

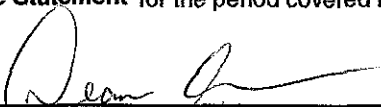
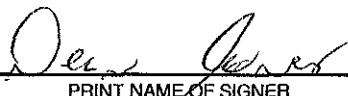
SEEC FORM 20

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

Page 1 of 37

Do Not Mark in This Space For Official Use Only

COVER PAGE

1. NAME OF COMMITTEE			
Lebron for Hartford			
2. TREASURER NAME			
First Dean	MI	Last Jones	Suffix
3. TREASURER ADDRESS			
Street Address 423 Barbour Street	City Hartford	State CT	Zip 06120
4. ELECTION/REFERENDUM DATE (mm/dd/yyyy) 09/12/2023	5. OFFICE SOUGHT <i>(Complete only if Candidate Committee)</i> Mayor		6. DISTRICT NUMBER <i>(if applicable)</i>
7. CANDIDATE NAME <i>(Complete only if Candidate or Exploratory Committee)</i>			
First Nick	MI	Last Lebron	Suffix
8. TYPE OF REPORT <i>(Check One Box)</i>			
<input checked="" type="checkbox"/> January 10 filing <input type="checkbox"/> April 10 filing <input type="checkbox"/> July 10 filing <input type="checkbox"/> October 10 filing <input type="checkbox"/> 24 Hour Independent Expenditure <input type="checkbox"/> Primary <input type="checkbox"/> Election			
<input type="checkbox"/> 7th day preceding primary <input type="checkbox"/> 30 days following primary <input type="checkbox"/> 7th day preceding election <input type="checkbox"/> 12th day preceding election <i>(State Central Committees Only)</i> <input type="checkbox"/> 45 days following election not held in November			
<input type="checkbox"/> 7th day preceding referendum <input type="checkbox"/> 45 days following referendum <input type="checkbox"/> Deficit <input type="checkbox"/> Termination			
<input type="checkbox"/> Initial Contribution or Disbursement <i>(PACs ONLY)</i> <input type="checkbox"/> Amendment to Type of Report			
9. PERIOD COVERED			
Beginning Date 12/01/2022		Ending Date 12/31/2022	
10. CERTIFICATION			
I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete.			
 TREASURER OR DEPUTY TREASURER (SIGNATURE)		 PRINT NAME OF SIGNER	
		1/10/2023 DATE (mm/dd/yyyy)	
A person who is found to have knowingly and willfully violated any provisions of the campaign finance statutes faces a civil penalty or imprisonment or both.			

SEEC FORM 20**Itemized Campaign Finance Disclosure Statement**

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Revised January 2015

Page 2 of 37

SUMMARY PAGE TOTALS

NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>	TYPE OF REPORT	
Lebron for Hartford	JAN10	
	COLUMN A This Period	COLUMN B Aggregate
11. Balance on hand January 1 of current year for ongoing and party committees OR Balance on hand from day committee was formed for all other committees		0.00
12. Balance on hand at the beginning of Reporting Period	0.00	
13. Contributions Received from Individuals (Sections A and B)	9,147.83	9,147.83
14. Receipts from Other Committees (Sections C1 and C2)	0.00	0.00
15. Other Monetary Receipts (Sections D through K)	4,000.00	4,000.00
16a. Total Proceeds from Small Purchases (Section L1 Subpart 1 + Subpart 3)	0.00	0.00
16b. Per Public Act 11-48, effective January 1, 2012 Section L2, removed		
16c. Total Purchases of Advertising—Program Book or Sign (Section L3)	0.00	0.00
17. Total Monetary Receipts (add totals for Line 13 through 16c)	13,147.83	13,147.83
18. Subtotals (add totals in Line 12 + 17 in Column A; and in Line 11 + 17 in Column B)	13,147.83	13,147.83
19. Expenses Paid by Committee (Section P)	470.58	470.58
20. Balance on hand at close of Reporting Period (Subtract Line 19 from Line 18 in both Columns)	12,677.25	12,677.25
21. In-Kind Donations not Considered Contributions Received (Section L4)	0.00	0.00
22. In-Kind Donations not Considered Contributions — House Party (Section L5)	0.00	0.00
23. In-Kind Contributions Received (Section M)	0.00	0.00
24. Refundable Deposit to Telephone Company (Section N)	.00	.00
25. Loan Balance	0.00	
25a. + Loans Received (Section D)	4,000.00	4,000.00
25b. + Interest and Penalties on Loan	0.00	0.00
25c. - Payments on Loan	0.00	0.00
25d. Total Outstanding Loan Amount	4,000.00	
26. Campaign Expenses Paid by Candidate (Section Q)	0.00	0.00
27. Expenses Incurred on Committee Credit Card (Section R)	0.00	0.00
28. Expenses Incurred by Committee During this Period but Not Paid (Section S)	10,000.00	
28a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section S)	10,000.00	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Lebron for Hartford				JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)				\$ 0.00	
B. Itemized Contributions from Individuals					
Last Name		First		MI	
Bikakis		Mariam			
Residential Street Address		City		State	Zip Code
232 Mill Street		Berlin		CT	06037
Principal Occupation		Name of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		5.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution:		Date Received		Aggregate Contributions	
<input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		12/30/2022		5.00	
Last Name		First		MI	
Scott		Quin			
Residential Street Address		City		State	Zip Code
19 Warrenton Ave		Hartford		CT	06105
Principal Occupation		Name of Employer			
Chauffeur		Limo			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		25.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution:		Date Received		Aggregate Contributions	
<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		12/20/2022		25.00	
Last Name		First		MI	
Speiller		Lenny			
Residential Street Address		City		State	Zip Code
337 McKinley Avenue		New Haven		CT	06515
Principal Occupation		Name of Employer			
Director of Communications		City of New Haven			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		100.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution:		Date Received		Aggregate Contributions	
<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		12/31/2022		100.00	
SUBTOTAL Section B - This Page				130.00	
TOTAL of additional Section B Pages				9017.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>			TYPE OF REPORT	
Lebron for Hartford			JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>			\$ 0.00	
B. Itemized Contributions from Individuals				
Last Name Powell		First Jaime		MI
Residential Street Address 191 Elizabeth Street		City Hartford	State CT	Zip Code 06105
Principal Occupation Registered Nurse		Name of Employer St. Francis Hospital and Medical Center		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 250.00	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
		Date Received 12/31/2022	Aggregate Contributions 250.00	
Last Name Rivera		First Jessica		MI
Residential Street Address 97 Lincoln Street		City Hartford	State CT	Zip Code 06106
Principal Occupation		Name of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 20.00	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
		Date Received 12/31/2022	Aggregate Contributions 20.00	
Last Name Torres Roman		First Lixander		MI
Residential Street Address 44 Peila Drive		City Manchester	State CT	Zip Code 06040
Principal Occupation Truck Driver		Name of Employer Abdel Transport		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 15.00	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
		Date Received 12/29/2022	Aggregate Contributions 15.00	
SUBTOTAL Section B - This Page			285.00	
TOTAL of additional Section B Pages			8862.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i>			9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Lebron for Hartford				JAN10	
A. Total Contributions from Small Contributors Received this Period ONLY (See instructions for definition of Small Contributor)				\$ 0.00	
B. Itemized Contributions from Individuals					
Last Name Grant		First David		MI	
Residential Street Address 205 Birchwood Dr		City New Britain		State CT	Zip Code 06052
Principal Occupation Education		Name of Employer Hartford Public Schools			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?			Amount of Contribution 100.00
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			
		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/20/2022		Aggregate Contributions 100.00	
Last Name Luna		First Victor		MI	
Residential Street Address 17 Chapin Pl		City Hartford		State CT	Zip Code 06114
Principal Occupation Entertainment		Name of Employer Luna Ent. Prod. 2023			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?			Amount of Contribution 100.00
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			
		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022		Aggregate Contributions 100.00	
Last Name Lopez		First Kenny		MI	
Residential Street Address 18 Northbrook Dr		City West Hartford		State CT	Zip Code 06117
Principal Occupation Ordered selector		Name of Employer Aldis distribution center			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?			Amount of Contribution 10.00
		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:			
		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022		Aggregate Contributions 10.00	
SUBTOTAL Section B - This Page				210.00	
TOTAL of additional Section B Pages				8937.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Lebron for Hartford				JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY <small>(See instructions for definition of Small Contributor)</small>				\$ 0.00	
B. Itemized Contributions from Individuals					
Last Name Torres		First Fabian		MI	
Residential Street Address 317 East Middle Tpke		City Manchester		State CT	Zip Code 06040
Principal Occupation Unemployed		Name of Employer Unemployed			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Amount of Contribution 1,000.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022	Aggregate Contributions 1,000.00		
Last Name Harrison		First Charisma		MI	
Residential Street Address 36 W Raymond St		City Hartford		State CT	Zip Code 06112
Principal Occupation Flagger		Name of Employer Ct traffic control			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Amount of Contribution 25.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022	Aggregate Contributions 25.00		
Last Name Bellucci		First Brenda		MI	
Residential Street Address 18 Lostbrook Rd		City West Hartford		State CT	Zip Code 06117
Principal Occupation Teacher		Name of Employer Hartford Board of Education			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Amount of Contribution 100.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/27/2022	Aggregate Contributions 100.00		
SUBTOTAL Section B - This Page				1,125.00	
TOTAL of additional Section B Pages				8022.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <small>(Enter total on Line 13, Column A of Summary Page Totals)</small>				9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Lebron for Hartford				JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)				\$ 0.00	
B. Itemized Contributions from Individuals					
Last Name Gonzalez		First Pamela		MI	
Residential Street Address 44 Peila Drive		City Manchester		State CT	Zip Code 06040
Principal Occupation Case Manager			Name of Employer Catholic Charities		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 15.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/28/2022			
		Aggregate Contributions 15.00			
Last Name Alfaro		First Jose		MI	
Residential Street Address 415 Butternut St NW 8		City Washington		State DC	Zip Code 20012
Principal Occupation Latino Engagement			Name of Employer Everytown for Gun Safety		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022			
		Aggregate Contributions 100.00			
Last Name Sierra		First Alejandro		MI	
Residential Street Address 120 Monroe Street		City Hartford		State CT	Zip Code 06114
Principal Occupation Public Works			Name of Employer City of Hartford		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 1,000.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022			
		Aggregate Contributions 1,000.00			
SUBTOTAL Section B - This Page				1,115.00	
TOTAL of additional Section B Pages				8032.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Lebron for Hartford				JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY <small>(See instructions for definition of Small Contributor)</small>				\$ 0.00	
B. Itemized Contributions from Individuals					
Last Name Lopez		First Diego		MI	
Residential Street Address 172 Affleck St		City Hartford		State CT	Zip Code 06106
Principal Occupation Youth Development			Name of Employer Compass Youth Collaborative		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 25.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022			
		Aggregate Contributions 25.00			
Last Name Bond		First Maritza		MI	
Residential Street Address 14 Harbour Close		City New Haven		State CT	Zip Code 06519
Principal Occupation Director			Name of Employer City of New Haven		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 50.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/20/2022			
		Aggregate Contributions 50.00			
Last Name Mckenna		First Cynthia		MI	
Residential Street Address 102 Waterside Ln		City West Hartford		State CT	Zip Code 06107
Principal Occupation Retired			Name of Employer Retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022			
		Aggregate Contributions 100.00			
SUBTOTAL Section B - This Page				175.00	
TOTAL of additional Section B Pages				8972.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <small>(Enter total on Line 13, Column A of Summary Page Totals)</small>				9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		SUBTOTAL SECTION A	\$ 0.00
B. Itemized Contributions from Individuals			
Last Name Evans		First Brian	
Residential Street Address 87 Pennsylvania Avenue		City New Britain	State CT
Principal Occupation Peace builder		Name of Employer Compass Peace Builder	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022	
		Aggregate Contributions 100.00	
Last Name Zayas		First Destiny	
Residential Street Address 118 Shuttle Meadow Ave 2		City New Britain	State CT
Principal Occupation Parent Service Coordinator		Name of Employer Catholic Charities	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/20/2022	
		Aggregate Contributions 100.00	
Last Name Johnson		First Robert	
Residential Street Address 217 Franklin Ave		City Hartford	State CT
Principal Occupation Store owner		Name of Employer Ma9ic llc	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 75.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022	
		Aggregate Contributions 75.00	
SUBTOTAL Section B - This Page			275.00
TOTAL of additional Section B Pages			8872.83
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i>			9,147.83

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>				TYPE OF REPORT	
Lebron for Hartford				JAN10	
A. Total Contributions from Small Contributors Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>				\$ 0.00	
B. Itemized Contributions from Individuals					
Last Name Lewis		First Greta		MI	
Residential Street Address 132 7th Street		City Verplanck		State NY	Zip Code 10596
Principal Occupation Homecare worker		Name of Employer Sage homecare Danbury			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution 100.00	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			
		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution:		Date Received	Aggregate Contributions		
<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		12/30/2022	100.00		
Last Name Robles		First Jose		MI	
Residential Street Address 20 Rossetto Dr		City Manchester		State CT	Zip Code 06042
Principal Occupation Real Estate Agent		Name of Employer Lewis Real Estate			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution 100.00	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			
		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution:		Date Received	Aggregate Contributions		
<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		12/30/2022	100.00		
Last Name Lau		First Christine		MI	
Residential Street Address 3-5 Canterbury Court		City Middletown		State CT	Zip Code 06457
Principal Occupation Retired		Name of Employer Retired			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution 25.00	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			
		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution:		Date Received	Aggregate Contributions		
<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		12/20/2022	25.00		
SUBTOTAL Section B - This Page				225.00	
TOTAL of additional Section B Pages				8922.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i>				9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT	
Lebron for Hartford			JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)			\$ 0.00	
B. Itemized Contributions from Individuals				
Last Name Gittens		First Dashon		MI
Residential Street Address 125 Mansfield Street		City Hartford	State CT	Zip Code 06112
Principal Occupation Student		Name of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution 5.00
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		
		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022	Aggregate Contributions 5.00	
Last Name Cartagena		First Angel		MI
Residential Street Address 136 Stonington St A		City Hartford	State CT	Zip Code 06106
Principal Occupation Unemployed		Name of Employer Unemployed		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution 62.83
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		
		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022	Aggregate Contributions 62.83	
Last Name Rowley		First John		MI Q
Residential Street Address 228 White Street		City Hartford	State CT	Zip Code 06114
Principal Occupation Driver		Name of Employer 1099		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		Amount of Contribution 5.00
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		
		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022	Aggregate Contributions 5.00	
SUBTOTAL Section B - This Page			72.83	
TOTAL of additional Section B Pages			9075.00	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>				TYPE OF REPORT	
Lebron for Hartford				JAN10	
A. Total Contributions from Small Contributors Received this Period ONLY <i>(See Instructions for definition of Small Contributor)</i>				\$ 0.00	
B. Itemized Contributions from Individuals					
Last Name Sanchez		First Franklin		MI	
Residential Street Address 238 Forest Dr		City Wethersfield		State CT	Zip Code 06109
Principal Occupation Retired		Name of Employer Retired			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 10.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022			
				Aggregate Contributions 10.00	
Last Name Chester		First Harrison		MI	
Residential Street Address 97 Lincoln Street		City Hartford		State CT	Zip Code 06106
Principal Occupation		Name of Employer self employees			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 20.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022			
				Aggregate Contributions 20.00	
Last Name Rodriguez		First Kenneth		MI	
Residential Street Address 628 Asylum Ave		City Hartford		State CT	Zip Code 06105
Principal Occupation Restaurant		Name of Employer Sypy Grille			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022			
				Aggregate Contributions 100.00	
SUBTOTAL Section B - This Page				130.00	
TOTAL of additional Section B Pages				9017.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i>				9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT	
Lebron for Hartford			JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)			\$ 0.00	
B. Itemized Contributions from Individuals				
Last Name Bellon		First Migdalia		MI
Residential Street Address 100 Kane St A6		City West Hartford	State CT	Zip Code 06119
Principal Occupation Retired		Name of Employer Retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Amount of Contribution 5.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022	Aggregate Contributions 5.00	
Last Name Del Valle		First Kenneth		MI
Residential Street Address 98 Sargent Drive		City Hartford	State CT	Zip Code 06105
Principal Occupation Front Store		Name of Employer CVS		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Amount of Contribution 5.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022	Aggregate Contributions 5.00	
Last Name Mancini		First Aida		MI
Residential Street Address 37 Brent Rd		City Manchester	State CT	Zip Code 06042
Principal Occupation Arrival Team Associate		Name of Employer St.francis Hospital		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Amount of Contribution 10.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022	Aggregate Contributions 10.00	
SUBTOTAL Section B - This Page			20.00	
TOTAL of additional Section B Pages			9127.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name St.Germain		First Debra	MI
Residential Street Address 72 Clermont St		City Hartford	State CT
Principal Occupation Teacher/Tutor		Name of Employer Hboe	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/20/2022	Aggregate Contributions 25.00
Last Name Vazquez		First Ronnie	MI
Residential Street Address 2 Park Pl 10f		City Hartford	State CT
Principal Occupation Project Manager		Name of Employer City of Hartford	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/27/2022	Aggregate Contributions 35.00
Last Name Vazquez		First Netmari	MI
Residential Street Address 47 Idle Ln		City Meriden	State CT
Principal Occupation Registered Nurse		Name of Employer Fair Haven Community Health Care	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022	Aggregate Contributions 50.00
SUBTOTAL Section B - This Page			110.00
TOTAL of additional Section B Pages			9037.83
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			9,147.83

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY <small>(See instructions for definition of Small Contributor)</small>		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name Sanchez		First Iris	MI
Residential Street Address 238 Forest Dr		City Wethersfield	State CT
Principal Occupation Retired		Name of Employer Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022	
		Aggregate Contributions 100.00	
Last Name Devereux		First Jeffrey	MI
Residential Street Address 1429 Park St		City Hartford	State CT
Principal Occupation Small Business Owner		Name of Employer Breakfast Lunch & Dinner	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 200.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/22/2022	
		Aggregate Contributions 200.00	
Last Name Ortiz		First Raul	MI
Residential Street Address 1886 stanley Street		City New Britain	State CT
Principal Occupation Firefighter		Name of Employer City of new Britain	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 50.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/20/2022	
		Aggregate Contributions 50.00	
SUBTOTAL Section B - This Page		350.00	
TOTAL of additional Section B Pages		8797.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <small>(Enter total on Line 13, Column A of Summary Page Totals)</small>		9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name Bey		First Lord	MI K
Residential Street Address		City Hartford	State CT Zip Code 06147
Principal Occupation		Name of Employer	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022	Aggregate Contributions 5.00
Last Name Winch		First rJo	MI
Residential Street Address 359 Sigourney St, ste 3, ste 3, ste 3		City Hartford	State CT Zip Code 06112
Principal Occupation Artist		Name of Employer Self	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/29/2022	Aggregate Contributions 50.00
Last Name Dejesus		First Raymond	MI
Residential Street Address 165 Sigourney Street		City Hartford	State CT Zip Code 06105
Principal Occupation		Name of Employer Unemployed	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022	Aggregate Contributions 300.00
SUBTOTAL Section B - This Page			355.00
TOTAL of additional Section B Pages			8792.83
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i>			9,147.83

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See Instructions for definition of Small Contributor)		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name Starr		First Nina	MI
Residential Street Address 20 Esquire Drive		City Manchester	State CT Zip Code 06042
Principal Occupation		Name of Employer	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 5.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/28/2022	
		Aggregate Contributions 5.00	
Last Name Austin		First Ashon	MI
Residential Street Address 421 Allen St		City New Britain	State CT Zip Code 06053
Principal Occupation Direct support professional		Name of Employer Ashon Austin	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 25.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/22/2022	
		Aggregate Contributions 25.00	
Last Name Weinstein		First Rachel	MI
Residential Street Address 6625 Green Valley Circle Unit 306		City Culver City	State CA Zip Code 90230
Principal Occupation Director		Name of Employer Braver Angels	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 50.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/27/2022	
		Aggregate Contributions 50.00	
SUBTOTAL Section B - This Page			80.00
TOTAL of additional Section B Pages			9067.83
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			9,147.83

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors Received this Period ONLY (See instructions for definition of Small Contributor)		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name Dressler		First Jeffrey	MI
Residential Street Address 14 Whetten Rd		City West Hartford	State CT
Principal Occupation Attorney		Name of Employer Dressler Strickland	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 250.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/27/2022	
		Aggregate Contributions 250.00	
Last Name Davidson		First Davida	MI
Residential Street Address 63 Wilson St		City Hartford	State CT
Principal Occupation Nurse		Name of Employer Hhcmg	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022	
		Aggregate Contributions 100.00	
Last Name Wallace		First Bernie	MI
Residential Street Address 118 Huntington		City Hartford	State CT
Principal Occupation		Name of Employer	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 5.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022	
		Aggregate Contributions 5.00	
SUBTOTAL Section B - This Page			355.00
TOTAL of additional Section B Pages			8792.83
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			9,147.83

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Lebron for Hartford				JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)				\$ 0.00	
B. Itemized Contributions from Individuals					
Last Name Smith		First Samariya		MI	
Residential Street Address 49 Earle Street		City Hartford	State CT	Zip Code 06120	
Principal Occupation Project Manager		Name of Employer CT Historical Society			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022	Aggregate Contributions 25.00		
				Amount of Contribution 25.00	
Last Name McIndoo		First Andrew		MI	
Residential Street Address 496 Henry St		City Brooklyn	State NY	Zip Code 11231	
Principal Occupation Consultant		Name of Employer Threshold			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/28/2022	Aggregate Contributions 50.00		
				Amount of Contribution 50.00	
Last Name Feltman		First Art		MI	
Residential Street Address 50 Beechtree Ln		City West Hartford	State CT	Zip Code 06107	
Principal Occupation Executive director		Name of Employer International Hartford			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? <i>If yes, list Event #</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022	Aggregate Contributions 1,000.00		
				Amount of Contribution 1,000.00	
SUBTOTAL Section B - This Page				1,075.00	
TOTAL of additional Section B Pages				8072.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i>				9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Lebron for Hartford				JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)				\$ 0.00	
B. Itemized Contributions from Individuals					
Last Name Diaz		First Gladys		MI	
Residential Street Address 52 Curtis St		City Hartford		State CT	Zip Code 06106
Principal Occupation Homemaker		Name of Employer unemployed			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 1,000.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022			
				Aggregate Contributions 1,000.00	
Last Name Lewis		First Peter		MI	
Residential Street Address 96 Brook Street Apt C		City Hartford		State CT	Zip Code 06120
Principal Occupation Computer Program Design		Name of Employer UPS			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 5.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022			
				Aggregate Contributions 5.00	
Last Name Napolitano		First Chris		MI	
Residential Street Address PO Box 831		City Farmington		State CT	Zip Code 06034
Principal Occupation Mental Health Clinician		Name of Employer Uconn Health			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/20/2022			
				Aggregate Contributions 100.00	
SUBTOTAL Section B - This Page				1,105.00	
TOTAL of additional Section B Pages				8042.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name Naimie		First Amanda	MI
Residential Street Address 266 Knollwood Road		City Manchester	State CT
Principal Occupation Paint Night Teacher		Name of Employer Painting With a Twist	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022	Aggregate Contributions 25.00
Last Name Gonzalez-Robles		First Wanda	MI
Residential Street Address 20 Rossetto Dr		City Manchester	State CT
Principal Occupation Admin		Name of Employer UConn Health	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022	Aggregate Contributions 25.00
Last Name Dormon		First James	MI
Residential Street Address 26 Roydon Road		City New Haven	State CT
Principal Occupation Analyst		Name of Employer Ui	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022	Aggregate Contributions 25.00
SUBTOTAL Section B - This Page		75.00	
TOTAL of additional Section B Pages		9072.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)		9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name Bolden		First Khalima	MI
Residential Street Address 11241 Avenida Del Gato		City San Diego	State CA Zip Code 92126
Principal Occupation Assistant Professor		Name of Employer UC Davis	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 50.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/30/2022		Aggregate Contributions 50.00	
Last Name Vazquez		First Maria	MI
Residential Street Address 200 Cameo Drive		City Windham	State CT Zip Code 06226
Principal Occupation Retired		Name of Employer Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 10.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/29/2022		Aggregate Contributions 10.00	
Last Name Kavteladze		First Nino	MI
Residential Street Address 164 Middle Turnpike West		City Manchester	State CT Zip Code 06040
Principal Occupation Regional Coordinator		Name of Employer CCAOH	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 5.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/29/2022		Aggregate Contributions 5.00	
SUBTOTAL Section B - This Page		65.00	
TOTAL of additional Section B Pages		9082.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)		9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)		SUBTOTAL SECTION A	
		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name Gittens		First Dawne	MI
Residential Street Address 125 Mansfield Street		City Hartford	State CT
Principal Occupation Club Director		Name of Employer Boys and Girls Club of Hartford	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022	Aggregate Contributions 5.00
Last Name Hicks		First Brandon	MI
Residential Street Address 28 Forest Ln		City Bloomfield	State CT
Principal Occupation IT Analyst		Name of Employer CVS Health	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022	Aggregate Contributions 50.00
Last Name Rosa		First Robert	MI
Residential Street Address 1882 Main St		City East Hartford	State CT
Principal Occupation Real estate		Name of Employer Self employed	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/20/2022	Aggregate Contributions 100.00
SUBTOTAL Section B - This Page		155.00	
TOTAL of additional Section B Pages		8992.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)		9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT	
Lebron for Hartford			JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)			\$ 0.00	
B. Itemized Contributions from Individuals				
Last Name Maroni		First Merari		MI
Residential Street Address 2826 S Bend St		City Loris	State SC	Zip Code 29569
Principal Occupation Substitute teacher		Name of Employer The Learning Center		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 10.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
		Date Received 12/28/2022	Aggregate Contributions 10.00	
Last Name Donovan		First Dave		MI
Residential Street Address 179 Beacon St		City Hartford	State CT	Zip Code 06105
Principal Occupation Project Manager		Name of Employer Lane Construction		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 50.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
		Date Received 12/21/2022	Aggregate Contributions 50.00	
Last Name Dormon		First Candice		MI
Residential Street Address 26 Roydon Road		City New Haven	State CT	Zip Code 06511
Principal Occupation Consultant		Name of Employer Self employed		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 50.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
		Date Received 12/30/2022	Aggregate Contributions 50.00	
SUBTOTAL Section B - This Page			110.00	
TOTAL of additional Section B Pages			9037.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Lebron for Hartford				JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)				\$ 0.00	
B. Itemized Contributions from Individuals					
Last Name Garcia		First Orlando		MI	
Residential Street Address 282 Sigourney Street		City Hartford		State CT	Zip Code 06105
Principal Occupation		Name of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 5.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022			
				Aggregate Contributions 5.00	
Last Name See		First Kevin		MI	
Residential Street Address 12591 Corliss Ave N		City Seattle		State WA	Zip Code 98133
Principal Occupation Research Scientist		Name of Employer Washington Dept Fish & Wildlife			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/27/2022			
				Aggregate Contributions 100.00	
Last Name Quinones		First Andre		MI	
Residential Street Address 707 Broadview Terrace		City Hartford		State CT	Zip Code 06106
Principal Occupation Truck driver		Name of Employer Allied van lines			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/30/2022			
				Aggregate Contributions 100.00	
SUBTOTAL Section B - This Page				205.00	
TOTAL of additional Section B Pages				8942.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)		\$ 0.00	
SUBTOTAL SECTION A			
B. Itemized Contributions from Individuals			
Last Name Robles		First Tone	MI
Residential Street Address 1770 W Lake Brantley Road		City Longwood	State FL Zip Code 32779
Principal Occupation Restoration technician		Name of Employer Barefoot Enterprises	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 50.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/30/2022		Aggregate Contributions 50.00	
Last Name Sweeney		First Liam	MI
Residential Street Address 29 Penn Drive		City West Hartford	State CT Zip Code 06119
Principal Occupation Lobbyist		Name of Employer Penn Lincoln	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 25.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/17/2022		Aggregate Contributions 25.00	
Last Name Bellon		First Quwana	MI
Residential Street Address 145 2		City Hartford	State CT Zip Code 06112
Principal Occupation Manager		Name of Employer Tacobell	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 10.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/21/2022		Aggregate Contributions 10.00	
SUBTOTAL Section B - This Page			85.00
TOTAL of additional Section B Pages			9062.83
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			9,147.83

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT	
Lebron for Hartford			JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)			\$ 0.00	
B. Itemized Contributions from Individuals				
Last Name Love		First Larry		MI
Residential Street Address 55 Airport Rd		City Hartford	State CT	Zip Code 06114
Principal Occupation Crisis Coordinator		Name of Employer Compass		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 25.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
		Date Received 12/23/2022	Aggregate Contributions 25.00	
Last Name Valentin		First Ana		MI
Residential Street Address 99 Laurel Street		City Manchester	State CT	Zip Code 06040
Principal Occupation Cmjo		Name of Employer Girl Scouts of CT		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 50.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
		Date Received 12/31/2022	Aggregate Contributions 50.00	
Last Name Fernandez		First Maria		MI
Residential Street Address 2380 Corbin Ave		City New Britain	State CT	Zip Code 06053
Principal Occupation Retired		Name of Employer Retired		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 5.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order				
		Date Received 12/21/2022	Aggregate Contributions 5.00	
SUBTOTAL Section B - This Page			80.00	
TOTAL of additional Section B Pages			9067.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name Robles		First Joey	MI
Residential Street Address 20 Rossetto Dr		City Manchester	State CT Zip Code 06042
Principal Occupation Realtor		Name of Employer Lewis Real Estate	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/21/2022		Aggregate Contributions 100.00	
Last Name Delgado		First Katiria	MI
Residential Street Address 220 Center St		City Manchester	State CT Zip Code 06040
Principal Occupation Unemployed		Name of Employer Unemployed	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 25.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/31/2022		Aggregate Contributions 25.00	
Last Name Tewolde		First Nicole	MI
Residential Street Address 10650 Holman Ave 112		City Los Angeles	State CA Zip Code 90024
Principal Occupation AML Policy		Name of Employer PayPal	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 50.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/30/2022		Aggregate Contributions 50.00	
SUBTOTAL Section B - This Page			175.00
TOTAL of additional Section B Pages			8972.83
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			9,147.83

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors Received this Period ONLY (See instructions for definition of Small Contributor)		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name Lebron		First Shamika	MI
Residential Street Address 99 Lincoln Street		City Hartford	State CT
Principal Occupation Self Employed		Name of Employer Celebrations At Wolfies	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 25.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022	
		Aggregate Contributions 25.00	
Last Name Bellucci		First Harry	MI
Residential Street Address 18 Lostbrook Rd		City West Hartford	State CT
Principal Occupation Retired		Name of Employer Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 50.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/20/2022	
		Aggregate Contributions 50.00	
Last Name Lebron		First Jennika	MI
Residential Street Address 192 Laurel St		City Hartford	State CT
Principal Occupation Special Events Coordinator		Name of Employer Hartford Communities That Care	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 25.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/23/2022	
		Aggregate Contributions 25.00	
SUBTOTAL Section B - This Page			100.00
TOTAL of additional Section B Pages			9047.83
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)			9,147.83

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)		SUBTOTAL SECTION A	
		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name Ortiz		First Pedro	
Residential Street Address 3 Brookview Circle		City Manchester	State CT
Principal Occupation Administration		Name of Employer U.S. Department of Veterans Affairs	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 200.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022	
		Aggregate Contributions 200.00	
Last Name Figueroa		First Angel	
Residential Street Address 29 Guilford St		City Hartford	State CT
Principal Occupation Youth Development Associate		Name of Employer Catholic Charities	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 10.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/21/2022	
		Aggregate Contributions 10.00	
Last Name Adams		First Bakari	
Residential Street Address 2 Maddux Ave		City San Francisco	State CA
Principal Occupation Real Estate		Name of Employer Starwood	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 200.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/31/2022	
		Aggregate Contributions 200.00	
SUBTOTAL Section B - This Page		410.00	
TOTAL of additional Section B Pages		8737.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)		9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY <small>(See instructions for definition of Small Contributor)</small>		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name Ramos-Huff		First Taquissha	MI
Residential Street Address 19 Squire Street		City Hartford	State CT
Principal Occupation Unemployed		Name of Employer Unemployed	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 5.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/27/2022		Aggregate Contributions 5.00	
Last Name Arteaga		First Juan	MI
Residential Street Address 1 Valley Ridge Rd		City Harrison	State NY
Principal Occupation Attorney		Name of Employer Crowell & Moring LLP	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 250.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/21/2022		Aggregate Contributions 250.00	
Last Name Johnson		First Alexander	MI
Residential Street Address 1000 N St		City Hartford	State CT
Principal Occupation Retired		Name of Employer Retired	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order			
Date Received 12/21/2022		Aggregate Contributions 100.00	
SUBTOTAL Section B - This Page			355.00
TOTAL of additional Section B Pages			8792.83
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <small>(Enter total on Line 13, Column A of Summary Page Totals)</small>			9,147.83

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Lebron for Hartford				JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY (See instructions for definition of Small Contributor)				\$ 0.00	
B. Itemized Contributions from Individuals					
Last Name Johnson		First Lynn		MI	
Residential Street Address 8 Lynn Cir		City Bloomfield		State CT	Zip Code 06002
Principal Occupation Retired		Name of Employer Retired			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 25.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/23/2022			
		Aggregate Contributions 25.00			
Last Name Marie		First Brenda		MI	
Residential Street Address 28 Pine Grove Rd		City Bloomfield		State CT	Zip Code 06002
Principal Occupation Unemployed		Name of Employer Unemployed			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 100.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/20/2022			
		Aggregate Contributions 100.00			
Last Name Machavasiani		First Ana		MI	
Residential Street Address 20 Esquire Drive		City Manchester		State CT	Zip Code 06042
Principal Occupation		Name of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Amount of Contribution 5.00	
Is this contribution associated with an event reported in Section L1? If yes, list Event # _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/28/2022			
		Aggregate Contributions 5.00			
SUBTOTAL Section B - This Page				130.00	
TOTAL of additional Section B Pages				9017.83	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page Totals)				9,147.83	

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)		TYPE OF REPORT	
Lebron for Hartford		JAN10	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		SUBTOTAL SECTION A	
		\$ 0.00	
B. Itemized Contributions from Individuals			
Last Name		First	MI
Ruiz Vazquez		Charlotte	
Residential Street Address		City	State Zip Code
500 Park Avenue Apt B		East Hartford	CT 06108
Principal Occupation		Name of Employer	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If contribution is in excess of \$400 to a candidate for a chief executive officer of a municipality, does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Is this contribution associated with an event reported in Section L1? If yes, list Event #: _____ <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No	
Method of Contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card <input type="checkbox"/> Payroll Deduction <input type="checkbox"/> Money Order		Date Received 12/29/2022	Aggregate Contributions 10.00
		Amount of Contribution 10.00	

SUBTOTAL Section B - This Page	10.00
TOTAL of additional Section B Pages	9137.83
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) <i>(Enter total on Line 13, Column A of Summary Page Totals)</i>	9,147.83

I. MONETARY RECEIPTS (Sections A - K)

NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>				TYPE OF REPORT	
Lebron for Hartford				JAN10	
D. Loans Received this Period					
Name of Lender		Source of Loan:			Date of Receipt
Nick Lebron		<input type="checkbox"/> Bank <input checked="" type="checkbox"/> Candidate <input type="checkbox"/> Individual <input type="checkbox"/> Other Committee			12/14/2022
Street Address		City	State	Zip Code	Is there a Cosigner or Guarantor of this loan? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
192 Laurel Street		Hartford	CT	06105	
Name of Cosigner/Guarantor <i>(if applicable)</i>					Amount Received 4,000.00
Street Address		City	State	Zip Code	

TOTAL SECTION D

4,000.00

IV. EXPENDITURES (Sections P - T)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT	
Lebron for Hartford				JAN10	
P. Expenses Paid by Committee					
Name of Payee Market Place Kitchen & Bar			Date of Payment: 12/13/2022		Method of Payment <input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT
Street Address 336 West Main Street		City Avon		State CT	Zip Code 06001
Purpose of Expenditure (by code) FOOD	Descriptions Consultant Interview		Event #		Amount 132.04
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) <input checked="" type="checkbox"/> None of the below <input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent <input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) <input type="checkbox"/> Organization: oA oB oC oD				
Name of Payee Wix.com LTD			Date of Payment: 12/20/2022		Method of Payment <input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT
Street Address 40 Ha-Namal Street		City Tel Aviv		State	Zip Code
Purpose of Expenditure (by code) WEB	Descriptions Campaign Website		Event #		Amount 172.28
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) <input checked="" type="checkbox"/> None of the below <input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent <input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) <input type="checkbox"/> Organization: oA oB oC oD				
Name of Payee Anedot			Date of Payment: 12/23/2022		Method of Payment <input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card <input type="checkbox"/> EFT
Street Address 1340 Poydras Street		City New Orleans		State LA	Zip Code 70112
Purpose of Expenditure (by code) BNK	Descriptions Anedot Fees		Event #		Amount 99.70
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) <input checked="" type="checkbox"/> None of the below <input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent <input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) <input type="checkbox"/> Organization: oA oB oC oD				
Name of Payee Amnas Restaurant			Date of Payment: 12/14/2022		Method of Payment <input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT
Street Address 695 Park Avenue		City Bloomfield		State CT	Zip Code 06002
Purpose of Expenditure (by code) FOOD	Descriptions Treasury team meeting		Event #		Amount 31.96
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) <input checked="" type="checkbox"/> None of the below <input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent <input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) <input type="checkbox"/> Organization: oA oB oC oD				
SUBTOTAL Section P — This Page				435.98	
TOTAL of additional Section P Pages				34.60	
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 19, Column A of Summary Page Totals)				470.58	

IV. EXPENDITURES (Sections P - T)

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)			TYPE OF REPORT	
Lebron for Hartford			JAN10	
P. Expenses Paid by Committee				
Name of Payee Anedot		Date of Payment: 12/21/2022	Method of Payment <input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card <input type="checkbox"/> EFT	
Street Address 1340 Poydras Street		City New Orleans	State LA	Zip Code 70112
Purpose of Expenditure (by code) BNK	Descriptions Anedot Fees	Event #	Amount	
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) <input checked="" type="checkbox"/> None of the below <input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent <input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) <input type="checkbox"/> Organization: oA oB oC oD		1.30	
Name of Payee Anedot		Date of Payment: 12/29/2022	Method of Payment <input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card <input type="checkbox"/> EFT	
Street Address 1340 Poydras Street		City New Orleans	State LA	Zip Code 70112
Purpose of Expenditure (by code) BNK	Descriptions Anedot Fees	Event #	Amount	
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) <input checked="" type="checkbox"/> None of the below <input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent <input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) <input type="checkbox"/> Organization: oA oB oC oD		23.40	
Name of Payee Wix.com LTD		Date of Payment: 12/20/2022	Method of Payment <input type="checkbox"/> Check # _____ <input type="checkbox"/> Debit Card <input type="checkbox"/> EFT	
Street Address 40 Ha-Namal Street		City Tel Aviv	State	Zip Code
Purpose of Expenditure (by code) WEB	Descriptions Campaign Website	Event #	Amount	
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required unless "None of the below" is checked) <input checked="" type="checkbox"/> None of the below <input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Independent <input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution) <input type="checkbox"/> Organization: oA oB oC oD		9.90	

SUBTOTAL Section P — This Page	34.60
TOTAL of additional Section P Pages	435.98
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 19, Column A of Summary Page Totals)	470.58

IV. EXPENDITURES (Sections P - T)

NAME OF COMMITTEE <i>(Provide Complete Name as Registered with Filing Repository)</i>			TYPE OF REPORT	
Lebron for Hartford			JAN10	
S. Expenses Incurred by Committee but Not Paid During this Period				
Name of Creditor Candice Dormon			Date Incurred 12/01/2022	
Street Address 26 Roydon Road		City New Haven	State CT	Zip Code 06511
Purpose of Expenditure (by code) WAGE	Description Staff Wage	Event #	Amount Incurred (Estimated or Actual)	
Expenditure # (if applicable)	Type of Expenditure <i>(Itemization in Addendum S Required unless "None of the below" is checked)</i> <input checked="" type="checkbox"/> None of the below <input type="checkbox"/> Coordinated with reimbursement sought (joint expenditure) <input type="checkbox"/> Coordinated without reimbursement sought (in-kind contribution)		10,000.00	
		<input type="checkbox"/> Independent <input type="checkbox"/> Organization: oA oB oC oD		

SUBTOTAL Section S — This Page	10,000.00
TOTAL of additional Section S Pages	0.00
TOTAL OF ALL EXPENSES INCURRED BY COMMITTEE DURING THIS PERIOD BUT NOT PAID <i>(Enter total on Line 26, Column A of Summary Page Totals)</i>	10,000.00
Previously reported Expenses Unpaid and still Outstanding	0.00
TOTAL OF ALL EXPENSES INCURRED BY COMMITTEE BUT NOT PAID <i>(Enter total on Line 28A, Column A of Summary Page Totals)</i>	10,000.00