	NLY					"
See instructions for definition of Small Co				Subtotal Section A				\$0.00
		ontributi	ons fi	rom Individuals				
Last Name		DEED-REGISTRANCE OF THE PARTY O	First	### White State State Community Service State St				M.I.
Porras			Erik	(a				
Residential Street Address		City				State	Zip Code	
48 Linwood Dr		Bloomfi	eld			СТ	06002-1	717
Principal Occupation				of Employer				
Finance			Prud	lential				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor municipality valued at more t	or business l han \$5,000?	he/she i	is associated with have	a contract with said No	Amoun	t of Cont	ribution
Is this contribution associated with an Yes	Is contributor a principal of a state	te contractor	or pros	pective state contractor	? Yes			\$60.00
event reported in Section L1?	If yes, indicate which branch o	ır .		_	✓No			ψου.ου
If yes, list Event #	branches of government the contract is with:	☐ Ex	ecutiv	e Legisl	ative			
Method of contribution: Cash Personal Check Credit/Do	bit Card Payroll Deduction	Money Ord	er	Date Received 06/28/2019	Aggregate contributions \$60.00			
Last Name			First	i				M.I.
Powell			Ro	dney				
Residential Street Address		City	·			State	Zip Code	
121 Walbridge Rd		West H	artfor	d		СТ	06119-	1052
Principal Occupation Eversource Energy				of Employer y executive				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor municipality valued at more t	r or business than \$5,000?	he/she	is associated with have	a contract with said No	Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1?	If yes, indicate which branch of		or pro	spective state contracto	^{r?} ☐ Yes ✓ No		\$	1,000.00
If yes, list Event #	branches of government the contract is with:	☐ Ex	recutiv	e Legisl	ative]		
Method of contribution: Cash Personal Check Credit/D	ebit Card Payroll Deduction	Money Ord	ler	Date Received 06/29/2019	Aggregate contributions \$1,000.00			
Last Name			Firs	t				M,I.
Quiros			An	gel				
Residential Street Address		City				State	Zip Code	0004
100 Executive Sq		Wether	rsfield			CT	06109-	3821
Principal Occupation			Nam	e of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	January Farry Control	r or business than \$5,000?	he/she	is associated with have	e a contract with said No	Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	If yes, indicate which branch		r or pro	spective state contracto				\$20.00
If yes, list Event #			xecuti					
Method of contribution: Cash Personal Check Credit/E	ebit Card Payroll Deduction	Money Or	der	Date Received 05/18/2019	Aggregate contributions \$20.00	. 1		

\$1,080.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Comple	ete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT			
Eddie Perez for Hartford					July 10 filing	5.,000,000,000		
A. Total Contributions from Small Co	ntributors - Received this	Period O	NLY					
(See instructions for definition of Small Cont				Subtotal Section A				\$0.00
	B. Itemized C	ontribut	ions f	rom Individuals				
Last Name	A CONTRACTOR OF THE PROPERTY O	COSES SENSE CONTRACTOR OF	First	L		entre conversion in a month	esentation or designation	M.I.
Ramos			Wil	liam				
Residential Street Address		City	.L			State	Zip Code	
242 Talcottville Rd		Vernon				CT	06066-4	4631
Principal Occupation			1	of Employer				
Physician Assistant			St. F	rancis Medical C	enter			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amoun	t of Cont	ribution
ls this contribution associated with an Yes	ls contributor a principal of a stat	e contractor	or pros	pective state contractor	r? ∏Yes			\$100.00
event reported in Section L1? If yes, list Event #	If yes, indicate which branch or branches of government the contract is with:		ecutiv	eLegisl	✓ No			φ100.00
Method of contribution: ☐ Cash Personal Check ☐ Credit/Debit	t Card Payroll Deduction	Money Ord	ег	Date Received 06/12/2019	Aggregate contributions \$100.00			
Last Name			First					M.I.
Redd II			Cai	rey				Е
Residential Street Address		City				State	Zip Code	.1
264 Whitney St		Hartford	k			CT	06105-2	2270
Principal Occupation				of Employer London Parking	Authority			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes No	Is contributor a principal of a state If yes, indicate which branch or branches of government the		or pros	pective state contractor	r? ☐Yes ☑No			\$250.00
If yes, list Event #	contract is with:	☐ Ex	ecutiv	e Legisla	ative			
Method of contribution: Cash Personal Check Credit/Debit	t Card Payroll Deduction	Money Ord	er	Date Received 06/14/2019	Aggregate contributions \$250.00			
Last Name			First					M.I.
Reynolds			Jer	ado				
Residential Street Address 654 Bloomfield Ave		City Bloomfi	eld			State CT	Zip Code 06002-3	3045
Principal Occupation			1	of Employer				
Vice President			Rey	nolds Welding an	d Fab LLC			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state If yes, indicate which branch or		or pros	pective state contractor	i es			\$800.00
If yes, list Event #	branches of government the contract is with:	Ex	ecutiv	e 🔲 Legisla	ative No			
Method of contribution: Cash Personal Check Credit/Debit	Card Payroll Deduction	Money Ord	er	Date Received 06/17/2019	Aggregate contributions \$800.00			

SUBTOTAL Section B - This Page	\$1,150.00
TOTAL of Section B Pages	\$65,833.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$65,833.00

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NAME OF COMMITTEE (Provide Con	plete Name as Registered with F	iling Repos	sitory)		TYPE OF REPORT			
Eddie Perez for Hartford					July 10 filing			
A. Total Contributions from Small ((See instructions for definition of Small C		Period O		Subtotal Section /				\$0.00
	B. Itemized (Contribut	ions fi	om Individuals				
Last Name			First	2				M.I.
Rivera			Aura	а				
Residential Street Address		City	'			State	Zip Code	·
39 Windbrook Dr		Windso	or			СТ	06095-3	3562
Principal Occupation			Name	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	manufacturality of a second in the second	r or business l	he/she is			Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Is contributor a principal of a sta If yes, indicate which branch o branches of government the	or			∐ Yes ✓No			\$100.00
Method of contribution: Cash Personal Check Credit/D	contract is with:	Money Orde	ter	Legisle Date Received 06/12/2019	Aggregate contributions \$100.00			
Last Name			First					M.I.
Rivera			Carl	os				
Residential Street Address		City	1 ,			State	Zip Code	I
207 George St		Middleto	own			СТ	06457-3	590
Principal Occupation Director				of Employer anic Health Cour	ncil			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	manadalasties de la caracitación	or business b				Amoun	it of Conti	ribution
Is this contribution associated with an event reported in Section L1?	If yes, indicate which branch o		or prosp	ective state contractor	[] 1es			\$100.00
If yes, list Event #	branches of government the contract is with:	☐ Exe	ecutive					
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/De	ebit Card Payroll Deduction	Money Orde	er	Date Received 05/03/2019	Aggregate contributions \$130.00			
Last Name Rivera			First Carl	ne				M.I.
Residential Street Address		City	Carr	US		State	Zip Code	
207 George St		Middleto	own			CT	06457-3	590
Principal Occupation Director				of Employer Inic Health Coun	ıcil		l	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Imministration dans contributes	\$400 to a can or business h	ndidate c	ommittee for a chief o	executive officer of a	Amoun	t of Contr	ibution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Is contributor a principal of a stat If yes, indicate which branch or branches of government the contract is with:	r	or prosp		∐ Yes ✓ No			\$30.00
Method of contribution: Cash Personal Check V Credit/De	bit Card Payroll Deduction	Money Orde	er	Date Received 06/24/2019	Aggregate contributions \$130.00			

ion B - This Page \$230.00	SUBTOTAL Section B - This Page
Section B Pages \$65,833.00	TOTAL of Section B Pages
100 cco coa	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete	Name as Registered with Fil	ling Reposi	itory)		TYPE OF REPORT	19 (8)		
Eddie Perez for Hartford					July 10 filing			
A. Total Contributions from Small Contr	ibutors - Received this	Period O	NLY					
(See instructions for definition of Small Contrib	ulor)			Subtotal Section	A			\$0.00
	B. Itemized C	ontributi	ons fi	rom Individuals				
Last Name			First					M.I.
Rivera			Ces	sar				
Residential Street Address		City				State	Zip Code	
39 Windbrook Dr		Windso	r			CT	06095-3	3562
Principal Occupation			Name Retir	of Employer ed				
Is contributor a lobbyist, spouse, or Yes dependent child of a lobbyist?	If contribution is in excess of smunicipality does contributor municipality valued at more than	or business l				Amoun	t of Cont	ribution
event reported in Section L1?	contributor a principal of a state If yes, indicate which branch or branches of government the contract is with:		or pros		∐ 1es √No			\$100.00
Method of contribution: Cash Personal Check Credit/Debit Ca	nrd Payroll Deduction	Money Orde	er	Date Received 06/13/2019	Aggregate contributions \$100.00			
Last Name			First					M.I.
Rivera			Edv	vin				
Residential Street Address		City				State	Zip Code	
25 Paris Ln		Hartford	_			CT	06111-	1628
Principal Occupation Consultant			Name Self	of Employer				
ls contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more than	or business l				Amoun	t of Cont	ribution
event reported in Section L1?	contributor a principal of a state If yes, indicate which branch or branches of government the	-	or pros		[∏No			\$10.00
Method of contribution: Cash Personal Check Credit/Debit Cast	contract is with:	Money Ord		Date Received 06/28/2019	Aggregate contributions \$10.00			
Last Name			First					M.I.
Rivera			Jan	ina				
Residential Street Address		City				State CT	Zip Code	2022
10 Mulcahy Dr		East Ha				CI	06118-3	3032
Principal Occupation Communications Manager				of Employer and Whitney				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of a municipality does contributor municipality valued at more th	or business l nan \$5,000?	he/she i	s associated with have	a contract with said No	Amoun	t of Cont	ribution
event reported in Section L1?	contributor a principal of a state		or pros	pective state contracto	or?		-	\$100.00
	branches of government the contract is with:	Ex	ecutive		lative			
Method of contribution: Cash Personal Check Credit/Debit Ca	ard Payroll Deduction	Money Ord	ег	Date Received 05/18/2019	Aggregate contributions \$100.00			

SUBTOTAL Section B - This Page	\$210.00
TOTAL of Section B Pages	\$65,833.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$65,833.00

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A. Total Contribution From Small Contributors Received this Periad ONLY Subfetal Section A First Subfetal Section A R. Heinized Contributions From Individuals Readomain Street Address Space Supervisor Readomain Street Address Space Space Supervisor Readomain Street Address Space S	NAME OF COMMITTEE (Provide Comple	te Name as Registered with Fil	ling Reposi	tory)		TYPE OF REPORT	Strong St.		18.18
Sea interpretations for definition of Small Countributors Received this Period ONLY	Eddie Perez for Hartford					July 10 filing			
Subtoal Section Section Section Subtoal Section		tributors - Received this	Period O	NLY					
Last Name State Contribution State Supervisor State Contribution State Supervisor Supervisor State Supervisor Sup					Subtotal Section A				\$0.00
Last Name Part Juan State City State			ontributi	ons fr	om Individuals				
Residential Street Address 5 Pasture Ln Finished Accountion Sales Supervisor Le contribution associated with an event reported in Section L1? Yes	Last Name			First					M.I.
Residential Street Address 5 Pasturi L in Finding al Occupation Sales Supervisor Is contributor a lobbyist, apouse, or dependent child of a lobbyist? Name of Employer Hartford Distributors Name of Employer Hartford Surfavorial Supervisor				Juai	n				
Season Principal Occuration Scales Supportsor State Principal Occuration Princi			City	1					
Name of Employer Hartford Distributions State Supervisor Sales Supervisor It countributor a lobbyist, spouse, or dependent child of a lobbyist? No minicipality videa contributor or business bednle is seccisted with have a contract with and municipality videa contributor or business bednle is seccisted with have a contract with and municipality videa contributor or prospective state contractor? Yes John			Bloomfi	eld			СТ	06002-2	2875
If contribution is necess of \$400 to a candidate committee for a chief executive officer of a dependent child of a lobbyist? Some contribution is in excess of \$400 to a candidate committee for a chief executive with said manicipality videal at more than \$\$5.007\$ Some contribution is successed with an event reported in Section L1? No Is this contribution associated with an event reported in Section L1? No Is contribution associated with an event reported in Section L1? No Is contributed a principal of a state contractor or prospective attate contractor? Yes Yes									
dependent child of a lobbysis?	Sales Supervisor								
Myex, is Event # Myex My	1 1 1 1 1 1 0 1 1 1 1 1 1 1 1	municipality does contributor municipality valued at more the	or business l han \$5,000?	he/she is	s associated with have a	a contract with said No	Amoun	t of Cont	ribution
## Sevent ## Suppose the Event ## ## Suppose the Contract is with: Executive Legislative No branches of government the contract is with: Executive Legislative No handled of Contribution: Agaregate contributions \$250.00 Last Name				or pros	pective state contractor	? Yes			\$250.00
Method of contribution: Credit/Debit Card Payroll Deduction Money Order Date Received Aggregate contributions Q4/04/2019 \$250.00	event reported in Section L1?				□ , .,	✓ No			
Second Continuous Payroll Deduction Money Order O4/04/2019 \$250.00	If yes, list Event #		Lix	ecutive			-		İ
Rivera		t Card Payroll Deduction	Money Ord	er			ļ		
Rivera Residential Street Address 131 DAVIS Ct Principal Occupation Name of Employer				First			L		M.1.
Residential Street Address 131 DAVIS Ct Principal Occupation Name of Employer				Mad	ainr				
State Credit/Debit Card Payroll Deduction Mane of Employer			City	IVICA	3910		State	Zip Code	
Principal Occupation			-				MA	01056	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Sometimal contribution associated with an event reported in Section L1? Yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No			I	Name	of Employer				
International contribution associated with an enumicipality of the contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?	Trincipal Cooperation			Į					
Is this contribution associated with an central contractor of prospective state contractor? Yes	10 001111111111111111111111111111111111	If contribution is in excess of	\$400 to a ca	ndidate	committee for a chief	executive officer of a	Amou	nt of Cont	ribution
State City Hartford State City Hartford Candidate committee Candidate Ca	dependent child of a lobbyist?	municipality valued at more t	han \$5,000?		Yes	✓ No			
Wethod of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order Date Received Aggregate contributions Cash Personal Check Credit/Debit Card Payroll Deduction Money Order Date Received O6/21/2019 \$100.00		Is contributor a principal of a sta	te contractor	or pros	pective state contractor	? Yes]		\$100.00
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order Date Received Money Order \$100.00	event reported in Section L1?					. 🗸 No			
Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 06/21/2019 \$100.00	If yes, list Event #		E	recutiv			-		
Last Name Rivera Residential Street Address 64 Allendale Rd Principal Occupation Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? If yes, list Event # MI. Mil. Marcos Marcos State City Hartford Name of Employer Name of Employer Amount of Contribution associated with have a contract with said municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? If yes, indicate which branch or branches of government the contract or prospective state contractor? Method of contribution: Method of contribution: Date Received Aggregate contributions \$70.00	Method of contribution:	A Carel Payroll Deduction	Money Ore	der	1				
Residential Street Address 64 Allendale Rd Principal Occupation Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? If yes, list Event # Marcos City Hartford Name of Employer Name of Employer If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes Is contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Method of contribution: Date Received Aggregate contributions \$70.00		rayion Deddenon [_ money on		•••	φ100.00	1		M.I.
Residential Street Address 64 Allendale Rd Principal Occupation Name of Employer Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: City Hartford Name of Employer Name of Employer Name of Employer Amount of Contribution a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes Is contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Date Received Aggregate contributions STO.00	Last Name								
Residential Street Address 64 Allendale Rd Principal Occupation Name of Employer Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Name of Employer Amount of Contribution Amount of Contribution Executive Legislative Only 1001 Aggregate contributions STO 00			0.4	Ivia	ICOS		State	Zin Code	
Principal Occupation Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Name of Employer Amount of Contribution Amount of Contribution Fro. 00 Per Provider Aggregate contractive officer of a chief executive officer of a municipality valued at more than \$5,000? Yes If contribution is in excess of \$400 to a candidate committee for a chief executive accounts with have a contract with said municipality valued at more than \$5,000? Yes Yes Fro. 00 Amount of Contribution Fro. 00 Per Provider Aggregate contributions Accounts of Employer Amount of Contribution Amount of Contribution Page 100 Per Provider Aggregate contributions Amount of Contribution				d			1		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Yes			Tiditati		of Employer				
dependent child of a lobbyist? Indicate which an event reported in Section L1? If yes, list Event # If yes,	Ринстра Оссирации								
event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: If yes, list Event # Executive Legislative	13 Continues a 1000 July - F-100 July - F-10	municipality does contributo	r or business	he/shc	is associated with have	a contract with said	Amou	nt of Con	tribution
event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Method of contribution: Method of contribution: Date Received Aggregate contributions Aggregate contributions		Is contributor a principal of a sta	ate contracto	r or pro	spective state contracto	r? Yes			\$70.00
If yes, list Event # Executive Legislative Method of contribution: Method of contribution: Date Received Aggregate contributions \$70.00	event reported in Section L1?				P	✓ No			
Welling of contribution.	If yes, list Event #		E	xecutiv	re Legis	ative	4		
Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 00/28/2019 \$7.0.00		nit Card Payroll Deduction	Money Or	der	Date Received 06/28/2019	Aggregate contribution \$70.0			

\$420.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide	e Comple	te Name as Registered with Fi	ing Reposi	tory)		TYPE OF REPORT			
Eddie Perez for Hartford						July 10 filing			
A. Total Contributions from Sn	nall Cor	tributors - Received this	Period O	NLY	is a Sister				
See instructions for definition of Sm			0.00		Subtotal Section A				\$0.00
			ontributi	ons fr	om Individuals				
Last Name				First					M.I.
Rivera				Migo	dalia			•	ĺ
Residential Street Address			Cîty				State	Zip Code	
25 Paris Ln			Hartford	i			CT	06111-1	628
Principal Occupation				Name	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more that	or business han \$5,000?	he/she is	associated with have	a contract with said No	Amoun	t of Conti	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Yes ✓ No	Is contributor a principal of a stat If yes, indicate which branch o branches of government the	r	or prosp	<u> </u>	Nο			\$10.00
Method of contribution:	redit/Debi	contract is with:	Money Ord		Date Received 06/28/2019	Aggregate contributions \$10.00			
Last Name				First					M,I.
				Dar	vl				
Roberts Residential Street Address			City	1			State	Zip Code	<u></u>
47 Merriman Rd			Windso	r			CT	06095-	1016
Principal Occupation Director of Security	· · · · · ·				of Employer ord Public Scho	ols			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more t	or business	he/she i	committee for a chief s associated with have Yes	executive officer of a ea contract with said No	Amoui	it of Cont	ributio
Is this contribution associated with an event reported in Section L1?	☐ Yes ✓ No	Is contributor a principal of a sta If yes, indicate which branches of government the	or	or pros	—	✓No		\$	31,000.0
If yes, list Event #		contract is with:		CCULIV	Date Received	Aggregate contributions	-		
Method of contribution: Cash Personal Check	Credit/Debi	it Card Payroll Deduction	Money Or	đer	04/07/2019	\$1,100.00	,		
Last Name				First					M.I.
				Dar	rvl				
Roberts Residential Street Address			City	1			State	Zip Code	
47 Merriman Rd			Windse	or			CT	06095-	1016
Principal Occupation					of Employer				
Director of Security				Hart	ford Public Scho	ools			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes ✓ No	If contribution is in excess of municipality does contribute municipality valued at more	r or business	he/she	committee for a chief is associated with hav Yes	f executive officer of a e a contract with said No	Amou	nt of Con	tributio
Is this contribution associated with an event reported in Section L1? If yes, list Event #	☐ Yes	Is contributor a principal of a sta If yes, indicate which branches branches of government the contract is with:	or	r or pros		✓No			\$100.0
Method of contribution:	Credit/Dcb		Money Or		Date Received 06/28/2019	Aggregate contribution \$1,100.0			

\$1,110.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Reg	ristered with Filing Repo	sitory)		TYPE OF REPORT			
Eddie Perez for Hartford				July 10 filing			
A. Total Contributions from Small Contributors - F	Received this Period	ONLY					
(See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
The state of the s	3. Itemized Contribu	tions f	rom Individuals				
Last Name		First					M,I,
Robinson		Adl	enia				ļ
Residential Street Address	City				State	Zip Code	
2 Mansfield Grove Rd	East I	laven			CT	06512-4	800
Principal Occupation			of Employer				
President		R&G	Parking Internat	ional, LLC			
dependent child of a lobbyist? Inunicipality	on is in excess of \$400 to a does contributor or busines valued at more than \$5,000	s he/shc	committee for a chief e is associated with have Yes	executive officer of a a contract with said No	Amoun	t of Conti	ibution
l lites)	principal of a state contract	or or pro	spective state contractor	? Yes		\$.	00.000,1
event reported in Section £1? If yes, indicate	e which branch or			✓No		•	,,000.00
If yes, list Event # contract is with		xecutiv	e Legisla	ative			
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Debit Card ☐ Pay	roll Deduction Money C	rder	Date Received 06/04/2019	Aggregate contributions \$1,000.00			
Last Name		Firs	t				M.I.
Rodriguez		Ca	rmen				
Residential Street Address	City	-1			State	Zip Code	
6 Park Ter	Hartfo	ord			СТ	06106-1	318
Principal Occupation		Name	e of Employer				
dependent child of a lobbyist?	on is in excess of \$400 to a does contributor or busine valued at more than \$5,00	ss he/she 0?	is associated with have	a contract with said No	Amoun	t of Cont	ribution
event reported in Section L1? If yes, indication If yes, indication	principal of a state contract te which branch or overnment the			✓ No			\$20.00
If yes, list Event # contract is with		Executiv			l		
Method of contribution: ✓ Cash Personal Check Credit/Debit Card Pay	roll Deduction Money (Order	Date Received 06/08/2019	Aggregate contributions \$20.00			
Last Name		Firs	st				M.I.
Rodriguez		Ju	an				
Residential Street Address	City				State	Zip Code	2040
4 Austin St	New	Britain			CT	06051-2	2816
Principal Occupation Fireman			e of Employer Dept				
dependent child of a lobbyist? No municipality municipality	on is in excess of \$400 to a y does contributor or busine y valued at more than \$5,00	ss he/shc 0?	is associated with have	a contract with said No	Amour	it of Cont	ribution
event reported in Section L1?	principal of a state contracte which branch or	tor or pro	espective state contracto	r? ☐ Yes ✓ No			\$400.00
If yes, list Event # V No branches of g contract is wi	overnment the th:	Executi	veLegisl	ative			
Method of contribution:	лоll Deduction Money (Order	Date Received 04/16/2019	Aggregate contributions \$400.00)		

SUBTOTAL Section B - This Page	\$1,420.00
TOTAL of Section B Pages	\$65,833.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$65,833.00

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Rozásec	I Ianuary	201	ς

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NAME OF COMMITTEE (Provide Comple	te Name as Registered with Fil	ling Reposi	tory)		TYPE OF REPORT			
Eddie Perez for Hartford July 10 filing			July 10 filing					
A, Total Contributions from Small Co	itributors - Received this	Period O	NLY					
See instructions for definition of Small Cont				Subtotal Section A				\$0.00
		ontributi	ons fi	rom Individuals				
Last Name			First					M.I.
Rodriguez			Maı	ria				1
Residential Street Address		City				State	Zip Code	
142 Yale St		Hartford	ĺ			CT	06106-4	525
Principal Occupation			Name	of Employer				
			None	9				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business 1	ndidate he/she i	committee for a chief of a sassociated with have	executive officer of a a contract with said	Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	is contributor a principal of a stat If yes, indicate which branch or branches of government the	r	or pros		✓ No			\$50.00
Method of contribution: Cash Personal Check Credit/Debi	contract is with: t Card Payroll Deduction	Money Ord		Date Received 04/04/2019	Aggregate contributions \$50.00			
Last Name			First	t				M.I.
Rodriguez			Pe	dro				
Residential Street Address		City	1			State	Zip Code	
499 Allen St		New Br	itain			СТ	06053-	3318
Principal Occupation			Name	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more to	or business	he/she	committee for a chief is associated with have Yes	executive officer of a a contract with said No	Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes V No	Is contributor a principal of a state of the state of government the contract is with:	or	or pros		✓ No			\$15.00
Method of contribution: Cash Personal Check Credit/Deb		Молеу Ого	ier	Date Received 06/12/2019	Aggregate contributions \$15.00	1		
Last Name	<u> </u>		Firs	it				M.I.
Rodriguez			Wi	lfredo				
Residential Street Address		City	<u> </u>			State	Zip Code	
6 Franklin Ave		Hartfor	d			CT	06114-	6011
Principal Occupation			Nam	e of Employer				
ls contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor municipality valued at more	r or business than \$5,000?	he/she	is associated with have	a contract with said No	Amou	nt of Con	tribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state of the	or		_	✓ No			\$5.00
If yes, list Event #	branches of government the contract is with:	E	xecuti	ve Legis	lative			
Method of contribution: Cash Personal Check Credit/Det	it Card Payroll Deduction	Money Or	der	Date Received 06/28/2019	Aggregate contributions \$5.00	. 1	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	

\$70.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

SEEC FORM 20 Revised January 2015

I. MONETARY RECEIPTS (Sections A-K)

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A. Total Contributions from Small Contributors Subtoal Section A	NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT				
Subtractions for definition of Small Contributions Subtract Section A	Eddie Perez for Hartford				July 10 filing				
Last Name First Jeffrey First Jeffrey State Zip Code The Contribution is in excess of \$400 to a candidate committee for a chief executive officer of a transcription of contribution associated with an excess of \$400 to a candidate committee for a chief executive officer of a transcription of contribution associated with an expectation of contribution associated with an expectation of contribution of cont	A. Total Contributions from Small	Contributors - Received this	Period O	NLY					
Roller Size Main Size Main Size Main Size Main	(See instructions for definition of Small	Contributor)			Subtotal Section A				\$0.00
Roiler Jeffrey State Address City Hartford State Address City Golds-1405		B. Itemized C	ontributi	ions fr	om Individuals				
Residential Street Address	Last Name			First					M,I.
Red Collins St	Roller			Jeffi	rey				
Name of Employer Refired	Residential Street Address		City	1	•		State	Zip Code	L
Recultivator a lohlysis, spouse, or dependent child of a lobbysis? Yes If contribution is in excess of \$400 to a candidate contractor or prospective state contractor? Yes	182 Collins St		Hartford	d			CT	06105-1	1405
Secontribution a solobysist, spouse, or dependent child of a lobbysist? Yes Mo If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a Mo Montancipality valued at more than \$5,000?* Yes									
dependent child of a lobbysis? No municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality does contributor or business he/she is associated with have a contract with and municipality valued at more than \$5,000? Yes	Retired			Retire	ed				
## State Executive Distribution associated with an event reported in Section L1? First	dependent shild of a labbriet?	municipality does contributor	or business l	he/she is	associated with have	a contract with said	Amoun	t of Cont	ribution
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order Date Received O4/04/2019 \$200.00	event reported in Section L1?	If yes, indicate which branch o		or prosp	ective state contractor	1 es			\$100.00
Cash	If yes, list Event #		☐ Ex	ecutive	Legisla	ative			
Residential Street Address 182 COllins St Principal Occupation Retired State Collins St		Debit Card Payroll Deduction	Money Ord	ler					
Residential Street Address City Hartford Name of Employer Retired Is contributor a lobbyist, spouse, or dependent child of a lobbyist? No State Contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No Is this contribution associated with an event reported in Section L1? Yes, indicate which branch or branches of government the contract is with: Divina Residential Street Address State City West Hartford State City West Hartford State City West Hartford Residential Street Address State Sta	Last Name			First					M.I.
Hartford Hartford Retired Re	Roller			Jeffi	ey				
Principal Occupation Retired Name of Employer Retired Name of Employer Retired	Residential Street Address		1 '				Į		
Retired Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? Is this contribution associated with an event reported in Section L1? 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: Method of contribution:			Hartford				СТ	06105-1	405
State City West Hartford Contribution Section L19 State City West Hartford Contribution Section L19 State City West Hartford City West Hartford City C				1					
sevent reported in Section L1?	damandani ahild afa lahhuiat?	municipality does contributor	or business l	he/she is	associated with have	a contract with said	Amoun	t of Cont	ribution
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order O4/22/2019 \$200.00 Last Name Residential Street Address 867 NEW BRITAIN Ave Principal Occupation Beauty Salon Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? If contributor a principal of a state contractor or prospective state contractor? Is contribution associated with an event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions Date Received Aggregate contributions Amount of Contribution Amount of Contribution State City West Hartford CT 06119 Amount of Contribution Amount of Contribution Principal Occupation Beauty Salon If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes Yes Yes You Method of contribution: Date Received Aggregate contributions	event reported in Section L1?	es If ves. indicate which branch of		or prosp	ective state contractor	L i es			\$100.00
Cash	If yes, list Event #		Ex	ecutive		ative			
Residential Street Address 867 NEW BRITAIN Ave City West Hartford CT Q6119	Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/	Debit Card Payroll Deduction	Money Ord	ler					
Residential Street Address 867 NEW BRITAIN Ave West Hartford Name of Employer Self Employed State Zip Code 06119 Name of Employer Self Employed Is contributor a lobbyist, spouse, or dependent child of a lobbyist? No Is contribution associated with an event reported in Section L1? Hyes, list Event # Method of contribution: Date Received Aggregate contributions State Zip Code CT 06119 Amount of Contribution State City West Hartford CT 06119 Amount of Contribution State Cip Code CT 06119 Amount of Contribution Legislative	Last Name			First					M.I.
867 NEW BRITAIN Ave Principal Occupation Beauty Salon Name of Employer Self Employed Is contributor a lobbyist, spouse, or dependent child of a lobbyist? No If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? Method of contribution: Ves Ves Ves Ves Ves Ves Ves Ve	Romero		_	Divi	na				
Principal Occupation Beauty Salon Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? Hyes, list Event # Method of contribution: Name of Employer Self Employed Amount of Contribution and contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or bisiness he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No Is contribution associated with an event reported in Section L1? Hyes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions			1		1			-	
Self Employed Self Employed Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes dependent child of a lobbyist? Yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No No No Yes			vvestra				<u> </u>	00119	
dependent child of a lobbyist? No municipality valued at more than \$5,000? Yes VNo Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: No municipality valued at more than \$5,000? Yes VNo Is contributor a principal of a state contractor or prospective state contractor? Yes \$100.00 If yes, list Event # Method of contribution: Date Received Aggregate contributions	, ,								
event reported in Section L1? If yes, list Event # Method of contribution: State If yes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions State danamdout shild of a labburget?	municipality does contributor	or business l		associated with have	a contract with said	Amoun	t of Conti	ribution	
Method of contribution: Date Received Aggregate contributions A	event reported in Section L1?	If yes, indicate which branch o		or prosp	ective state contractor	i es			\$100.00
	If yes, list Event #	,	Ex	ecutive	Legisla	ative			
		Debit Card Payroll Deduction	Money Ord	er	3				

SUBTOTAL Section B - This Page	\$300.00
TOTAL of Section B Pages	\$65,833.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$65,833.00

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Revised January 2013				o, n	1 ==		TYPE OF REPORT			
	e Completo	e Name as	Registered with F	uing Kepos	uory)		July 10 filing			
Eddie Perez for Hartford							July 10 ming			
A, Total Contributions from Sn			s - Received this	Period C		Subtotal Section A				\$0.00
(See instructions for definition of Sm	nall Contri	ibulor)								
			B. Itemized (ontribut	First	m Individuals				M,I,
Last Name										
Rosario				Lat	Lenr	ıy		State	Zip Code	
Residential Street Address				City Hartfor	d			CT	06114-2	334
102 Mapleton St				11011101	.,	f Employer		<u></u>		
Principal Occupation					None					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an	☐Yes ✓No ☐Yes	municip municip Is contribu	pality does contribute pality valued at more tor a principal of a st	r or business than \$5,000? ate contracto	he/she is	ommittee for a chief e associated with have Yes ective state contractor	a contract with said No	Amoun	t of Contr	ibution \$50.00
event reported in Section L1? If yes, list Event #	√No		dicate which branch of government the is with:		xecutive			 		,
Method of contribution: ✓ Cash Personal Check C	Credit/Debit	Card _	Payroll Deduction	Money Or		Date Received 04/04/2019	Aggregate contributions \$50.00			M.J.
Last Name					First					IVI.J.
Rose					Johr	1		T =	T . O. 1	<u> </u>
Residential Street Address				City	ما			State	Zip Code 06105-2	2512
93 N Beacon St				Hartfo		of Employer		10.	1 00,00	
Principal Occupation Attorney					City o	of New Haven				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	✓ Yes	munici munici	pality does contribute pality valued at more	or or busines than \$5,000	s he/she is ?	associated with have	✓ No	Amoui	it of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Yes		utor a principal of a st indicate which branch		r or prost	ective state contracto	<u></u>	1	\$	1,000.00
	✓No		s of government the		xecutive	Legisl				
Method of contribution: Cash Personal Check	Credit/Debit	Card	Payroll Deduction	Money O	rder	Date Received 05/03/2019	Aggregate contributions \$1,000.0			
Last Name					First					M.I.
Rowe					Hor	ace				<u></u>
Residential Street Address				City Hartfo	rd			State	Zip Code 06112-	2204
184 Edgewood St				Tiertio		of Employer			<u>.</u>	
Principal Occupation Contractor					Self					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes ✓ No	munic munic	ipality does contribut ipality valued at more	or or busines than \$5,000	s he/she i	s associated with have	✓ No	Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	☐Yes ✓No	If yes, i	utor a principal of a s indicate which branch s of government the t is with:	or	er or pres Executiv	pective state contractor	✓No			\$500.0
Method of contribution: Cash ✓ Personal Check	Credit/Debi		Payroll Deduction	 Мопсу С	rder	Date Received 06/17/2019	Aggregate contribution \$500.0			
I										

\$1,550.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with Fi	iling Reposi	itory)		TYPE OF REPORT			92
Eddie Perez for Hartford				July 10 filing			
A. Total Contributions from Small Contributors - Received this (See instructions for definition of Small Contributor)	Period O	NLY	Subtotal Section A				\$0.00
B. Itemized C	?ontributi	ons f	rom Individuals				
Last Name		First					M.I.
Rowe		Ric	k				
Residential Street Address	City				State	Zip Code	005
47 Campfield Ave	Hartford				CT	06114-1	835
Principal Occupation Contractor		Row	of Employer e Enterprise				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contributor municipality valued at more to	r or business	ndidate he/she	committee for a chief of a sassociated with have	executive officer of a a contract with said	Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of a star of yes, indicate which branch of branches of government the contract is with.	or	or pros		☑ res			\$100.00
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord		Date Received 05/03/2019	Aggregate contributions \$350.00			
Last Name		Firs	t				M,I.
Rowe		Ric	k				
Residential Street Address	City				State	Zip Code	
47 Campfield Ave	Hartford	d			СТ	06114-1	835
Principal Occupation Contractor		1	of Employer ve Enterprise				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contributor municipality valued at more to	r or business	ndidate he/she	e committee for a chief is associated with have Yes	executive officer of a a contract with said No	Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, indicate which branch to branches of government the contract is with:	or	or pro		☑ No			\$50.00
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord	ler	Date Received 05/11/2019	Aggregate contributions \$350.00			
Last Name		Firs	t				M.I.
Rowe		Ric	k				
Residential Street Address	City				State	Zip Code	1005
47 Campfield Ave	Hartfor				СТ	06114-	1035
Principal Occupation Contractor		Rov	of Employer ve Enterprise				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contribute municipality valued at more	r or business than \$5,000?	he/she	is associated with have	a contract with said	Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a star flyes, indicate which branch of branches of government the	or	or pro		✓No			\$100.00
If yes, list Event # contract is with: Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ore		Date Received 05/30/2019	Aggregate contributions \$350.00	.		

\$250.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Comp	lete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT			
Eddie Perez for Hartford					July 10 filing			
A. Total Contributions from Small Co	ontributors - Received this	Period O	NLY					
(See instructions for definition of Small Con	ntributor)			Subtotal Section A				\$0.00
	B. Itemized C	ontributi	ions f	rom Individuals				
Last Name			First					M.I.
Rowe			Ric	k				
Residential Street Address		City			-	State	Zip Code	
47 Campfield Ave		Hartford				СТ	06114-1	1835
Principal Occupation			1	of Employer				
Contractor			Row	e Enterprise				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the second contribution.	or business				Amour	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes No	Is contributor a principal of a state If yes, indicate which branch of branches of government the		or pros	-	∐ res ✓ No			\$100.00
If yes, list Event #	contract is with:	Ex	ecutive	e Legisl	ative			
Method of contribution: ✓ Cash Personal Check Credit/Deb	oit Card Payroll Deduction	Money Ord	er	Date Received 06/28/2019	Aggregate contributions \$350.00)		
Last Name			First				**	M.I.
Ruiz			Ang	gel				
Residential Street Address		City				State	Zip Code	100.1
28 Strant St		Manche				СТ	06040-4	1234
Principal Occupation			Name	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amour	t of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state If yes, indicate which branch o		or pros	pective state contractor	i es			\$45.00
If yes, list Event #	branches of government the contract is with;	Ex	ecutiv	eLegisl	ative No			
Method of contribution: ✓ Cash Personal Check Credit/Deb	nit Card Payroll Deduction	Money Ord	er	Date Received 06/12/2019	Aggregate contributions \$45.00)		
Last Name	Land Inc.		First					M.I.
Ruiz			Lilli	an				
Residential Street Address		City	1			State	Zip Code	
48 Linwood Dr		Bloomfi	ield			CT	06002-1	1717
Principal Occupation Supervisor				of Employer ∋ of CT				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the state of the st	or business				Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state If yes, indicate which branch o		or pros	pective state contracto	1 es			\$150.00
If yes, list Event #	branches of government the contract is with:		ecutive	eLegisl				
Method of contribution: Cash Personal Check Credit/Deb	oit Card Payroll Deduction	Money Ord	er	Date Received 05/03/2019	Aggregate contributions \$450.00			

\$295.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Compl	ete Name as Registered with Fil	ling Reposi	tory)		TYPE OF REPORT		- 60 B 50	
Eddie Perez for Hartford					July 10 filing			
A. Total Contributions from Small Co	ntributors - Received this	Period O	NLY					
(See instructions for definition of Small Con-				Subtotal Section A				\$0.00
	- Carlot and Carlot an	ontributi	ons fi	om Individuals				
Last Name		AV-10051140500111805004111	First	20-107/pp-01 (Annual Consequence of				M.I.
Ruiz			Lillia	an				
Residential Street Address		City	<u> </u>			State	Zip Code	
48 Linwood Dr		Bloomfi	eld			СТ	06002-1	717
Principal Occupation				of Employer				
Supervisor				of CT				
is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l han \$5,000?	ne/she i	s associated with have	a contract with said No	Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state If yes, indicate which branch or branches of government the	r —			✓No			\$300.00
If yes, list Event #	contract is with:	Ex	ecutiv			4		
Method of contribution: Cash ✓ Personal Check Credit/Deb	it Card Payroll Deduction	Money Ord	er	Date Received 06/28/2019	Aggregate contributions \$450.00			
Last Name			First					M.I.
Ruiz			Rai	mon				
Residential Street Address		City				State	Zip Code	1000
39 Charter Oak PI, Apt B2		Hartford				СТ	06106-	1920
Principal Occupation				of Employer		•		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor municipality valued at more t	or business han \$5,000?	he/she	is associated with have	a contract with said No	Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Is contributor a principal of a state of the state of government the	or	or pros		[☑]No			\$5.0
Method of contribution:	contract is with:			Date Received	Aggregate contributions	1		
Cash Personal Check Credit/Del	oit Card Payroll Deduction	Money Or	ier	06/28/2019	\$5.00)		
Last Name			Firs	t				M.I.
Russo			Ma	rio				
Residential Street Address		City				State	Zip Code 06085-	
44 Lake St		Unionv				CT	00005-	1303
Principal Occupation Owner			Alls	e of Employer tate New Britain A				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor municipality valued at more	r or business than \$5,000?	he/she	is associated with have	a contract with said No	Amou	nt of Con	tributio
ls this contribution associated with an event reported in Section L1?	Is contributor a principal of a sta If yes, indicate which branch of branches of government the	or			✓ No			\$500.0
If yes, list Event #	contract is with:	E	xecuti		lative			
Method of contribution: ☐ Cash Personal Check Credit/De	bit Card Payroll Deduction	Money Or	der	Date Received 05/06/2019	Aggregate contribution \$500.0			

\$805.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with Filing	Reposite	ory)		TYPE OF REPORT			
Eddie Perez for Hartford				July 10 filing			
A. Total Contributions from Small Contributors - Received this Per (See instructions for definition of Small Contributor)	riod ON		ubtotal Section A		•		\$0.00
B. Itemized Cont	tributio	ns fro	m Individuals				
Last Name		First	2001,000	Company of the Compan			M.I.
Sachdev		Mann	nohan				
Residential Street Address Ci	ity				State	Zip Code	
960 Kennedy Rd	Vindsor				CT	06095-1	931
Principal Occupation Veterinarian		Name of Self	Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$400 municipality does contributor or by nunicipality valued at more than \$100 municipality valued at more than	usiness he	didate co e/she is a	mmittee for a chief e ssociated with have a Yes	executive officer of a contract with said	Amoun	t of Contr	ibution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state configuration of the section of the sectio		r prospec	tive state contractor	☑ Yos		\$1	,000.00
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Mo		I	Date Received 06/20/2019	Aggregate contributions \$1,000.00			
Last Name		First		3.001			M.I.
Salazar		Marie	la				
Toblacina, Orovi : Idalos	ity				State	Zip Code	04.4
27 Harvard St	lartford				СТ	06106-4	314
Principal Occupation Cashier	- 1	Name of Home	Employer Good				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$400 municipality does contributor or b municipality valued at more than \$100	ousiness h	didate co e/she is a	mmittee for a chief o ssociated with have Yes	executive officer of a a contract with said No	Amoun	t of Conti	ibution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of a state configuration of the state of the section L1? If yes, indicate which branch or branches of government the contract is with:		ecutive	ctive state contractor	✓ No			\$10.00
Method of contribution:	oney Orde		Date Received 06/08/2019	Aggregate contributions \$10.00			
Last Name		First					M.I.
Sánchez		Joel					
Residential Educat Andress	ity ast Hai	rtford			State CT	Zip Code 06118-1	752
Principal Occupation Admin Assistant		City of	Employer Hartford				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$400 municipality does contributor or b municipality valued at more than the second of the s	ousiness h	didate co se/she is a	ommittee for a chief on associated with have Yes	executive officer of a a contract with said No	Amour	of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes No Is contributor a principal of a state co If yes, indicate which branch or branches of government the	_			✓ No			\$75.00
If yes, list Event # contract is with: Method of contribution:	oney Orde		Legisk Date Received 06/14/2019	Aggregate contributions \$75.00			

\$1,085.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) TYPE OF REPORT							
ddie Perez for Hartford July 10 filing							
A. Total Contributions from Small Contributors - Received this	Period O	NLY					
(See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
	Contributi	ons fi	rom Individuals				
Last Name		First					M.I.
Sanchez		Mar	ria				
Residential Street Address	City				State	Zip Code	
13 Latimer St	Hartford	i i			СТ	06108-2	328
Principal Occupation		Name	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contributor municipality valued at more to	r or business l	ndidate he/she i	committee for a chief of a sassociated with have Yes	executive officer of a a contract with said No	Amoun	t of Conti	ribution
Is this contribution associated with an Yes Is contributor a principal of a sta		or pros	pective state contractor	? Yes			\$100.00
event reported in Section L1? If yes, indicate which branch of branches of government the				. Vo			Ψ100.00
If yes, list Event # contract is with:	Ex	ecutive		ative			
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord	ет	Date Received 06/28/2019	Aggregate contributions \$100.00			
	Jinoney Ora	First		φ100.00			M.I.
Last Name							
Sanchez	Lat	Myı	ma		State	Zip Code	_
Residential Street Address	City East Ha	artford	i		CT	06108-4	1018
63 Mckee St Principal Occupation	Lastric		of Employer				
тшора оссиранов							
Is contributor a lobbyist, spouse, or Yes If contribution is in excess of	£\$400 to a ca	ndidate	committee for a chief	executive officer of a		4 - 6 C 4	!bei.o
dependent child of a lobbyist? No municipality does contributor municipality valued at more	r or business i	he/she i	is associated with have	a contract with said No	Amoun	it of Cont	ribution
Is this contribution associated with an Yes Is contributor a principal of a sta	ate contractor	or pros	pective state contractor	? Yes			\$20.00
event reported in Section L1? If yes, indicate which branch of provernment the				✓ No			4-0.00
If yes, list Event # contract is with:	Ex	ecutiv					
Method of contribution: ✓ Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord	ler	Date Received 05/18/2019	Aggregate contributions \$20.00			
		First	•••	Ψ20.00			M.I.
Last Name							
Santiago	Lave	Cai	rmen		State	Zip Code	
Residential Street Address	City Hartford	d			CT	06106-1	1979
8 Patsy Williams Way, Unit 2 Principal Occupation	1.10.1101		of Employer			<u> </u>	
Trinopal Governon		Reti	red				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contribute municipality valued at more	r or business	he/she	committee for a chief is associated with have Yes	executive officer of a a contract with said No	Amour	ıt of Cont	ribution
Is this contribution associated with an Yes Is contributor a principal of a steep event reported in Section 1.1?		or pros	spective state contracto	1 ca			\$5.00
If yes, list Event # If yes, indicate which branch branches of government the contract is with:		cecutiv	e Legisl	✓ No ative			
Method of contribution:			Date Received	Aggregate contributions	1		
Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord	ier	06/17/2019	\$5.00	L		

\$125.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Comple	te Name as Registered with Fi	ling Reposi	tory)		TYPE OF REPORT			
Eddie Perez for Hartford	and become				July 10 filing			
A. Total Contributions from Small Co	ntributors - Received this	Period O	NLY					
(See instructions for definition of Small Cont	ributor)			Subtotal Section A				\$0.00
	B. Itemized C	ontributi	ons f	rom Individuals				
Last Name	Notice of Control of C		First	Studiers, (Corporated), Colores Assembly assembly constructed by terms and t				M.l.
Santiago			Jac	queline				
Residential Street Address		City				State	Zip Code	
17 Madison St		Hartford	İ			CT	06106-2	2325
Principal Occupation				of Employer Ient/ HKYO Admii	•			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes V No					Amoun	t of Conti	ribution	
Is this contribution associated with an Yes	Is contributor a principal of a stat	e contractor	or pros	spective state contractor	? Yes			\$100.00
event reported in Section L1?	If yes, indicate which branch or branches of government the	_			. ✓ No			÷.55.50
If yes, list Event #	contract is with:	Ex	ecutiv		ative			
Method of contribution: Cash Personal Check Credit/Debi	t Card Payroll Deduction	Money Ord	er	Date Received 05/21/2019	Aggregate contributions \$100.00			
	t Card Payroll Deduction	I Woney Ord			φ100.00		······	M.I.
Last Name			Firs					'''
Santos		Lat	Mic	chael		State	Zip Code	
Residential Street Address		City Wether:	sfield	1		CT	06109-3	3538
31 Peach Hill Rd Principal Occupation		VVCalci		of Employer				
Electrician			F&S	Electric Services				
ls contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business	ndidate he/she	e committee for a chief is associated with have Yes	executive officer of a a contract with said No	Amour	it of Cont	ribution
Is this contribution associated with an Yes	Is contributor a principal of a stat	te contractor	or pro	spective state contractor	r? ☐Yes			\$250.00
event reported in Section L1?	If yes, indicate which branch o branches of government the	_			. VNo			4
If yes, list Event #	contract is with:	Ex	ecutiv					
Method of contribution: Cash Personal Check Credit/Debi	t Card Payroll Deduction	Money Ord	lar	Date Received 06/17/2019	Aggregate contributions \$250.00			
	Call I aylon Deduction	J Wolley Ord			Ψ230.00	·		M.i.
Last Name			Firs					
Serano		T al.	IVIE	aria		State	Zip Code	
Residential Street Address		City Hartford	4			CT	06106-4	4035
684 New Britain Ave Principal Occupation		Tiartion	_	e of Employer			<u> </u>	
Principal Occupation								
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more t	or business	ndidat he/she	e committee for a chief is associated with have	executive officer of a a contract with said No	Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a sta If yes, indicate which branch of		ог рго	spective state contracto	r? ☐ Yes ☑ No			\$50.00
If yes, list Event#	branches of government the contract is with:	Ех	ecuti		ative			
Method of contribution: ☐ Cash	it Card Payroll Deduction	Money Ord	ier	Date Received 05/18/2019	Aggregate contributions \$50.00			

\$400.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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I. MONETARY RECEIPTS (Sections A-K)

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NAME OF COMMITTEE (Provide Con	plete Name as Registered with F	iling Repos	itory)		TYPE OF REPORT				
Eddie Perez for Hartford					July 10 filing				
A. Total Contributions from Small C	Contributors - Received this	Period O	NLY			•			
(See instructions for definition of Small Co	ontributor)			Subtotal Section A				\$0.00	
	B. Itemized C	Contributi	ions fi	rom Individuals					
Last Name			First					M.I.	
Serrano			Rici	hard					
Residential Street Address		City				State	Zip Code		
113 Stage Coach Rd		Windso	r			CT	06095-1	249	
Principal Occupation			Name	of Employer					
Manager			CKE	C					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	ومناه والمستون والمستون والمستون والمستون والمستون والمستون والمستون والمستون والمستون والمستون والمستون والمستون	or business l				Amoun	it of Conti	ribution	
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a sta		or prosp	pective state contractor	? Yes			\$100.00	
If yes, list Event #	If yes, indicate which branch or branches of government the contract is with:		ecutive	e Legisl	ative No				
Method of contribution: ☐ Cash Personal Check ✓ Credit/D	ebit Card Payroll Deduction	Money Ord	ler	Date Received 05/01/2019	Aggregate contributions \$100.00				
Last Name			First					M.I.	
Sierra			A.J.						
Residential Street Address		City				State	Zip Code		
215 Washington St		Hartford	d			СТ	06106-2	2470	
Principal Occupation Attorney			Name Self	of Employer					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	ininglifu dana anatributor	or business l	he/she i			Amoun	it of Cont	ribution	
Is this contribution associated with an event reported in Section L1?	If yes, indicate which branch of		or pros	pective state contractor	1 es		\$	\$1,000.00	
If yes, list Event #	branches of government the contract is with:	Ex	ecutive						
Method of contribution: Cash Personal Check Credit/D	ebit Card Payroll Deduction	Money Ord	ler	Date Received 06/25/2019	Aggregate contributions \$1,000.00				
Last Name			First					M.I.	
Sierra			Betl	h 					
Residential Street Address		City	.1			State	Zip Code	1400	
1224 Prospect Ave		Hartford	·	ČD 1		СТ	06105-1	123	
Principal Occupation Bookeeper			1	of Employer Office of Arnaldo	J Sierra LLC				
ls contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributes	r or business i				Amoun	t of Cont	ribution	
Is this contribution associated with an event reported in Section L1?	If yes, indicate which branch of		or pros	pective state contracto	r?			\$100.00	
If yes, list Event #	branches of government the contract is with:	□ Ex	ecutive	e Legisl	ative [V] No				
Method of contribution: ☐ Cash Personal Check ☐ Credit/D		Money Ord	ler	Date Received 06/25/2019	Aggregate contributions \$100.00				

SUBTOTAL Section B - This Page	\$1,200.00
TOTAL of Section B Pages	\$65,833.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$65,833.00

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NAME OF COMMITTEE (Provide Compl	ete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT			
Eddie Perez for Hartford					July 10 filing			
A. Total Contributions from Small Co (See instructions for definition of Small Con		Period O	NLY	Subtotal Section /				\$0.00
	and a second of the second of the second of the second of the second of the second of the second of the second	:ontributi	ions f	rom Individuals				
Last Name			First			A COURT DO CONTRACTOR	Strongthess (v. Auguzans)	M.I.
Sifuentes			Urb	ano				
Residential Street Address		City	1			State	Zip Code	1
34 Gerthmere Dr		West H	artfor	d		CT	06110-1	621
Principal Occupation Custodial			I	of Employer V Services				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No				Amoun	t of Cont	ribution		
Is this contribution associated with an event reported in Section L1? Yes V No	Is contributor a principal of a stat If yes, indicate which branch o branches of government the contract is wift:	г	or pros		✓ No			\$20.00
Method of contribution: Cash Personal Check Credit/Deb] Молсу Ord	er	Date Received 06/10/2019	Aggregate contributions \$20.00			
Last Name			First					M,I,
Silva			Da	na				
Residential Street Address		City				State	Zip Code	
597 Hillside Ave		Hartford				CT	06106-4	1324
Principal Occupation			Name	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amount of Contribution		ribution
Is this contribution associated with an event reported in Section L1? Yes V No	Is contributor a principal of a state If yes, indicate which branch or branches of government the	tte contractor or prospective state contractor? Yes Executive Legislative					\$6.00	
If yes, list Event #	contract is with:		ecunv					
Method of contribution: Cash Personal Check Credit/Deb	it Card Payroll Deduction	Money Ord		Date Received 06/28/2019	Aggregate contributions \$6.00			T
Last Name Silva			First Tay					M.I.
Residential Street Address 26 Madison St		City Hartford	i			State CT	Zip Code 06106-2	2324
Principal Occupation		I	Name	of Employer	•			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the state of the st	or business ! han \$5,000?	he/she	is associated with have	a contract with said No	Amoun	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state contractor or prospective state contractor? Yes If yes, indicate which branch or branches of government the V No							\$200.00	
If yes, list Event #	branches of government the contract is with:	Ex	ecutiv	e Legisl	ative [V] 140			
Method of contribution: ☐ Cash	it Card Payroll Deduction	Money Ord	er	Date Received 06/28/2019	Aggregate contributions \$200.00			

\$226.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete	Name as Registered with Fil	ling Reposi	tory)		TYPE OF REPORT			
Eddie Perez for Hartford					July 10 filing			
A. Total Contributions from Small Cont (See instructions for definition of Small Contri-		Period O		Subtotal Section A				\$0.00
	B. Itemized C	ontributi	ons fr	om Individuals				
Last Name			First					M.I.
Soler-Velez			Yon	narie				
Residential Street Address		City				State CT	Zip Code 06110-1	1161
2 Selldan St		West Ha				CI	00110-1	101
Principal Occupation Administrator			сгес	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l nan \$5,000?	ne/she is	s associated with have	a contract with said No	Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Is contributor a principal of a stat If yes, indicate which branch or branches of government the contract is with:	г	or pros		✓ No			\$30.00
Method of contribution: Cash Personal Check Credit/Debit C		Money Ord	er	Date Received 05/17/2019	Aggregate contributions \$30.00			
Last Name			First					M.I.
Sorokim			Mat	thew				
Residential Street Address		City				State	Zip Code	1125
87 Levesque Ave		West H				СТ	06110-	1135
Principal Occupation Attorney			Soro	of Employer kin Law Firm				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more to	or business l han \$5,000?	he/she i	s associated with have	a contract with said No	Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes V No If yes, list Event #	Is contributor a principal of a state If yes, indicate which branch of branches of government the contract is with:	r	or pros		∐ No			\$100.00
Method of contribution: Cash Personal Check Credit/Debit C	Card Payroll Deduction	Money Ord	ег	Date Received 04/04/2019	Aggregate contributions \$100.00			
Last Name			First					M.I.
Stewart			Cas	smore				
Residential Street Address		City	۸ 			State CT	Zip Code 06114-	2216
40 Linnmoore St		Hartford		of Employer		01	00114-	
Principal Occupation								
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more t	or business han \$5,000?	he/she i	is associated with have	a contract with said No	Amoun	nt of Cont	tribution
event reported in Section L1?	Is contributor a principal of a sta If yes, indicate which branch of branches of government the	or	or pros		✓ No			\$20.00
If yes, list Event #	contract is with: Card Payroll Deduction	Money Ord		Date Received 06/24/2019	Aggregate contributions \$20.00			

\$150.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with F	iling Reposi	itory)		TYPE OF REPORT			
Eddie Perez for Hartford				July 10 filing			
A. Total Contributions from Small Contributors - Received this	Period O	NLY					\$0.00
(See instructions for definition of Small Contributor)			Subtotal Section A	}			φυ.υυ
	Contributi	成的水料均匀水 6	rom Individuals				M.I.
Last Name		First					
Stewart	,	Mai	rk				Α
Residential Street Address	City	:			State CT	Zip Code 06051-2	2100
31 Carlson St	New Bri		CE 1		CI	00031-2	.109
Principal Occupation			of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of municipality does contribute municipality valued at more	r or business l	ndidate he/she i	committee for a chief s associated with have Yes	executive officer of a a contract with said No	Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of a star of the section L1? If yes, list Event #	or	or pros					\$20.00
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord		Date Received 06/08/2019	Aggregate contributions \$20.00			
Last Name		First					M.I.
Swiatowic		Mai	rk		T" _	1	
Residential Street Address	City Hartford	1			State	Zip Code 06105-4	4028
128 Evergreen Ave	Tiartion		of Employer			00,00	1020
Principal Occupation Landscaping		Self	Employed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contribute municipality valued at more	r or business l	ndidate he/she i	committee for a chief is associated with have Yes	executive officer of a a contract with said No	Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of a star of the section L1? If yes, indicate which branch branches of government the contract is with:	or	or pros		☑ No			\$100.00
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord	er	Date Received 06/28/2019	Aggregate contributions \$100.00)		
Last Name		First	:				M.I.
Szewczyk		Jan	1				
Residential Street Address 59 Lucyan St	City New Br	itain			State CT	Zip Code 06053-	2332
Principal Occupation	1		of Employer		JI.		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess o municipality does contribute municipality valued at more	r or business than \$5,000?	he/she	is associated with have	a contract with said No	Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of a star of the section L1? If yes, list Event # Is contributor a principal of a star of yes, indicate which branch branches of government the contract is with:	or	or pros	_	☑ Yes			\$50.00
Method of contribution:	Money Ord	ler	Date Received 06/28/2019	Aggregate contributions \$50.00			

\$170.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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See instructions from Small Contributions Subtotal Section A	NAME OF COMMITTEE (Provide Com	olete Name as Registered with Fi	iling Repos	itory)		TYPE OF REPORT			
Same of Employers Address State Contribution Subject Special Contribution Subject Spe	Eddie Perez for Hartford	The state of the s				July 10 filing			
Same of Employers Address State Contribution Subject Special Contribution Subject Spe	A. Total Contributions from Small C	ontributors - Received this	Period O	NLY					
First John Szewczyk Szewczyk John Szewczyk Szewczyk John Szewczyk Szewczyk Szewczyk John Szewczyk									\$0.00
Szewczyk Szewczyk Solida Szewczyk Solida State Szewczyk Solida State Szewczyk Solida		B. Itemized C	!ontributi	ions f	rom Individuals				
Residential Sirver Address 458 Stage Coach Rd Name of Employer City of Hartford	Last Name			First	1		, ,		M,I.
Second S	Szewczyk			Joh	nn				
Name of Employer City of Hartford Contribution is in excess of \$400 to a candidate committee for a chief executive officer of a contribution associated with an a contract with said municipality obes contributed for a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or lobbyist; posses, or dependent child of a lobbyist; posses, or dependent child of a lobbyist; posses, or lobbyist; posses,	Residential Street Address		1 '						
Security part of labyles, sponse, or dependent child of a lobbyles? Yes If contribution is in excess of \$400 to a caudidate committee for a chief executive officer of a municipality valued at more than \$5,000? Yes No	458 Stage Coach Rd		Durham	,			CI	06422-3	615
Second contribution associated with an ear contract with said around turns \$2.000? "Yes "No				I					
## State Variety	Januar dant abild a Ca labbudat0	municipality does contributor	or business		is associated with have	a contract with said	Amour	it of Conti	ribution
Method of contribution: Cash	event reported in Section L1?	If yes, indicate which branch o	r	·		∐ res ✓ No		\$	00.00,1
Taylor	Method of contribution:				Date Received	Aggregate contributions			
Residential Street Address 31 Riverpark Ave Principal Occupation State Amount of Contribution State City Chicope Name of Employer Retired	Last Name			First	t				M.I.
31 Riverpark Ave Chicopes MA 01013-1121	Taylor			Gra	ace				
Principal Occupation Name of Employer Retired Retired Retired Retired	Residential Street Address		£ .						
Secontributor a lobbyist, spouse, or dependent child of a lobbyist? Yes dependent child of a lobbyist? No municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No	31 Riverpark Ave		Chicope	,	,		MA	01013-1	121
dependent child of a lobbyist?				Reti	red				
## State of CT State of CT State of CT State of CT State of CT If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality valued at more than \$5,000? Yes Yes Yes Yes If contribution associated with an event reported in Section L1? Yes If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract or or prospective state contractor? Yes Yes Yes Is contribution associated with an event reported in Section L1? Yes, indicate which branch or branches of government the contract is with: Method of contribution: If yes, indicate which branch or branches of government the contract or prospective state contractor? Yes	municipality does contributor	or business	ndidate he/she	is associated with have	a contract with said	Amour	nt of Conti	ribution	
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 06/21/2019 \$500.00 Last Name First Residential Street Address 47 Hamilton St Principal Occupation Mail Handler Is contribution a lobbyist, sponse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? Method of contribution: Contract is with: Date Received Maggregate contributions 06/21/2019 \$500.00 Mail City Hartford Name of Employer State of CT State of CT Amount of Contribution of a state contract with have a contract with said municipality valued at more than \$5,000? Tyes, list Event # Method of contribution: Date Received Aggregate contributions Aggregate contributions Mall. Aggregate contributions Mall. Method of contribution and payroll Deduction Money Order O6/21/2019 State of CT State City Hartford Name of Employer State of CT Amount of Contribution descriptions Amount of Contribution description and principal of a state contractor or prospective state contractor? Tyes State Of Contribution and principal of a state contractor or prospective state contractor? Tyes State Of Contribution description of a state contractor or prospective state contractor? Tyes State Of Contribution description desc	event reported in Section L1?	If yes, indicate which branch o	ог	·		✓ No			\$500.00
Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 06/21/2019 \$500.00	If yes, list Event #		Ex	ecutiv					
Tejada Residential Street Address 47 Hamilton St Principal Occupation Mail Handler Name of Employer State of CT Is contributor a fobbyist, sponse, or dependent child of a lobbyist? Who Is this contribution associated with an event reported in Section L1? ### Pyes, list Event # Method of contribution: Elvis City Hartford Name of Employer State of CT Name of Employer State of CT Amount of Contribution Ves If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes Ves		bit Card Payroll Deduction	Money Ord	leг					
Residential Street Address 47 Hamilton St Principal Occupation Mail Handler Name of Employer State of CT Is contributor a lobbyist, sponse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? If yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Method of contribution: Date Received Aggregate contributions	Last Name		* *************************************	Firs	t		d		M.I.
Residential Street Address 47 Hamilton St Principal Occupation Mail Handler Name of Employer State of CT State of CT Is contributor a lobbyist, spouse, or dependent child of a lobbyist? No Is this contribution associated with an event reported in Section L1? If yes Is contributor a principal of a state contractor or prospective state contractor? Is contribution a principal of a state contractor or prospective state contractor? Is contribution associated with an event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions	Tejada			Elv	is				
Principal Occupation Mail Handler State of CT	·		City				ı	1	
Mail Handler State of CT	47 Hamilton St		Hartford	d			CT	06106-3	3007
dependent child of a lobbyist? V No	•			1					
event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Method of contribution: State of the section L1? If yes, indicate which branch or branches of government the contract is with: State of the section L1? If yes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions	J J	municipality does contributor municipality valued at more t	or business han \$5,000?	he/she	is associated with have	a contract with said No	Amour	it of Cont	ribution
If yes, list Event # contract is with: Executive Legislative Method of contribution: Date Received Aggregate contributions	event reported in Section L1?	If yes, indicate which branch o		or pros	spective state contracto	L_J res			\$100.00
	If yes, list Event #		☐ Ex	ecutiv	e Legisl	ative			
		bit Card Payroll Deduction	Money Ord	ler		,			

\$1,600.0	SUBTOTAL Section B - This Page
\$65,833.0	TOTAL of Section B Pages
\$65,833.0	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with Fi	iling Reposii	itory)		TYPE OF REPORT			
Eddie Perez for Hartford		562000000000000000000000000000000000000	A STATE OF THE PARTY OF THE PAR	July 10 filing			
A. Total Contributions from Small Contributors - Received this	Period Of	NLY					
See instructions for definition of Small Contributor)			Subtotal Section /	A.			\$0.00
B. Itemized (Contribution	ons fro	m Individuals				
Last Name		First	Name of the second seco				M.I.
Tejada		Elvis					
Residential Street Address	City				State	Zip Code	<u></u>
47 Hamilton St	Hartford	t			CT	06106-3	3007
Principal Occupation		Name o	f Employer				
Mail Handler		State			l'		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contributor municipality valued at more to the contributor municipality valued at more to the contributor municipality.	r or business I	ndidate c he/she is	ommittee for a chief associated with have Yes	executive officer of a a contract with said No	Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Yes Is contributor a principal of a star	or	or prospe	ective state contracto	√N ₀			\$50.00
## ## ## ## ## ## ## ## ## ## ## ## ##			Date Received 05/18/2019	Aggregate contributions \$256.35			
V Cross Cros		First	03/10/2010				M.I.
Last Name			garita				
Toro	Low	Wai	Janta		State	Zip Code	
Residential Street Address	City West H	lartford			CT	06119-	
51 Ardmore Rd Principal Occupation		Name o	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contribute municipality valued at more	er or business	he/she is	committee for a chief associated with hav Yes	f executive officer of a e a contract with said No	Amou	nt of Con	tribution
Is this contribution associated with an event reported in Section L1? Yes Yes Is contributor a principal of a state of the section L1? Yes Is contributor a principal of a state of the section L1? Yes Is contributor a principal of a state of the section L1? Yes Is contributor a principal of a state of the section L1? Yes Is contributor a principal of a state of the section L1?	or	r or prosp xecutive		✓ No			\$50.0
Method of contribution: Cash	Money Ord	der	Date Received 05/03/2019	Aggregate contributions \$50.0			
Last Name	······································	First					M.I.
Torres		Reu	ben				<u> </u>
Residential Street Address	City				State	Zip Code	
67 White St	Hartfor	rd			СТ	06114	-2342
Principal Occupation Truck Driver			of Employer ngineer Suppoi	t SUCS			
Is contributor a lobbyist, spouse, or Yes If contribution is in excess of municipality does contribute municipality valued at more	or or business	s he/she i	committee for a chies associated with have	f executive officer of a re a contract with said No	Amou	int of Con	tributio
Is this contribution associated with an event reported in Section L1? Is a contribution a principal of a start of the section L1? Is contribution a principal of a start of the section L1? In other contribution approximately of a start of the section L1?	. ог		_	√ No			\$100.0
If yes, list Event # contract is with:		xecutive		slative			
Method of contribution: ✓ Cash Personal Check Credit/Debit Card Payroll Deduction	Money Or	rder	Date Received 06/08/2019	Aggregate contribution \$100.0			

\$200.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provid	e Comple	te Name as Registered with Fi	ling Reposi	tory)		TYPE OF REPORT			
Eddie Perez for Hartford		and the state of t				July 10 filing			
A, Total Contributions from Si	nall Cor	tributors - Received this	Period O	NLY					
See instructions for definition of Sn	nall Conti	ributor)	100		Subtotal Section A				\$0.00
		B. Itemized C	ontributi	ons fi	rom Individuals				
Last Name				First					M.I,
Torres				Ric	ardo			<u>,</u>	
Residential Street Address			City				State	Zip Code 06106-4	240
218 Freeman St			Hartford				CT	00100-4	310
Principal Occupation Retired				Retir				.,	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more to	or business h	ndidate ne/she i	committee for a chief of a sassociated with have Yes	executive officer of a a contract with said No	Amoun	t of Contr	ibution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	_Yes ✓No	Is contributor a principal of a state If yes, indicate which branch of branches of government the	r	or pros		✓ No			\$50.00
Method of contribution:	redit/Debit	contract is with: Card Payroll Deduction	Money Orde		Date Received 05/03/2019	Aggregate contributions \$100.00	· 		
Last Name				First					M,I,
Torres				Ric	ardo				
Residential Street Address			City				State	Zip Code	
218 Freeman St			Hartford	1			CT	06106-4	310
Principal Occupation Retired				Name Retii	of Employer red				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more t	or business l	ndidate he/she	conunittee for a chief is associated with have Yes	executive officer of a a contract with said No	Amour	t of Conti	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	∐Yes ✓No	Is contributor a principal of a sta If yes, indicate which branch of branches of government the	эг	or pros		☑ No			\$50.00
Method of contribution: Cash Personal Check	Credit/Debi	contract is with:	Money Ord	ег	Date Received 05/18/2019	Aggregate contributions \$100.00			
Last Name				Firs	i				M,I,
Trivali				Mir	ta				
Residential Street Address 64 Sylvan Ave			City Merider	ì			State CT	Zip Code 06451-2	2824
Principal Occupation Contracts			· · · · · · · · · · · · · · · · · · ·		of Employer e of CT				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contribute municipality valued at more	r or business than \$5,000?	he/she	is associated with have	a contract with said No	Amou	nt of Cont	ribution
ls this contribution associated with an event reported in Section L1?	∐Yes ✓ No	Is contributor a principal of a sta If yes, indicate which branch of		or pro		✓ No			\$25.00
If yes, list Event #	<u>~</u> .₁0	branches of government the contract is with:	☐Ex	ecutiv	e Legisl	ative	_		
Method of contribution: ☐ Cash	Credit/Debi	t Card Payroll Deduction	Money Ord	ler	Date Received 05/03/2019	Aggregate contributions \$25.00	. 1		

\$125.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide C	Complete	Name as Registered with Fil	ling Reposi	tory)		TYPE OF REPORT			
Eddie Perez for Hartford		The same are a series and a ser				July 10 filing			
A. Total Contributions from Sma	ill Cont	ributors - Received this	Period O	NLY					
(See instructions for definition of Smal					Subtotal Section A				\$0.00
	\$2.50 S\$1	B. Itemized C	ontributi	ons f	rom Individuals	7.05.00.0000			
Last Name		and a story of property of the data to refer to the entry of property and a story of the entry of the entry of		First					M.I.
Valentino				Ma	ria				L
Residential Street Address			City	<u> </u>			State	Zip Code	
47 Sharon Ln			Wethers	sfield			СТ	06109-3	409
Principal Occupation				Name	of Employer				
January abild of a labbriag	Yes No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l	ndidate ne/she i	committee for a chief e is associated with have Yes	executive officer of a a contract with said	Amour	it of Cont	ribution
event reported in Section L17	Yes I	s contributor a principal of a state If yes, indicate which branch or branches of government the	г			[√]No			\$100.00
If yes, list Event #		contract is with:	∐Ex	ecutiv			-		
Method of contribution: Cash Personal Check Cred	lit/Debit C	ard Payroll Deduction	Money Ord	er	Date Received 06/28/2019	Aggregate contributions \$100.00			1
Last Name				First	t .				M.I.
Valinho				Cai	rlos				
Residential Street Address	*****		City				State	Zip Code	2004
75 Avon Mountain Rd			Avon	1			CT	06001-3	3904
Principal Occupation Self Employed				I	of Employer Employed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes No	If contribution is in excess of municipality does contributor municipality valued at more the	or business	ndidate he/she	committee for a chief of is associated with have Yes	executive officer of a a contract with said No	Amou	nt of Cont	ribution
event reported in Section L1?	1168	s contributor a principal of a stat		or pros	spective state contractor	? ☐ Yes ☑ No		\$	1,000.00
If yes, list Event #]No	branches of government the contract is with:	Ex	ecutiv	e Legisla	ative			
Method of contribution: Cash Personal Check ✓ Cred	dit/Debit C	ard Payroll Deduction	Money Ord	er	Date Received 06/19/2019	Aggregate contributions \$1,000.00			
Last Name				Firs	t				M.I.
Vargas				Am	nado				
Residential Street Address			City				State	Zip Code	1004
26 Paley Farms Rd			Portlan		0.7		СТ	06480-	1021
Principal Occupation Attorney					of Employer gas Chapman Wo	ods			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes No	If contribution is in excess of municipality does contributor municipality valued at more to	or business han \$5,000?	he/she	is associated with have	a contract with said No	Amour	nt of Cont	ribution
event reported in Section L17	res	Is contributor a principal of a state If yes, indicate which branch o		or pro	spective state contractor	□ 103			\$100.00
If yes, list Event #]No	branches of government the contract is with:	Ex	ecutiv	e Legisl	ative No			
Method of contribution: ☐ Cash ☐ Personal Check ✓ Cree	dit/Debit C	Card Payroll Deduction	Money Ord	ler	Date Received 06/17/2019	Aggregate contributions \$100.00			

\$1,200.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT				
Eddie Perez for Hartford				July 10 filing			
A. Total Contributions from Small Contributors - Received this	Period O	NLY					
(See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
B. Itemized C	Contributi	ions f	rom Individuals				
Last Name		First					M,I.
Vargas .		Gui	ilda				
Residential Street Address	City				State	Zip Code	
»: · 10		la.	-erl				
Principal Occupation		Name	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contributor municipality valued at more to	or business l	he/she i			Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of a sta If yes, indicate which branch of branches of government the	or	or pros	_	✓ No			\$25.00
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord		Date Received 06/28/2019	Aggregate contributions \$25.00			
Last Name		First					M.I.
Vargas		Ma	rgarita				
Residential Street Address	City				State	Zip Code	\F00
47 Ledger St	Hartford				СТ	06106-3	3539
Principal Occupation		Name	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of municipality does contributor municipality valued at more to	or business	he/shc			Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of a sta If yes, indicate which branch obtained for government the	or	or pros	_	N₀			\$25.00
Method of contribution: Cash	Money Ord		Date Received 06/28/2019	Aggregate contributions \$25.00			
Last Name		First	t				M.I.
Vasquez		Ma	ria				
Residential Street Address	City Hartford	d			State CT	Zip Code 06114-1	1870
700 Maple Ave, Apt 303 Principal Occupation Retired	Harton	-	of Employer red		<u> </u>	1 23117	
Is contributor a lobbyist, spouse, orYes If contribution is in excess of municipality does contributed municipality valued at more to	r or business	he/she			Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a sta If yes, indicate which branch to branches of government the		or pros	spective state contracto	r?			\$50.00
If yes, list Event # V NO branches of government the contract is with:	Ex	recutiv		ative			
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord	der	Date Received 05/03/2019	Aggregate contributions \$50.00			

\$100.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

SEEC FORM 20 Revised January 2015

I. MONETARY RECEIPTS (Sections A-K)

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NAME OF COMMITTEE (Provide Com	olete Name as Registered with Fi	ling Reposi	itory)		TYPE OF REPORT			
Eddie Perez for Hartford		- 1405 mass (4-200 m)	res namedy, 140		July 10 filing			
A. Total Contributions from Small C	ontributors - Received this	Period O	NLY			-		
See instructions for definition of Small Co	ntributor)			Subtotal Section A				\$0.00
	B. Itemized C	ontributi!	ons f	rom Individuals				
Last Name		The control of the co	First					M.I.
Vega			lvet	te				
Residential Street Address		City				State	Zip Code	
18 Meadowlark Dr		Windso	r			CT	06095-1	533
Principal Occupation			Name	of Employer				
Analyst			Mas	s Mutual				
ls contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor	or business l	ndidate he/she i	committee for a chief of a sassociated with have Yes	executive officer of a a contract with said No	Amoun	t of Conti	ibution
Is this contribution associated with an Yes	Is contributor a principal of a stat	te contractor	or pros	pective state contractor	r?			\$50.00
event reported in Section L1?	If yes, indicate which branch o	r			✓ No			Ψ00.00
If yes, list Event #	branches of government the contract is with:	☐ Ex	ecutiv	e Legisla	ative			
Method of contribution: Cash Personal Check Credit/De	ebit Card Payroll Deduction]Money Ord	er	Date Received 05/03/2019	Aggregate contributions \$50.00			
Last Name			First					M,I.
Vega			Mil	agros				
Residential Street Address		City				State	Zip Code	
33 Belmont St		Hartford	<u></u>			СТ	06106-2	906
Principal Occupation			1	of Employer				
na			na					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality door contributor	or business				Amoui	it of Conti	ibution
Is this contribution associated with an Yes	Is contributor a principal of a sta	te contractor	or pros	pective state contractor	r? Yes			\$10.00
event reported in Section L1?	If yes, indicate which branch of branches of government the			_	✓ No			Ψ.σ.σσ
If yes, list Event #	contract is with:	Ex	ecutiv	e Legisl	ative			
Method of contribution: Cash Personal Check Credit/D	ebit Card Payroll Deduction	Money Ord	ler	Date Received 05/03/2019	Aggregate contributions \$10.00	,		
Last Name		····	Firs					M.I.
Vera			Lui	s				
Residential Street Address		City	<u> </u>			State	Zip Code	
21 Derek Ln		Windso	r			СТ	06095-1	739
Principal Occupation Retired			Name Reti	of Employer red				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does contributor municipality valued at more t	r or business than \$5,000?	he/she	is associated with have	a contract with said No	Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a sta If yes, indicate which branch of		or pro	spective state contracto	res			\$50.00
If yes, list Event #	branches of government the contract is with:		cecutiv					
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/D	ebit Card Payroll Deduction	Money Ord	ier	Date Received 05/17/2019	Aggregate contributions \$50.00			

\$110.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)					TYPE OF REPORT					
Eddie Perez for Hartford			, , , , , , , , , , , , , , , , , , , ,			July 10 filing				
A. Total Contributions from Sm	all Conti	ributors - Received this	Period O	NLY						
(See instructions for definition of Sma	all Contrib				Subtotal Section A		en anno anno anno anno		\$0.00	
		B. Itemized C	ontributi	ons f	rom Individuals					
Last Name				First					M.1.	
Waller				Ter	ry					
Residential Street Address			City				State	Zip Code	444	
140 Terry Rd			Hartford				СТ	06105-1	111	
Principal Occupation				Name	of Employer					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amount of Contribution			
event reported in Section L1?	res	s contributor a principal of a state If yes, indicate which branch or branches of government the contract is with:	· _	or pros		∐ Yes √]No			\$500.00	
Method of contribution: Cash Personal Check Cre	edit/Debit C		Money Orde	er	Date Received 06/03/2019	Aggregate contributions \$500.00				
Last Name				First					M.I.	
Wasserman				Jas	on					
Residential Street Address			City				State Zip Code CT 06074-2885		200	
75 Petersen Way			South V				СТ	06074-2	2885	
Principal Occupation Consultant					of Employer ense Consulting					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes ✓No	If contribution is in excess of municipality does contributor municipality valued at more the	or business I				Amoun	t of Cont	ribution	
Is this contribution associated with an event reported in Section L1?	⊥ res	s contributor a principal of a state If yes, indicate which branch or		or pros	pective state contractor	? ☐ Yes ☑ No			\$200.00	
If yes, list Event #	No	branches of government the contract is with:	Exc	ecutiv		ative				
Method of contribution: ☐ Cash ☐ Personal Check ☑ Cro	edit/Debit C	ard Payroll Deduction	Money Orde	er	Date Received 06/18/2019	Aggregate contributions \$200.00				
Last Name				First					M.I.	
Wellin				Pau	ıl					
Residential Street Address			City				State	Zip Code	2006	
482 East St			Plainvill		.CP1		СТ	06062-3	200	
Principal Occupation Ironworkers					of Employer vorkers Local 15					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more th	or business l				Amour	t of Cont	ribution	
Is this contribution associated with an event reported in Section L1?	_ Yes	s contributor a principal of a state		or pros	pective state contractor	?			\$10.00	
If yes, list Event #	✓No	branches of government the contract is with:	Ex	ecutiv	eLegisla	ative				
Method of contribution: ✓ Cash Personal Check Cre	edit/Debit C	ard Payroll Deduction	Money Orde	er	Date Received 04/04/2019	Aggregate contributions \$10.00				

\$710.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Providence)	le Comple	te Name as Registered with Fi	ling Reposi	itory)		TYPE OF REPORT			
Eddie Perez for Hartford	,	The state of the s	- Marie			July 10 filing			
A. Total Contributions from S	mall Co	ntributors - Received this	Period O	NLY					
(See instructions for definition of Si		ributor)			Subtotal Section A				\$0.00
		B. Itemized C	ontributi	ons f	rom Individuals				
Last Name				First					M.I.
Whyte				Ang	gela				
Residential Street Address			City				State	Zip Code	.005
33 Gloria St			Windso				CT	06095-3	625
Principal Occupation Analyst				Name Vona	of Employer 3				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business I	ndidate he/she i	committee for a chief of a sassociated with have	executive officer of a a contract with said	Amoun	t of Conti	ibution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Yes ✓No	Is contributor a principal of a stat If yes, indicate which branch or branches of government the	r	or pros	_	∐ 1es ✓No			\$30.00
Method of contribution: Cash Personal Check	Credit/Debit	contract is with:	Money Ord		Date Received 06/24/2019	Aggregate contributions \$30.00	-		
Last Name				First					M.I.
Young				Tar	nmy				
Residential Street Address			City				State	Zip Code	.044
57 Huntington St, Apt 1A			Hartford				CT	06105-7	611
Principal Occupation Community Outreach				1	of Employer ation Army				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1?	☐ Yes ✓ No	Is contributor a principal of a state		or pros	pective state contractor	r?			\$5.00
If yes, list Event #	[A] IKO	branches of government the contract is with:	☐ Ex	ecutiv	e Legisla	ative			
Method of contribution: Cash Personal Check	Credit/Debi	t Card Payroll Deduction	Money Ord	ler	Date Received 04/04/2019	Aggregate contributions \$5.00			
Last Name				First					M.I.
Zayas				Ge	rardo				
Residential Street Address			City				State	Zip Code	7045
5140 Whispering Leaf Tri			Valrico	1			FL	33596-7	945
Principal Occupation				Name	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the state of the st	or business han \$5,000?	he/she	is associated with have	a contract with said No	Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	☐ Yes	Is contributor a principal of a state of yes, indicate which branch o		or pros	spective state contractor	r? ☐ Yes . ✔ No			\$50.00
If yes, list Event #	√ No	branches of government the contract is with:	☐ Ex	ecutiv	e Legisl	ative			
Method of contribution: ☐ Cash	Credit/Debi	t Card Payroll Deduction	Money Ord	ler	Date Received 06/28/2019	Aggregate contributions \$50.00			

\$85.00	SUBTOTAL Section B - This Page
\$65,833.00	TOTAL of Section B Pages
\$65,833.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

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NAME OF COMMITTEE (Provide Complete N	lame as Registered with Fi	ling Reposi	tory)		TYPE OF REPORT			
Eddie Perez for Hartford	<u> </u>				July 10 filing			
A. Total Contributions from Small Contributions for definition of Small Contribu		Period O	NLY	Subtotal Section A				\$0.00
	B. Itemized C	ontributi	ons f	rom Individuals				0.00
Last Name			First					M.J.
Zayas			Ric	cardo				
Residential Street Address		City	ļ			State	Zip Code	r.
83 Oak St		Hartford	i			CT	06106-1	515
Principal Occupation Lawyer			Name Self	of Employer				
dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoui	nt of Conti	ribution
event reported in Section L1?	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the							\$500.00
	ranches of government the ontract is with:	Ex	ecutiv	e Legisla	ative			
Method of contribution: ☐ Cash Personal Check Credit/Debit Care	d Payroll Deduction	Money Orde	er	Date Received 05/18/2019	Aggregate contributions \$500.00			
Last Name			First					M.I.
Schulman			Syc	dney				
Residential Street Address		City				State	Zip Code	
8 High Ledge Rd		Bloomfi	eld			CT	06002-2	112
Principal Occupation				of Employer ner Mayor Bloom	field			
dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amou	nt of Cont	ribution
event reported in Section L1? Yes If No bi	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: Executive Legislative							\$500.00
Method of contribution: Cash Personal Check Credit/Debit Card	d Payroll Deduction	Money Ord	er	Date Received 05/17/2019	Aggregate contributions \$500.00			

SUBTOTAL Section B - This Page	\$1,000.00
TOTAL of Section B Pages	\$65,833.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$65,833.00

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NAME OF COMMITTEE (Provide Comp	olete Name (as Register	red with I	Filing Re	epository)		TYPE OF REPORT	
Eddie Perez for Hartford						essanna omnina pro	July 10 filing	
	60 (S. G. S.	C1, Cor	itributio	ns fro	m Other Co	APD000495534799884 94-1-880,000-1-1-9-		
Name of Committee Carpenters Local 326					Name of Trea Jason Lebe			
Address 500 Main St			Is this co reported		n associated with n L1?	fyes, list Event#		Amount of Contribution
City Yalesville	State CT	Zip Code 06492-		1	eceived 5/2019	Aggregate Con	atributions \$300.00	\$300.00
Name of Committee Iron PAC 424					Name of Trea James J Do	oheny		
Address 15 Bernhard Rd			Is this co reported		n associated with n L1?	f yes, list Event #		Amount of Contribution
City North Haven	State CT	Zip Code 06473-		E .	eccived 5/2019	Aggregate Cor	1,500.00 \$1,500.00	\$1,500.00
Name of Committee IUOE Local 478 Political					Name of Trea Craig J Me	tz		
Address 1965 Dixwell Ave				entribution in Section	n associated with n L1?	an event If yes, list Event #	Yes No	Amount of Contribution
City Hamden	State CT	Zip Code 06514-		1	teceived 8/2019	Aggregate Cor	ntributions \$1,500.00	\$1,500.00
Name of Committee Bricklayers and Allied Cr	•				Name of Trea Timothy W			
Address 17 N Plains Industrial Rd			ł .	ontribution in Section	n associated with n L1?	h an event <i>If yes</i> , list Event #	∐Yes ✓No	Amount of Contribution
City Wallingford	State CT	Zip Code 06492-		1	Received 5/2019	Aggregate Cor	ntributions \$500.00	\$500.00
Name of Committee International Brotherhood					Name of Trea Kenneth B.			
Address 208 Murphy Rd			ŀ	in Sectio	n associated with n L1?	h an event <i>If yes</i> , list Event <i>i</i>	∐Yes ✓ No	Amount of Contribution
City Hartford	State CT	Zip Code 06114-			Received 4/2019	Aggregate Co	ntributions \$1,500.00	\$1,500.00
Name of Committee International Union of Pa	<u>'</u>				Name of Trea Dominick C			
Address 79 Bradley St				ontributio I in Sectio	m associated wit on L1?	h an event <i>If yes</i> , list Event i	∐Yes ☑ No	Amount of Contribution
City Middletown	State CT	Zip Code 06457			Received 3/2019	Aggregate Co	ntributions \$1,500.00	\$1,500.00
Name of Committee Plumbers & Pipefitters Lo	<u>'</u>	-		•	Name of Trea			
Address 1250 E Main St				ontributio I in Sectio	on associated wit on L17	h an event <i>If yes</i> , list Event	∐Yes ✓ No	Amount of Contribution
City Meriden	State CT	Zip Code 06450			Received 3/2019	Aggregate Co	ntributions \$1,500.00	\$1,500.00
Name of Committee				Name of Treasurer John Nimmons				
					on associated wit on LI?	h an event <i>If yes</i> , list Event	∐Yes ✓ No #	Amount of Contribution
City Rocky Hill	State CT	Zip Cod 06067			Received 7/2019	Aggregate Co	ntributions \$1,500.00	\$1,500.00
	·							

\$9,800.00	SUBTOTAL Section C1 - This Page
\$9,800.00	TOTAL of Section C1 Pages
\$9,800.00	TOTAL OF ALL COMMITTEE CONTRIBUTIONS AND RECEIPTS (Sections C1 + C2) (Enter total on Line 14, Column A of Summary Page

I. MONETARY RECEIPTS (Sections A-	K)	Page	96	of	103
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF RE	PORT			
Eddie Perez for Hartford	July 10 filing				
Summary of Other Monetary Receipts (Sections D-K)					
Total Loans Received this Period (Section D)					\$0.00
Total Receipts from Entities other than Individuals or Other Committees (Section E)	+				\$0.00
Total Amount Transferred from Affiliated Business Treasury (Section F)	+				\$0.0
Total Amount Transferred from Affiliated Labor Union or Other Organization Treasury (Section G)	+				\$0.0
Total Amount of Personal Funds of the Candidate Received this Period (Section H)	+				\$0.0
Total Amount of Interest from Deposits in Authorized Accounts (Section J)	+		****		\$0.0
Total Miscellaneous Monetary Receipts not Considered Contributions (Section K)	+				\$0.0

NAME OF COMNITTEE (Provide Complete Name as Registered with Filing Repository,)	TYPE OF REPORT	
T 4 D	47.5	,	
Event # Description	nt Information		
Date of Event Letter 5/3/19 RECEY	PTION		Was this a fundraising event? Yes □ No
BH VAN BLOCK AVE	City HARTFOU	as	State Zip Code CT 66106
Subpart 1: (All Committees)			
Was this event hosted at a personal residence?	☐ Yes (If yes, go to Section L5 Associated with a Hou purchases made by host No	se Party and complete	c required information for any
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?	☐ Yes (If yes, go to Section Le and complete required i		not Considered Contributions
Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100?	☐ Yes (If yes, enter Total Reco	cipts here.)	\$
Subpart 2: (Party Committees, Municipal Candidates and Political Community Were there purchases of advertising space in a program book or on a sign associated with this fundraiser?		Purchases of Adverti	ising Space in a Program Book
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?	☐ Yes (If yes, enter Total Reco	ipts here.)	\$
Event # 7 Description		jan saka ejengasi da	
Event # Date of Event 2 Letter	mad		Was this a fundraising event?
84 VAN BLOCK AVE	City Harr	renzo	State Zip Code
Subpart 1: (All Committees) Was this event hosted at a personal residence?	Yes (If yes, go to Section L5 Associated with a House purchases made by hoste	se Party and complete	required information for any
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?	Yes (If yes, go to Section La and complete required in	In-Kind Donations n	ot Considered Contributions
Was this fundraiser a tag sale, auction, or other sale of donated items with purchases from an individual of up to \$100?	Yes (If yes, enter Total Rece	ipts here.)	\$
Subpart 2: (Party Committees, Municipal Candidates and Political Comm Were there purchases of advertising space in a program book or on a sign associated with this fundraiser?		Purchases of Adverti	sing Space in a Program Book tion.)
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?	☐ Yes (<i>If yes</i> , enter Total Recei ☐ No	pts here.)	\$
SUBTOTAL Section L1—Subpart 1 (All Committees) Total Receipts fr	om Sale of Donated Items — T	his Page	
SUBTOTAL Secti	ion L1—subpart 3 <i>(Town Commit</i> ipts from Food Purchases — T	es ONLY)	
	TOTAL of additional Section		
TOTAL OF ALL RECE	IPTS FROM SMALL PUR Line 16a, Column A of Summary	CHASES	

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III. NONMONETARY RECEIPTS (Sections M-O)

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rage	91	61	IV.

NAME OF COMMITTEE (Provide Cor	nplete Name as Regist	ered with Filing Repository)	TYPE OF REPO)RT	
Eddie Perez for Hartford			July 10 filing		
		M. In-Kind Contributi	ons		
Name Elvis Tejada					
Street Address 47 Hamilton St		City Hartfo	ord	State CT	Zip Code 06106-3007
Type of Contributor: Committee Individual / Sole Proprietorship Other	Date Received 06/28/2019	Aggregate Contributions \$256.35	Description of In-Kind Contribution For Car Wrap	,	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality does o		mmittee for a chief executive officer of a ssociated with have a contract with said Yes No		rket Value of this ontribution
Is this contribution associated with an event reported in Section L1?	If yes, indi	r a principal of a state contractor icate which branch or branches of It the contract is with:			\$106.35

SUBTOTAL Section M - This Page	\$106.35
TOTAL of Section M Pages	\$106.35
TOTAL OF ALL IN-KIND CONTRIBUTIONS (Enter total on Line 23, Column A of Summary Page Totals)	\$106.35

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	NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) TYPE OF REPORT					
Eddie Perez for Hartford July 10 filing						
	P. Expense	es Paid by Commit	ltee			
Name of Payee Arch Street Tavern				Date of Payment	Method of ✓ Check	
04/12/2019			Debit Card EFT			
Street Address		City Hartford			State CT	Zip Code 06103-2832
85 Arch St		· iditiota	I =			00100 2002
Purpose of Expenditure (by code) FOOD	Description		Even	ut #		Amount
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required in None of the below (does not involve another candidate or Coordinated with reimbursement sought (joint expenditur Coordinated without reimbursement sought (in-kind conti	re) Indeper	ıdent	cked)		\$231.43
Name of Payee Blue Edge Strategies	3			Date of Payment 05/20/2019	Method of ✓ Check ☐ Debit 0	#
Street Address 983 Main St		City Manchester			State CT	Zip Code 06040-6018
Purpose of Expenditure (by code) CNSLT					Amount	
Expenditure # (if applicable) Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) None of the below (does not involve another candidate or committee) Coordinated with reimbursement sought (joint expenditure) Coordinated without reimbursement sought (in-kind contribution) Organization: A B C D					\$2,848.56	
Name of Payee Blue Edge Strategies Date of Payment 05/31/2019				Method of Payment ✓ Check # 14 Debit Card EFT		
Street Address 983 Main St		City Manchester	i		State CT	Zip Code 06040-6018
Purpose of Expenditure (by code) A-WEB	Description		Even	t #		Amount
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required in None of the below (does not involve another candidate or Coordinated with reimbursement sought (joint expenditur Coordinated without reimbursement sought (in-kind contra	committee) Indepen	ndent	cked)		\$2,000.00
Name of Payee Blue Edge Strategies	3			Date of Payment 05/31/2019	Method of Check	[#] 14
Street Address		City Manchester			State CT	Zip Code 06040-6018
983 Main St Purpose of Expenditure (by code) CNSLT	Description	- Handidatol	Event	t #		Amount
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required un None of the below (does not involve another candidate or Coordinated with reimbursement sought (joint expenditur Coordinated without reimbursement sought (in-kind contra	committee) Indepen	ident	cked)		\$3,629.55

SUBTOTAL Section P - This Page	\$8,709.54
TOTAL of Section P Pages	\$34,195.10
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 19, Column A of Summary Page Totals)	\$34,195.10

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NAME OF COMMITTE	E (Provide Complete Name as Registered with Filing	Repository)		TYPE OF REPORT		
Eddie Perez for Hartford July 10 filing						
	P. Expense	es Paid by Commi	ttee			
Name of Payee Blue Edge Strategies	\$			Date of Payment 05/31/2019	Method of Check	# 14
Street Address 983 Main St		City Manchester			State CT	Zip Code 06040-6018
Purpose of Expenditure (by code) PRNT	Description		Event	ŧ#		Amount
Expenditure # (If applicable)	Type of Expenditure (Itemization in Addendum P Required w None of the below (does not involve another candidate of Coordinated with reimbursement sought (joint expenditu Coordinated without reimbursement sought (in-kind cont	r committee) Indeper	ndent	A B C D		\$749.77
Name of Payee Blue Edge Strategies	3			Date of Payment 05/31/2019	Method of Check Debit	# <u>14</u>
Street Address 983 Main St		City Manchester			State CT	Zip Code 06040-6018
Purpose of Expenditure (by code) PRNT	Description		Event	#		Amount
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required in None of the below (does not involve another candidate of Coordinated with reimbursement sought (joint expenditur Coordinated without reimbursement sought (in-kind cont	committee) Indeper	ndent	ked)		\$90.40
Name of Payee Connecticut Democra	atic State Central Committee			Date of Payment 05/10/2019	Method of Check Debit	#
Street Address 30 Arbor St		City Hartford			State CT	Zip Code 06106-1215
Purpose of Expenditure (by code) WEB	Description		Event	#		Amount
Expenditure # (If applicable)	Type of Expenditure (Itemization in Addendum P Required in None of the below (does not involve another candidate or Coordinated with reimbursement sought (joint expenditure) Coordinated without reimbursement sought (in-kind control of the contro	committee) Indepen	ndent	ked)		\$350.00
Name of Payce Connecticut Democra	atic State Central Committee		The state of the s	Date of Payment 05/11/2019	Method of Check Debit	#
Street Address 30 Arbor St		City Hartford			State CT	Zip Code 06106-1215
Purpose of Expenditure (by code) WEB	Description		Event	#		Amount
Expenditure # (if applicable)	Type of Expenditure (Hemization in Addendum P Required in Vancous None of the below (does not involve another candidate or Coordinated with reimbursement sought (joint expenditur Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-kind control of the Coordinated without reimbursement sought (in-ki	committee) Indepen	dent	ked)		\$150.00

SUBTOTAL Section P - This Page	\$1,340.17
TOTAL of Section P Pages	\$34,195.10
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 19, Column A of Summary Page Totals)	\$34,195.10

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NAME OF COMMITTEE	E (Provide Complete Name as Registered with Filing	Repository)	TYPE OF REPORT		
Eddie Perez for Hartford July 10 filing					
	P. Expense	s Paid by Commit	ttee		
Name of Payec			Date of Payment	Method of	
Connecticut Institute for Community Development - Puerto Rican Pa		rade, inc	05/22/2019	Debit	
a		City		State	Zip Code
Street Address		Hartford		CT	06106-1622
80 Cedar St	Description		Event #		
Purpose of Expenditure (by code) ATT	Description				Amount
Expenditure #	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked)			-	\$500.00
(if applicable)	None of the below (does not involve another candidate or committee)			<u> </u>	
	Coordinated with reimbursement sought (joint expenditure				
	Coordinated without reimbursement sought (in-kind cont	ribution) Organiz			
Name of Payee			Date of Payment	Method of Check	f Payment : #
Evelyn Dukes			05/31/2019	Debit	
Street Address		City		State	Zip Code
		Hartford		СТ	06105-4113
448 Prospect Ave Purpose of Expenditure	Description		Event #	<u> </u>	Amount
(by code) CNSLT	•				Amount
Expenditure #	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked)				\$600.00
(if applicable)	None of the below (does not involve another candidate or	Indene	ndent		
	Coordinated with reimbursement sought (joint expenditu	re)Oreani		1	
Coordinated without reimbursement sought (in-kind contribution)					f Payment
Name of Payee Electrical Power Soli	utions LLC		04/28/2019	✓ Check	< #
			04/20/2010	Debit	Card EFT
Street Address		City		State	Zip Code
104 Hannah Ln		Coventry		СТ	06238-1283
Purpose of Expenditure	Description		Event #		Amount
(by code) OVHD					
Expenditure #	Type of Expenditure (Itemization in Addendum P Required u		" is checked)	l	\$1,600.00
(if applicable)	None of the below (does not involve another candidate o	Hndene	ndent		
	Coordinated without reimbursement sought (in-kind cont	Organi	zation: A B C D		
Name of Payee			Date of Payment		of Payment
Electrical Power Sol	utions LLC		06/01/2019	Checl	
				Debit	
Street Address		City		State	Zip Code 06238-1283
104 Hannah Ln		Coventry			00200-1200
Purpose of Expenditure (by code) OVHD	Description		Event #		Amount
			_	ድዕለስ ለሳ	
Expenditure # Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) (if applicable)					\$800.00
Coordinated with reimbursement sought (joint expenditure)					
Coordinated without reimbursement sought (in-kind contribution)					

SUBTOTAL Section P - This Page	\$3,500.00
TOTAL of Section P Pages	\$34,195.10
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 19, Column A of Summary Page Totals)	\$34,195.10

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IV. EXPENDITURES (Sections P-T)

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NAME OF COMMITTEE	E (Provide Complete Name as Registered with Filing	Repository)		TYPE OF REPORT		
Eddie Perez for Hartfo	ord			July 10 filing	21012 amazini	No. of the last of
	P. Expense	s Paid by Commit	itee			
Name of Payee			Ţ	Date of Payment	Method of Payment ✓ Check #	
Every Action, Inc				05/20/2019	Debit	
Street Address		City Washington			State DC	Zip Code 20005-2158
1445 New York Ave			l F	. II		
Purpose of Expenditure (by code) WEB	Description		Event			Amount
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required we None of the below (does not involve another candidate of Coordinated with reimbursement sought (joint expenditute Coordinated without reimbursement sought (in-kind cont	r committee) [Independent Committee]	ndent	ked)		\$450.00
Name of Payee Gum Spirit Productio	ns			Date of Payment 05/06/2019	Method of Check	# EFT
Street Address 452 Roosevelt Tri		City Windham			State ME	Zip Code 04062-6931
Purpose of Expenditure (by code) A-OTH	Description		Event	t #		Amount
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required u None of the below (does not involve another candidate o Coordinated with reimbursement sought (joint expenditu Coordinated without reimbursement sought (in-kind cont	r committee) re) Indepe	ndent	[]A	*	\$3,450.00
Name of Payee Hispanic Health Council Date of Payment 05/06/2019			Method of ✓ Check ☐ Debit			
Street Address 175 Main St		City Hartford		<u> </u>	State CT	Zip Code 06106-1818
Purpose of Expenditure (by code) MISC	Description	I	Even	t#		Amount
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required to None of the below (does not involve another candidate of Coordinated with reimbursement sought (joint expenditute Coordinated without reimbursement sought (in-kind con	r committee) Indepe	ndent	cked)		\$250.00
Name of Payee Jason Ortiz				Date of Payment 05/06/2019	Method o	
Street Address		City Hartford			State CT	Zip Code 06105-3504
239 Farmington Ave Purpose of Expenditure (by code) WAGE	Description	<u> </u>	Even	ıt #		Amount
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required to None of the below (does not involve another candidate of Coordinated with reimbursement sought (joint expenditude Coordinated without reimbursement sought (in-kind con	r committee) Indepe		cked)		\$8,000.00

SUBTOTAL Section P - This Page	\$12,150.00
TOTAL of Section P Pages	\$34,195.10
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 19, Column A of Summary Page Totals)	\$34,195.10

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NAME OF COMMITTEE	(Provide Complete Name as Registered with Filing)	Repository)		TYPE OF REPORT		
ddie Perez for Hartfo		2000		July 10 filing		
	P, Expense	s Paid by Commit	tee			
Name of Payee Jason Ortiz				Date of Payment 05/31/2019	Method of ✓ Check ☐ Debit	# Card EFT
Street Address		City Hartford			State CT	Zip Code 06105-3504
239 Farmington Ave Purpose of Expenditure (by code) WAGE	Description		Even	k #		Amount
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required un V None of the below (does not involve another candidate or Coordinated with reimbursement sought (joint expenditur Coordinated without reimbursement sought (in-kind cont	committee) Indeper	ndent	ABCD		\$8,000.00
Name of Payce Tremont Public Advis	sors			Date of Payment 05/20/2019	Method o	Card EFT
Street Address 750 Main St, Ste 500)	City Hartford			State CT	Zip Code 06103-2709
Purpose of Expenditure (by code) WEB	Description		Ever			Amount
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required u None of the below (does not involve another candidate o Coordinated with reimbursement sought (joint expenditu Coordinated without reimbursement sought (in-kind com	r committee) Indepe	ndent			\$195.39
Name of Payee WRYM - WWCO	Continuo	THE STATE OF THE S		Date of Payment 05/22/2019	Method o	
Street Address 1056 Willard Ave		City Newington			State CT	Zip Code 06111-3540
Purpose of Expenditure (by code) A-RAD	Description		Eve			Amount
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required None of the below (does not involve another candidate of Coordinated with reimbursement sought (joint expenditude Coordinated without reimbursement sought (in-kind cor	or committee) Indepe	endent			\$300.00

\$8,495.39	SUBTOTAL Section P - This Page
\$34,195.10	TOTAL of Section P Pages
\$34,195.10	TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 19, Column A of Summary Page Totals)

sed January 2015 ME OF COMMITTEE	(Provide Complete Name as Registered with Filing Rep	pository)	TYPE OF REPORT		
die Perez for Hartfo	rd .		July 10 filing		
	S. Expenses Incurred by Committe	ee but Not Paid During	this Period	Date Inc	сиrred
ame of Creditor lue Edge Strategies			•	06/15	/2019
		City			Zip Code
rect Address		Manchester			06040-6018
83 Main St appose of Expenditure	Description		Event #		ount Incurred imate or Actual)
y code) CNSLT	Consulting			(25).	\$3,000.00
xpenditure#	Type of Expenditure (Itemization in Addendum S Required unles	ss "None of the below" is check	ed)		
(applicable)	None of the below (does not involve another candidate or co Coordinated with reimbursement sought (joint expenditure)	Independent			
	Coordinated with reinhoursement sought (in-kind contrib				
lame of Creditor				Date Ir	10urred 7/2019
Blue Edge Strategie	\$				
street Address		City		State	Zip Code 06040-6018
983 Main St		Manchester	T 27 - 11		nount Incurred
urpose of Expenditure	Description		Event #		timate or Actual)
oy code) PRNT	Campaign Literature	Cd. L. Law " in place	had)]	\$2,871.45
Expenditure #	Type of Expenditure (Itemization in Addendum S Required unle	ess "None of the beton" is chec.	keu)		
if applicable)	Coordinated with reimbursement sought (joint expenditure	i) Independent		1	
	Coordinated without reimbursement sought (in-kind contri		A B C D		
Name of Creditor				l)	incurred 13/2019
London Cafe Corp				State	Zip Code
Street Address		City Hartford		CT	06106-2828
84 Van Block Ave			Eyent #	A	mount Incurred
Purpose of Expenditure	Description Food			(Es	stimate or Actual)
(by code) FNDR	Type of Expenditure (Itemization in Addendum S Required un	days "None of the helow" is che	cked)	-	\$405.12
Expenditure # (if applicable)	Type of Expenditure (nemzanon in Addendina 3 required in None of the below (does not involve another candidate or	committee)			
(п) арумского	Coordinated with reimbursement sought (joint expenditure		Па Пв ГС Пр		
	Coordinated without reimbursement sought (in-kind contr	ribution) Organization.		Data	Incurred
Name of Creditor					15/2019
		l ou		State	Zip Code
Jason Ortiz		City		СТ	06105-3504
Street Address		Hartford		1	
Street Address 239 Farmington A			Event #		Amount Incurred
Street Address 239 Farmington Av Purpose of Expenditure	Description		Event#		Estimate or Actual)
Street Address 239 Farmington Av Purpose of Expenditure (by code) RMB	Description Reimbursement	Hartford			
Street Address 239 Farmington Av Purpose of Expenditure (by code) RMB Expenditure #	Description Reimbursement Type of Expenditure (Itemization in Addendum S Required in None of the below (does not involve another candidate or	Hartford mless "None of the below" is chest committee)			Estimate or Actual)
Street Address 239 Farmington Av Purpose of Expenditure (by code) RMB	Description Reimbursement Type of Expenditure (Itemization in Addendum S Required in None of the below (does not involve another candidate of Coordinated with reimbursement sought (joint expenditure)	Hartford mless "None of the below" is chart committee) Independent The committee of the below is chart committee.	ecked)		Estimate or Actual)
Street Address 239 Farmington Av Purpose of Expenditure (by code) RMB Expenditure #	Description Reimbursement Type of Expenditure (Itemization in Addendum S Required in None of the below (does not involve another candidate or	Hartford mless "None of the below" is chart committee) Independent The committee of the below is chart committee.	ecked)		Estimate or Actual)
Street Address 239 Farmington Av Purpose of Expenditure (by code) RMB Expenditure #	Description Reimbursement Type of Expenditure (Itemization in Addendum S Required in None of the below (does not involve another candidate of Coordinated with reimbursement sought (joint expenditure)	Hartford mless "None of the below" is chart committee) Independent The committee of the below is chart committee.	ecked)		Estimate or Actual)
Street Address 239 Farmington Av Purpose of Expenditure (by code) RMB Expenditure #	Description Reimbursement Type of Expenditure (Itemization in Addendum S Required in None of the below (does not involve another candidate of Coordinated with reimbursement sought (joint expenditure)	Hartford mless "None of the below" is chart committee) Independent The committee of the below is chart committee.	ecked)		Estimate or Actual)

SUBTOTAL Section S - This Page	\$10,049.57
TOTAL of Section S Pages	\$10,049.57
TOTAL OF ALL EXPENSES INCURRED BY COMMITTEE DURING THIS PERIOD BUT NOT PAID (Enter total on Line 28, Column A of Summary Page Totals)	\$10,049.57
Previously reported Expenses Unpaid and still Outstanding +	\$0.00
TOTAL OF ALL EXPENSES INCURRED BY COMMITTEE BUT NOT PAID (Enter total on Line 28a, Column A of Summary Page Totals)	\$10,049.57