SEEC FORM 20

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

2023 APR 10 PM 3: 36

Page

		COV	ERFAG	ம			
1. NAME OF COMMITTEE		5.60					
Sierra for Treasurer 2023		··					
2. TREASURER NAME	19 (Blogge 19 19 19 19 19 19 19 19 19 19 19 19 19						
First	 	MI	Last			Suffix	
Martin			Alvarenga				
3. TREASURER ADDRESS		nga gjudstrad	and a court of the courts				
Street Address		Ci	ty			State	Zip Code
136 Bartholomew Ave		Hart	tford			CT	06016
4. ELECTION/REFERENDUM DATE	5. OFFICE SO	UGHT (Co	emplete only if Cand	idate Committee)	6. DISTRICT NUMB	ER	
(mm/dd/yyyy)					(if applicable)		
11/07/2023	Treasurer				0		
7. CANDIDATE NAME (Complete on	ly if Candidate or Exp	doratory Co	mmittee)				
First		MI	Last			Suffix	
Carmen			Sierra				
8. TYPE OF REPORT (Check One I	Box)						
January 10 filing	7th day preceding	primary		preceding referendur	(PACe ONLY)	tion or D	isbursement
April 10 filing	30 days following		45 days	following referendur	m Amendment to		
July 10 filing	7th day preceding		Deficit		—		
October 10 filing	12th day preceding (State Central Con	election	(n) Termina	ition	Type of Report:		
24 Hour Independent Expenditure PrimaryElection	45 days following held in November		,,				
9. PERIOD COVERED							
Ве	ginning Date			Ending Date			
01	/01/2023		thru	03/31/2023			,
10. CERTIFICATION		-35 (65 est 10 e					
I hereby certify and state, under portion of the Campaign Finance Disclosure Service of the Campaign Finance Disclosure Office Disclosure of the Campaign Finance Disclosure of the Campaign Finance Disclosur	RER (SIGNATURE)	period cov	vered is true, accompany	LVE ME OF SIGNER	nns-La D	ATE (nan	/Zozs n/dd/yyyy)
A person who is fou			lfully violated any ulty or imprisonme		campaign finance		!

SEEC FORM 20

Itemized Campaign Finance Disclosure Statement
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Revised January 2015

Page

2

70

of

SUMMARY PAGE TOTALS

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository) Sierra for Treasurer 2023	TYPE OF REPORT	
Sierra for Treasurer 2023	April 10 filing	ZOT MATE
	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 (Section A and B)	\$26,696.00	\$26,696.00
14. Receipts from Other Committees (Sections C1 and C2)	\$0.00	\$0.00
15. Other Monetary Receipts (Sections D through K)	\$0.00	\$0.00
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 I.2. removed		
16c. Total Purchases of Advertising - Program Book or Sign (Section L3)	\$2,250.00	\$2,250.00
17. Total Monetary Receipts (add totals for lines 13-16c)	\$28,946.00	\$28,946.00
18. Subtotals (add totals in Line 12 + 17 in Column A; and in Line 11 + 17 in Column B)	\$28,946.00	\$28,946.00
19. Expenditures Paid by Committee (Section P)	\$736.55	\$736.55
20. Balance on hand at close of Reporting Period (Subtract Line 19 from Line 18 in both Columns)	\$28,209.45	\$28,209.45
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)	\$185.00	\$185.00
24. Refundable Deposit to Telephone Company (Section N)	\$0.00	\$0.00
25. Loan Balance	\$0.00	
25a. + Loans Received (Section D)	\$0.00	\$0.00
25b. + Interest and Penalties on Loan	\$0.00	\$0.00
25c Payments on Loan	\$0.00	\$0.00
25d. Total Outstanding Loan Amount	\$0.00	
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)	\$2605.27	
28a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section S)	\$0.00	

Page 3

of

70

NAME OF COMMITTEE (Provide Complete Name as Regist	ered with Filing Repo	sitory)	TYPE OF REPORT		6 (4 (5 (5 (6 (6 (6 (6 (6 (6 (6 (6 (6 (6 (6 (6 (6	
Sierra for Treasurer 2023		······································	April 10 filing			
A. Total Contributions from Small Contributors - Rec (See instructions for definition of Small Contributor)	eived this Period C	ONLY Subtotal S	ection A			\$0.00
B.)	temized Contribut	tions from Indivi	duals			
Last Name		First				M.I.
Alverio		Marilyn				
Residential Street Address	City			State	Zip Code	
75 West Ave	Essex			CT	06426-	1137
Principal Occupation Retired		Name of Employer Retired				
dependent child of a lobbyist? municipality do		he/she is associated w	r a chief executive officer of a rith have a contract with said s	Amou	nt of Cont	ribution
event reported in Section L1? Yes	nment the		ontractor? Yes Legislative			\$150.00
Method of contribution:	Deduction Money On	Date Receiv	red Aggregate contribution			
Last Name	- -	First				M,I.
Alverio		Marilyn				
Residential Street Address	City			State	Zip Code	_
75 West Ave	Essex			СТ	06426-	1137
Principal Occupation Retired		Name of Employer Retired				
dependent child of a lobbyist?		he/she is associated w	r a chief executive officer of a rith have a contract with said s	Amou	nt of Cont	ribution
ovent reported in Section L1? Item Item	ament the		ontractor? Yes Legislative			\$100.00
Method of contribution:		Date Receiv				
	Deduction Money Or					
Last Name Hill		First Darrell				M.I.
Residential Street Address	City	Darreii		State	Zip Code	<u> </u>
4 Regent St	Hartfor	rd		СТ	06105-	3919
Principal Occupation Executive		Name of Employer LAZ Parking		- L		
dependent child of a lobbyist? municipality do		he/she is associated w	r a chief executive officer of a with have a contract with said s	Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a print of the	roment the		Legislative V No			\$100.00
Method of contribution: ☐ Cash ☐ Personal Check ☑ Credit/Debit Card ☐ Payroll	Deduction Money Or	Date Received 03/15/20				

\$350.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page	4	of	70

NAME OF COMMITTEE (Provide Complete Nan	ne as Registered with Filing Repo	sitory)	TYPE OF REPORT	venteni.		d Asia
Sierra for Treasurer 2023			April 10 filing			
A. Total Contributions from Small Contribu	itors - Received this Period (ONLY				
(See instructions for definition of Small Contributo	r)	Subtotal Section	ı A			\$0.00
annes cere a company	B. Itemized Contribu	tions from Individual	S	5150 59 06	and the same of the same o	50 (20 (20) 50 (40) 75 (
Last Name		First				M.I.
Bilodeau		Kelly			1	
Residential Street Address	City	_ _		State	Zip Code	'
97 Roslyn St	Hartfo	rd		СТ	06106-4	126
Principal Occupation	·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·	Name of Employer				
Town Clerk		Town of East Hamp	oton			
dependent child of a lobbyist?	contribution is in excess of \$400 to a c unicipality does contributor or business unicipality valued at more than \$5,000	s he/she is associated with ha		Amoun	it of Conti	ribution
event reported in Section L1?	stributor a principal of a state contractors, indicate which branch or	or prospective state contrac	L] res			\$25.00
If yes, list event # conf	ches of government the ract is with:		slative No			
Method of contribution: ☐ Cash ☐ Personal Check ☑ Credit/Debit Card	Payroll Deduction Money O	Date Received 03/05/2023	Aggregate contributions \$25.00			
Last Name		First				M.I.
arciniegas		ismael				
Residential Street Address	City	<u></u>		State	Zip Code	
929 N Colony Rd, Unit 2	Meride			СТ	06450-2	2359
Principal Occupation		Name of Employer				
business analysis		midcap				
dependent child of a lobbyist?	contribution is in excess of \$400 to a c micipality does contributor or busines: micipality valued at more than \$5,000	s he/she is associated with ha		Amoun	t of Conti	ribution
event reported in Section L1?	tributor a principal of a state contractors, indicate which branch or	or or prospective state contrac	L_ I es			\$100.00
Myge list Event #	ches of government the	xecutive Legi				
Method of contribution: Cash Personal Check Credit/Debit Card	Payroll Deduction Money On	Date Received O3/10/2023	Aggregate contributions \$100.00			
Last Name		First				M.I.
Arciniegas		Gabriel				
Residential Street Address	City			State	Zip Code	
17 Olive Ln	Verno			CT	06066-2	222
Principal Occupation Accountant		Name of Employer Voya Financial				
dependent child of a lobbyist?	contribution is in excess of \$400 to a c unicipality does contributor or busines unicipality valued at more than \$5,000	s he/she is associated with ha		Amour	t of Conti	ribution
Yes	tributor a principal of a state contracto	or or prospective state contrac	tor? Yes	[\$200.00
No bran	s, indicate which branch or the ches of government the tract is with:	xecutiveLegi	islative No			-E-00.00
Method of contribution: Cash Personal Check ✓ Credit/Debit Card	Payroll Deduction Money Or	Date Received 03/05/2023	Aggregate contributions \$200.00			
						

\$325.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 5 of 70

NAME OF COMMITTEE (Provide Complete Name as Registered with Filin	ng Reposit	tory)		TYPE OF REPORT			
Sierra for Treasurer 2023	· · · · · · · · · · · · · · · · · · ·			April 10 filing	<u> </u>		
A. Total Contributions from Small Contributors - Received this Po	eriod Ol	NLY					-
(See instructions for definition of Small Contributor)		Sub	total Section A				\$0.00
B. Itemized Cor	ntributio	ons from	Individuals			4 S S S	
Last Name		First				·	M.I.
Reyes	1	Loida					
	City				State	Zip Code	
040 Official Of	Wethers				СТ	06109-2	2208
Principal Occupation Professor		Name of En Public Ur					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$46 municipality does contributor or municipality valued at more than	business h				Amoun	it of Conti	ribution
Is this contribution associated with an event reported in Section L1?	contractor o	or prospectiv	e state contractor	Yes Yes			\$50.00
No hranches of anyernment the				. ✓No			φυσισυ
If yes, list Event# contract is with:	Exe	cutive	Legisla	tive			
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction M	Ioney Orde	- 1	Received 31/2023	Aggregate contributions \$50.00			
Last Name		First	01/2020				M.I.
Reves		Ivan					
	i City				State	Zip Code	L
i	Hartford				CT	06106-4	525
Principal Occupation Retired	1	Name of En Retired	ployer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$40 municipality does contributor or municipality valued at more than	business h				Ашоип	t of Conti	ribution
Is this contribution associated with an event reported in Section L1? Yes If yes, indicate which branch or	contractor o	or prospectiv	e state contractor	☐ 1 es			\$100.00
If yes, list Event # V No branches of government the contract is with:	Exe	cutive	Legisla	ative No			
Method of contribution: ☐ Cash ☐ Personal Check ✔ Credit/Debit Card ☐ Payroll Deduction ☐ M	loney Orde		Received 01/2023	Aggregate contributions \$100.00			
Last Name		First					M.I.
Alvarenga		Martin					
Residential Street Address (City				State	Zip Code	
100 Carajolomow 7 TC	Hartford				CT	06106-2	2901
Principal Occupation City of Hartford employee		Name of En Employe					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes Who is in excess of \$40 municipality does contributor or municipality valued at more than	business h				Amoun	t of Conti	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state of flyes, indicate which branch or branches of government the	contractor o	or prospectiv	e state contractor	⁷ ☐Yes ☑No			\$150.00
If yes, list Event # contract is with:	Ехе	cutive	Legisla	ative			
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Debit Card ☐ Payroll Deduction ☐ M	Ioney Orde		e Received 03/2023	Aggregate contributions \$250.00			
		-					

\$300.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 6 of 70

NAME OF COMMITTEE (Providence)	de Comple	te Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT		
Sierra for Treasurer 2023						April 10 filing	<u> </u>	
A. Total Contributions from S	mall Co	ntributors - Received this	Period O	NLY				
(See instructions for definition of S	mall Cont	ributor)			Subtotal Section A			\$0.00
		B. Itemized C	ontributi	ons f	rom Individuals			
Last Name				First				M.I.
Alvarenga				Mai	rtin			
Residential Street Address			City				State	Zip Code
136 Bartholomew Ave			Hartford				СТ	06106-2901
Principal Occupation City of Hartford employee				1	of Employer loyed			
City of Flamford employee				<u> </u>				
Is contributer a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoun	at of Contribution
Is this contribution associated with an	Yes	Is contributor a principal of a stat	e contractor	or pros	pective state contractor	⁷ Yes		\$100.00
event reported in Section L1?	_ No	If yes, indicate which branch or branches of government the	r			I√lNo		φ100.00
if yes, list Event #		contract is with:	Ex	ecutiv	eLegisla	ative]	
Method of contribution; Cash Personal Check (Credit/Debit	Card Payroll Deduction	Money Ord	er _	Date Received 02/17/2023	Aggregate contributions \$250.00		
Last Name				First				M.I.
Hickman				Mile	dred			
Residential Street Address	-		City				State	Zip Code
275 Hany Ln			Vernon				СТ	06066-2740
Principal Occupation Social Worker				l	of Employer of CT			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐ Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoun	t of Contribution
Is this contribution associated with an	Yes	Is contributor a principal of a stat	e contractor	or pros	pective state contractor	? Yes]	\$100.00
event reported in Section L1?	☑No	If yes, indicate which branch or branches of government the	_			✓No]	φ (υυ.υι
If yes, list Event#	,	contract is with:	Ex	ecutiv	t Legisla	ative		
Method of contribution: Cash Personal Check (Credit/Debit	Card Payroll Deduction	Money Ord	er	Date Received 03/11/2023	Aggregate contributions \$100.00		
Last Name				First				M.I.
Sparrow				Har	old			
Residential Street Address			City				State	Zip Code
1 Gold St, Apt 23G			Hartford				СТ	06103-2932
Principal Occupation Human service				Ymc	of Employer B			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoun	t of Contribution
Is this contribution associated with an event reported in Section L1?	Yes	Is contributor a principal of a state If yes, indicate which branch of		or pros	pective state contractor	?		\$250.0
If yes, list Event #	✓ No	branches of government the contract is with;	∐Ex	ecutiv	e []Legisla	ative VINO		
Method of contribution: Cash Personal Check	Credit/Debit		Money Ord	ет	Date Received 03/10/2023	Aggregate contributions \$250.00		
								· · · · · · · · · · · · · · · · · · ·

SUBTOTAL Section B - This Page	\$450.00
TOTAL of Section B Pages	\$26,696.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page.	\$26,696.00

Page 7 of 70

NAME OF COMMITTEE (Provide Complete Name as Registere	d with Filing Rep	ository)		TYPE OF REPORT		
Sierra for Treasurer 2023	·			April 10 filing		
A. Total Contributions from Small Contributors - Receiv	ed this Period	ONLY				
(See instructions for definition of Small Contributor)	A side este de Santa de Cara. A Cara de Cara Cara Santa		Subtotal Section A			\$0.00
B. Ite	mized Contrib	utions	rom Individuals			
Last Name		Firs	t	· · · · · · · · · · · · · · · · · · ·		M.I.
Sierra		Ma	ureen			
Residential Street Address	City				State	Zìp Code
225 New London Rd	Colch	ester			CT	06415-1823
Principal Occupation Retired		Nam Reti	of Employer red			
	ontributor or busine	ss he/she	committee for a chief is associated with have Yes		Amoun	t of Contribution
TIES I TES		or or pro	spective state contractor	Yes		\$150.00
cvent reported in Section L1? If yes, list Event # If yes, list Event # If yes, indicate which branches of government contract is with:	ent the	Executiv	e Legisl	ative No		ψ130.00
Method of contribution: Cash Personal Check ✓ Credit/Debit Card Payroll Dec	luction Money (Order	Date Received 03/18/2023	Aggregate contributions \$150.00		
Last Name		Firs	į.			M,I,
Lopez		An	drea			
Residential Street Address	City				State	Zip Code
132 Sherbrooke Ave	Hartfo	ord			CT	06106-3840
Principal Occupation Retired		Reti	e of Employer red			
	ontributor or busine	ss he/she	committee for a chief is associated with have Yes		Amoun	t of Contribution
Is this contribution associated with an event reported in Section L1? If we indicate which		or or pro	spective state contractor	Yes		\$150.00
Free list Report # 032923a No branches of governm	ent the	Executiv	e Legisl	ative No		ψ100.00
Method of contribution:			Date Received	Aggregate contributions		
	luction Money (Order	03/29/2023	\$150.00		
Last Name		Firs	t			M.I.
Lopez		Sh	yleen			
Residential Street Address	City				State	Zip Code
132 Sherbrooke Ave	Hartfo	ord			CT	06106-3840
Principal Occupation Administrator			of Employer of Hartford			
	ontributor or busine	ss he/she	e committee for a chief is associated with have Yes		Amoun	t of Contribution
event reported in Section L1? Yes, indicate which	h branch or	_	spective state contractor	∐ 16s VNo		\$100.00
If yes, list Event # contract is with:	니	Executiv		ative		
Method of contribution: Cash Personal Check ✓ Credit/Debit Card Payroll Dec	luction Money (Order	Date Received 03/13/2023	Aggregate contributions \$100.00		

\$400.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 8 of 70

Last Name Lazowski Residential Street Address Cit 170 Scarborough St Ha Principal Occupation CEO LAZ Parking	tribution F A ty artford		April 10 filing			\$0.00
(See instructions for definition of Small Contributor) B. Itemized Contributor Last Name Lazowski Residential Street Address 170 Scarborough St Principal Occupation CEO LAZ Parking	tribution F A ty artford	Subtotal Section A s from Individuals rirst				\$0.00
Last Name Lazowski Residential Street Address City 170 Scarborough St Ha Principal Occupation CEO LAZ Parking	ty artford	First				1881/48/452
Lazowski Residential Street Address Cit 170 Scarborough St Ha Principal Occupation CEO LAZ Parking	ty artford					
Residential Street Address Cit 170 Scarborough St Ha Principal Occupation CEO LAZ Parking	ty artford Na	Alan				M.I.
170 Scarborough St Ha Principal Occupation CEO LAZ Parking	artford Na				!	ĺ
Principal Occupation CEO LAZ Parking	Na			State	Zip Code	
CEO LAZ Parking	L L			СТ	06105-1	107
Le contributor a labbruist engues of Van If contribution is in expense of \$400.		ame of Employer az Parking				
dependent child of a lobbyist? I vos municipality does contributor or but municipality valued at more than \$5	usiness he/s	date committee for a chief crains is associated with have a Yes		Amoun	t of Conti	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of a state contributor aprincipal of a state contributor	ntractor or p		∐ res ☑No			\$250.00
Mcthod of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Mon	=	Date Received 03/31/2023	Aggregate contributions \$250.00	<u> </u>		
Last Name	F	Pirst				M.L
Reategui	ل إ	Jose				
Residential Street Address City	•			State	Zip Code	
10 00.011.01	ethersfie			СТ	06109-2	:517
Principal Occupation Realestate	1	ame of Employer ego Realty Corp.				
is contributor a lobbyist, spouse, or Yes If contribution is in excess of \$400 municipality does contributor or but municipality valued at more than \$2	usiness he/s			Amoun	t of Conti	ribution
Is this contribution associated with an event reported in Section L1? Yes If yes, indicate which branch or branches of government the			∐ Yes ☑ No			\$250.00
If yes, list Event # 032923a INO branches of government the contract is with:	Execu	tive Legislat	Aggregate contributions			
Cash Personal Check Credit/Debit Card Payroll Deduction Mon	ncy Order	03/29/2023	\$250.00			
Last Name		First				M.I.
Grodecki		Thomas				L
Residential Street Address Circ 381 Fairfield Ave	ty artford			State	Zip Code 06114-2	2718
Principal Occupation		ame of Employer			037772	
Retired		etired				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$400 municipality does contributor or but municipality valued at more than \$50.	usiness he/s			Amoun	t of Conti	ribution
Is this contribution associated with an event reported in Section L1? Yes If yes, list Event # Is contributor a principal of a state contributor aprincipal of a state contrib	ntractor or p	 	∐ 1es ▽ No			\$250.00
Method of contribution:	ney Order	Date Received 03/10/2023	Aggregate contributions \$250.00			

\$750.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 9 of 70

NAME OF COMMITTEE (Provide Co	mplete	Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT	o de pere		
Sierra for Treasurer 2023						April 10 filing			
A. Total Contributions from Small	Contr	ibutors - Received this	Period O	NLY					
(See instructions for definition of Small (Contrib	utor)			Subtotal Section A				\$0.00
		B. Itemized C	ontribut	ions f	rom Individuals			35 35 35 9	300000
Last Name				First					M.I.
Healis				Ton	ıya]
Residential Street Address			City	<u> </u>			State	Zip Code	
11 Ashley Rd			Windso				СТ	06095-3	3420
Principal Occupation Consultant				_	of Employer SOUTCE				
				Evel	source				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of municipality does contributor municipality valued at more th	or business				Amoun	it of Conti	ribution
Is this contribution associated with an cvent reported in Section L1?	- S	contributor a principal of a stat If yes, indicate which branch or branches of government the	r			✓ No			\$250.00
If yes, list Event #		contract is with:	Ex	ecutive		ative			
Method of contribution: Cash Personal Check ✓ Credit/	Debit Ca	ard Payroll Deduction	Money Ord	er	Date Received 03/16/2023	Aggregate contributions \$250.00			
Last Name	· · · ·			First					M.I.
Edmonds				Pan	nela				1
Residential Street Address			City				State	Zip Code	
31 Woodland St, Ste 1			Hartford				СТ	06105-4	324
Principal Occupation Patient Advocate				1	of Employer fhcare				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		If contribution is in excess of municipality does contributor municipality valued at more th	or business				Amoun	nt of Cont	ribution
Is this contribution associated with an	es :	contributor a principal of a stat		or pros	pective state contractor	Yes			\$50.00
event reported in Section L17 If yes, list Event #	o }	If yes, indicate which branch or branches of government the contract is with:		ecutive	e []Legisl	ative No			ψου.σο
Method of contribution:			 _		Date Received	Aggregate contributions	1		
Cash Personal Check Credit	Debit Ca	ard Payroll Deduction	Money Ord	er	03/27/2023	\$50.00			
Last Name				First			· ·		M.I.
Faniel				Tho	mas				
Residential Street Address			City				State	Zip Code	10.47
35 Ford Rd			Windso				СТ	06095-3	3947
Principal Occupation Leadership Coach				1	of Employer of Public Schools	S			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes No	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Атоп	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	es	contributor a principal of a stat		or pros	pective state contractor	res			\$250.00
If yes, list Event #		branches of government the contract is with:	Ex	ecutiv	eLegisl	ative			
Method of contribution:					Date Received	Aggregate contributions	1		
Cash Personal Check Credit	Debit Ca	ard Payroll Deduction	Money Ord	ler	03/15/2023	\$250.00	<u> </u>		·

\$550.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 10 of 70

NAME OF COMMITTEE (Provide Con	plete Name as Registered with F	iling Repos	itory)		TYPE OF REPORT	S GNS S		G (5 5)
Sierra for Treasurer 2023					April 10 filing			
A. Total Contributions from Small	Contributors - Received this	Period O	NLY					
(See instructions for definition of Small C	ontributor)			Subtotal Section A				\$0.00
and construction of the co	B. Itemized (Contribut	ions fi	rom Individuals			140 may (2. 25)	
Last Name			First					M.I.
Kozak			Dav	⁄id				
Residential Street Address		City				State	Zip Code	
31 Hunters Rdg		Rocky				CT	06067-1	742
Principal Occupation				of Employer				
Government Relations			Noza	ık & Salina, LLC				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality daga contributor	r or business				Amou	nt of Cont	ribution
Is this contribution associated with an	Is contributor a principal of a sta	te contractor	or pros	pective state contractor	? Yes			\$250.00
event reported in dection L17	If yes, indicate which branch of	_			. ☑ No			\$250.00
If yes, list Event # 002023a	contract is with:	Ex	ecutive	ELegisl	ative]		
Method of contribution: Cash Personal Check Credit/L	ebit Card Payroll Deduction	Money Ord	lor	Date Received 03/29/2023	Aggregate contributions \$250.00			
Last Name	Taylor Deduction		First			<u></u>	<i></i>	M.I.
			1					171.1.
Rivera		l av	Gla	dys		Levi	Lette G. Iv	<u> </u>
Residential Street Address 136 South St		City Hartford	d			State	Zip Code 06114-2	2923
Principal Occupation		712511011		of Employer		1	1 001,11	
Admin			CRE					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Impresionality dans contributes	r or business				Amou	nt of Cont	ribution
Is this contribution associated with an Ye			or pros	pective state contractor	7 Yes			\$25.00
event reported in Section L1?	If yes, indicate which branch of branches of government the				✓ No			Ψ20.00
If yes, list Event #	contract is with:	Ex	ecutive		ative	1		
Method of contribution: Cash Personal Check ✓ Credit/E	ocbit Card Payroll Deduction	Money Ord	ler l	Date Received 03/23/2023	Aggregate contributions \$75.00	ļ		
Last Name			First		Ψ, 0.00	1		M.I.
			Gla					112151
Rivera Residential Street Address		City	Gla	uys		State	Zip Code	
136 South St		Hartford	ď			CT	06114-2	2923
Principal Occupation			Name	of Employer				
Admin			CRE					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	manaioimalites dans contributor	r or business				Amou	nt of Cont	ribution
Is this contribution associated with an	Is contributor a principal of a sta		or pros	pective state contractor	? Yes			\$50.00
event reported in Section 1.17	If yes, indicate which branch of				✓ No			ψ50.00
If yes, list Event # 033023a	contract is with:	Ех	ecutive	eLegisl:	ative			
Method of contribution: Cash Personal Check Credit/I	Pebit Card Payroll Deduction	Money Ord	ler	Date Received 03/30/2023	Aggregate contributions \$75.00	1		

SUBTOTAL Section B - This Page	\$325.00
TOTAL of Section B Pages	\$26,696.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$26,696.00

70

of

NAME OF COMMITTEE (Provide Co	omplete Name as Registered with Fi	iling Reposi	itory)		TYPE OF REPORT				
Sierra for Treasurer 2023					April 10 filing				
A. Total Contributions from Smal (See instructions for definition of Small		Period O	NLY	Subtotal Section /				\$0.00	
	B. Itemized C	ontributi	ons f	rom Individuals				ch ta an	
Last Name			First	!				M.I.	
Sanchez			JAI	MES					
Residential Street Address		City	'	 		State	Zip Code		
370 Freeman St		Hartford	<u> </u>			CT	06106-4	1227	
Principal Occupation	111		1	of Employer					
Utility systems monitoring and sur	rveillance		MDO	j					
dependent shild of a labbraist?	Yes If contribution is in excess of municipality does contributor numicipality valued at more than the second seco	or business l				Amoun	t of Cont	ribution	
Is this contribution associated with an event reported in Section L17	Yes Is contributor a principal of a stat If yes, indicate which branch o branches of government the		or pros		No □ 168			\$150.00	
17 yes, ust event #	contract is with:	Ex	ecutiv	,	ative				
Method of contribution: Cash Personal Check V Credit	t/Debit Card Payroll Deduction	Money Orde	er	Date Received 03/28/2023	Aggregate contributions \$150.00)			
Last Name			First	!				M.I.	
Salina			Ada	am					
Residential Street Address		City				State	Zip Code		
95 Spicewood Ln		Berlin				CT	06037-2	2831	
Principal Occupation Government Relations			1	of Employer ak & Salina, LLC					
damandant abild of a labbreist9	Yes If contribution is in excess of municipality does contributor municipality valued at more than the second seco	or business l				Amour	it of Cont	ribution	
Is this contribution associated with an	Yes Is contributor a principal of a stat	te contractor	or pros	pective state contractor	Yes	1		\$100.00	
event reported in Section L17 If yes, list Event # 032923a	 If yes, indicate which branch or 			a Maria	ou[v]			# 100.UC	
<u> </u>	contract is with:	EX	ecutiv	,		}			
Method of contribution: Cash Personal Check Credit	t/Debit Card Payroll Deduction	Money Orde	er	Date Received 03/29/2023	Aggregate contributions \$100.00				
Last Name			First	<u> </u>	<u> </u>			M.I.	
Lallier			Ru	ssell					
Residential Street Address		City	<u> </u>			State	Zip Code		
170 Church St		Newing	ton			CT	06111-4	\$803	
Principal Occupation			(of Employer					
President			All V	Vaste 					
damandant at it does to be to be don't	Yes If contribution is in excess of municipality does contributor municipality valued at more than	or business l				Amoun	it of Cont	ribution	
Is this contribution associated with an event reported in Section L1?) If yes, indicate which branch o		or pros	pective state contractor	r? ☐ Yes ☑ No			\$250.00	
If yes, list Event#	branches of government the contract is with:	Ex	ecutiv	e	ative [y_]130				
Method of contribution: Cash Personal Check Credit	t/Debit Card Payroli Deduction]Money Ord	er -	Date Received 03/30/2023	Aggregate contributions \$250.00)			
				 			-		

\$500.	SUBTOTAL Section B - This Page
\$26,696 .	TOTAL of Section B Pages
\$26,696.	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 12 of 70

NAME OF COMMITTEE (Provide Complete Name as Registered with File	ing Reposi	itory)		TYPE OF REPORT		Si 15 15 15	AV 30 E.
Sierra for Treasurer 2023				April 10 filing			
A. Total Contributions from Small Contributors - Received this l (See instructions for definition of Small Contributor)	Period O	NLY	Subtotal Section A				\$0.00
B. Itemized Co	ontributi	ons f	rom Individuals				3.0.3
Last Name		First					M.I.
Aponte		Ale	xander				
Residential Street Address	City				State	Zip Code	
40 Jackson St	New Bri				СТ	06053-3	3011
Principal Occupation Attorney			of Employer Office Of Alexand	der Aponte			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Wes If contribution is in excess of \$\frac{1}{2}\$ municipality does contributor of municipality valued at more the	or business l				Amour	t of Cont	ribution
Is this contribution associated with an cvent reported in Section L1? If yes, list Event # 033023a Is contributor a principal of a state of the section L1? If yes, list Event # 033023a Is contributor a principal of a state of the section L1? If yes, list Event # 033023a	_	or pros		☑ Yo.			\$250.00
Method of contribution:	Money Orde		Date Received 03/31/2023	Aggregate contributions \$250.00			
Last Name		First			<u></u>		M.I.
Aivarado		Aur	a				
Residential Street Address	City	<u> </u>		· · · · · · · · · · · · · · · · · · ·	State	Zip Code	
50 Filley St	Bloomfi				CT	06002-1	1805
Principal Occupation Owner			of Employer I Removations.co	m			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$\mathbb{Y}\$ municipality does contributor of municipality valued at more the	or business l				Amour	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Yes If yes, indicate which branch or branches of government the contract is with.	_	or pros	_	∐ 1es ✓No			\$100.00
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction			Date Received 03/14/2023	Aggregate contributions \$100.00			
Last Name		First					M.I.
Marrow		Ch	eryl				
Residential Street Address 875 Morrison Ave	City Bronx				State NY	Zip Code 10473-4	1444
Principal Occupation Conference Planner			of Employer RIED LLC				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$\frac{1}{2}\$ municipality does contributor of municipality valued at more the	or business l				Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Yes Is contributor a principal of a state If yes, indicate which branch or branches of government the event with If yes, list Event #	-	or pros	_	∐ res ✓No			\$250.00
Method of contribution:	Money Ord		Date Received 03/01/2023	Aggregate contributions \$250.00			

\$600.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 13 of 70

NAME OF COMMITTEE (Provide Comp	lete Name as Registered with Fi	iling Reposi	itory)		TYPE OF REPORT			
Sierra for Treasurer 2023	A STATE OF THE STA				April 10 filing			
A. Total Contributions from Small C (See instructions for definition of Small Co.		Period O		Subtotal Section A				\$0.00
	B. Itemized C	Contributi	ions fr	om Individuals			na na na	\$ 151.60
Last Name			First				AY	M.I.
Alleyne			Ken	neth				
Residential Street Address		City				State	Zip Code	L
837 Prospect Ave		West H	artford			СТ	06105-4	1229
Principal Occupation Physician			Name of Self	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality door contributor	or business l				Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a star If yes, indicate which branch o branches of government the	or	•	_	No			\$250.00
If yes, list Event # Method of contribution: Cash Personal Check Credit/De	contract is with:	Money Ord	ecutive ler	Date Received 03/02/2023	Aggregate contributions \$250.00			
Last Name	······································		First					M.I.
Fahy			Patr	ricia				
Residential Street Address		City			2,	State	Zip Code	
225 Palisado Ave		Windso	r			СТ	06095-2	2070
Principal Occupation Consultant			1	of Employer Employed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		or business				Атош	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a sta If yes, indicate which branch of		or brost	ective state contractor	?			\$50.00
If yes, list Event #	branches of government the contract is with:	Ex	ecutive	Legisla	ative			
Method of contribution: ☐ Cash Personal Check ✓ Credit/De	bit Card Payroll Deduction	Money Ord	ler	Date Received 03/02/2023	Aggregate contributions \$50.00			
Last Name			First					M.I.
Mejias			Ron	nelia	_			
Residential Street Address		City				State CT	Zip Code	700
175 Freeman St		Hartford		of Employer		C:	06114-2	2122
Principal Occupation Para profesional			1	oyed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	municipality door containmen	r or business l	he/she is			Amour	ıt of Cont	ribution
Is this contribution associated with an Yes	Is contributor a principal of a sta		or prost	ective state contractor	? Yes			\$150.00
event reported in Section L1? If yes, list Event #	If yes, indicate which branch of branches of government the contract is with:		cecutive	. Legisl	✓ No ative			Ţ100.0K
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/De		Money Ord	ier	Date Received 03/02/2023	Aggregate contributions \$150.00			
			,					

SUBTOTAL Section B - This Page	\$450.00
TOTAL of Section B Pages	\$26,696.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$26,696.00

Page 14 of 70

NAME OF COMMITTEE (Provide Comple	te Name as Registered with Filing R	Repositor	(ער	TYPE OF REPORT		a and	
Sierra for Treasurer 2023			_ <u></u>	April 10 filing			
A. Total Contributions from Small Con	atributors - Received this Perio	od ONI	Y				
(See instructions for definition of Small Conti	ributor)		Subtotal Section A				\$0.00
	B. Itemized Contr	ibution	s from Individuals	3 - 18 - HI - 17 - 15 - 16 - 16	(A) (A) (A)		
Last Name		F	irst				M.I.
Vazquez		\	/ictoria			•	
Residential Street Address	City				State	Zip Code	
200 Goodrich St	Hai	rtford			CT	06114-2	833
Principal Occupation Student			ame of Employer ludent				
		31	uudent				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to municipality does contributor or bus municipality valued at more than \$5,	iness he/s			Amoun	t of Conti	ibution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state contri	ractor or p	prospective state contractor	? Yes			\$50.00
If yes, list Event #	If yes, indicate which branch or branches of government the	Execu	ntive \bigcap Legisla	√ No			φου.συ
Method of contribution: Cash Personal Check Credit/Debit	contract is with:	y Order	Date Received 03/02/2023	Aggregate contributions	•		
Last Name	Taylon Deduction		7irst	\$50.00			M.L
Mars			olga Olga				177.1.
Residential Street Address	City		Jiga 		State	Zip Code	
190 Blue Ridge Dr	, ·	ncheste	er	•	CT	06040-6	818
Principal Occupation			ame of Employer	 _			
Retired		Re	etired				
Is contributor a lobbyist, spouse, or Yes dependent child of a lobbyist?	If contribution is in excess of \$400 to municipality does contributor or bus municipality valued at more than \$5,	iness he/s			Amoun	t of Conti	ibution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state contr	ractor or p	prospective state contractor	? Yes			\$250.00
If yes, list Event #	If yes, indicate which branch or branches of government the	¬	وارزون الله	✓No			Ψ200.00
	contract is with:	Ехеси					
Method of contribution: ☐ Cash ☐ Personal Check ☑ Credit/Debit	Card Payroll Deduction Mone	ey Order	Date Received 03/03/2023	Aggregate contributions \$250.00			
Last Name		F	₹irst		<u> </u>		M.I.
Santiago		N	Miosotys			!	
Residential Street Address	City				State	Zip Code	L—
78 Levesque Ave	We	st Hart	ford		CT	06110-1	136
Principal Occupation Judicial		1	ame of Employer tate of CT				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to rmmicipality does contributor or bus municipality valued at more than \$5,	iness he/s			Amoun	t of Conti	ibution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state contributor a principal of a state contributor, indicate which branch or	ractor or p	prospective state contractor	i es			\$50.00
If yes, list Event#	branches of government the contract is with:	Execu	ntiveLegisla	ative No			
Method of contribution:			Date Received	Aggregate contributions			
Cash Personal Check 🗸 Credit/Debit	Card Payroll Deduction Mone	ey Order	03/03/2023	\$50.00	<u> </u>		

\$350.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

70

NAME OF COMMITTEE (Provide Comp	lete Name as Registered with Fi	ling Reposi	itory)		TYPE OF REPORT		30.00.51.50	
Sierra for Treasurer 2023	The second secon		25, 500.00		April 10 filing			
A. Total Contributions from Small Co (See instructions for definition of Small Cor		Period O	NLY	Subtotal Section A				\$0.00
	B. Itemized C	ontributi	ons f	rom Individuals			en de la certa	
Last Name			First					M.I.
Lanzieri			Ma	пу		_		
Residential Street Address		City				State	Zip Code 03033	
24 Stonybrook Dr		Brooklir				NH	03033	
Principal Occupation Medical lab tech			L	of Employer lloyed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes	Is contributor a principal of a stat If yes, indicate which branch o branches of government the	r		_	✓ No			\$250.00
If yes, list Event # Method of contribution: Cash Personal Check V Credit/Det	contract is with:	Money Ord	ecutiv er	Date Received 03/03/2023	Aggregate contributions \$250.00			
Last Name			First			<u></u>		M.I.
Gutierrez			Bea	atriz				
Residential Street Address		City	1			State	Zip Code	
70 Spring Brook Dr		Middlet	own			СТ	06457-2	2173
Principal Occupation Executive				of Employer INSTEP				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L17	Is contributor a principal of a stat		or pros	pective state contractor	7 Yes			\$250.00
If yes, list Event #	If yes, indicate which branch o branches of government the		ecutiv	e Legisla	✓No			Ψ200,00
Method of contribution:	contract is with:			Date Received	Aggregate contributions			
Cash Personal Check Credit/Del	oit Card Payroll Deduction	Money Ord	er	03/04/2023	\$250.00			
Last Name			Firs					M.I.
Fernandez			Ma	rissa				
Residential Street Address		City				State	Zip Code	
91 Church Hill Rd		Haddar				СТ	06438-	1124
Principal Occupation Administrator			Uco	of Employer nn				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more t	or business				Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state If yes, indicate which branch o branches of government the	r	-	- 	∐ 16s			\$250.00
If yes, list Event #	contract is with:	Ex	ecutiv		ative			
Mothod of contribution: Cash Personal Check ✓ Credit/Del	oit Card Payroll Deduction	Money Ord	ler	Date Received 03/04/2023	Aggregate contributions \$250.00			

\$750.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

NAME OF COMMITTEE (Provi	de Comple	ete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT	(1) (S) (3) (A)	1914 (32-17-1)	
Sierra for Treasurer 2023						April 10 filing		· · · · · · · · · · · · · · · · · · ·	
A. Total Contributions from S	mali Co	ntributors - Received this	Period O	NLY					
(See instructions for definition of S	mall Coni	ributor)			Subtotal Section				\$0.00
		B. Itemized C	ontribut	ions f	rom Individuals	Basical (2.62.59.59.68.59.	90 A 100	18 S C 6	V 1912 (55.08%)
Last Name				First					M.I.
Alverio Melley				Dia	ne				
Residential Street Address			City				State	Zip Code	
15461 Lakes Of Delray Blvd			Delray	Beac	า 	 	FL	33484~	4169
Principal Occupation				ł	of Employer				
Retired				Reti	rea 				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amour	ıt of Cont	ribution
Is this contribution associated with an	Yes	Is contributor a principal of a stat		or pros	pective state contracto	t? TYes	1		\$250.00
event reported in Section L1?	√N ₀	If yes, indicate which branch of branches of government the			~~		-		φ2.50.00
If yes, list Event#		contract is with:	Ex	ecutiv	eLegisl	ative]		
Method of contribution: Cash Personal Check ()	Credit/Debi	t Card Payroll Deduction	Money Ord	er	Date Received 03/04/2023	Aggregate contributions \$250.00			
Last Name				First					M.I.
Arciniegas				Lilli	an				
Residential Street Address			City				State	Zip Code	
126 Yale St			Hartford]			CT	06106-4	4525
Principal Occupation Director				i i	of Employer ford Parent Unive	ersity			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amour	it of Cont	ribution
Is this contribution associated with an	Yes	Is contributor a principal of a stat		or pros	pective state contracto	Yes	}		\$250.00
event reported in Section L1?	✓No	If yes, indicate which branch or branches of government the			-	✓ No			Ψ200.00
If yes, list Event#		contract is with;	Ex	ecutiv		ative			
Method of contribution: Cash Personal Check ()	Credit/Dehit	t Card Payroll Deduction	Money Ord	er	Date Received 03/04/2023	Aggregate contributions \$250.00	1		
Last Name				First		Ψ200.00	Ĺ		M.I.
Rivera					dalia				
Residential Street Address			City	ling			State	Zip Code	ـــــ
15 Chapman St			Hartford	j			СТ	06114-2	2311
Principal Occupation Retired			'	Name Retir	of Employer ed		, , , , , ,		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ☑No	If contribution is in excess of municipality does contributor municipality valued at more the state of the st	or business !				Amour	t of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Yes	Is contributor a principal of a stat		or pros	pective state contracto	r? ∐Yes			\$100.00
	✓ No	If yes, indicate which branch or branches of government the contract is with:		ecutiv	e []Legisl	ative No			ψ (GO.00
Method of contribution: Cash Personal Check			Money Ord	er	Date Received 03/04/2023	Aggregate contributions \$100,00			
						4,00,00	1		

\$600.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

70

of

Secretarization of the production of the secretarian control of the secretarian secretarian secretarian secretarian	Registered with Filing Repository)		TYPE OF REPORT		6.00	
Sierra for Treasurer 2023			April 10 filing			
A. Total Contributions from Small Contributors - (See instructions for definition of Small Contributor)	Received this Period ONLY	Subtotal Section A				\$0.00
	B. Itemized Contributions	from Individuals				
Last Namo	Firs	and the property of the state o		erol service or diffe	ches i con emitorio e en esta fuera e	M.I.
Pinzon	Ta	nia				
Residential Street Address	City			State	Zip Code	i
115 Gottier Rd	Tolland			CT	06084-2	2330
Principal Occupation	í í	e of Employer				
Realtor/Insurance Broker	Tar	ia M. Pinzon				
dependent child of a lobbyist? Manunicipal	ntion is in excess of \$400 to a candidat ity does contributor or business he/she ity valued at more than \$5,000?			Amour	nt of Cont	ribution
event reported in Section L1? If yes, indic branches of	a principal of a state contractor or proceed which branch or government the		∐ ies VNo			\$50.00
Method of contribution: Cash Personal Check Credit/Debit Card Price Card Price Card Check Credit/Debit Card Check	ayroll Deduction Money Order	Date Received 03/04/2023	Aggregate contributions \$50.00			
Last Name	Fin	st				M.I.
Salito	Ra	alph				
Residential Street Address	City			State	Zip Code	
82 Fresh Meadow Dr	Trumbull			СТ	06611-1	1111
Principal Occupation Director	L L	e of Employer f Employed				
dependent child of a lobbyist?	ntion is in excess of \$400 to a candidat ity does contributor or business he/she ity valued at more than \$5,000?			Amour	t of Cont	ribution
event reported in Section L1? If yes, list Event # If yes, list Event # If yes, list Event # If yes, indic branches of contract is well as the section L1?	a principal of a state contractor or processe which branch or government the Executivith:	veLegisla	ive les			\$100.00
Method of contribution: Cash Personal Check ✓ Credit/Debit Card Personal Check ✓ Credit/Debit Card	ayroll Deduction Money Order	Date Received 03/04/2023	Aggregate contributions \$200.00			
Last Name	Fin		420000	L		M.I.
Salito	1	alph				1
Residential Street Address	City			State	Zip Code	L
82 Fresh Meadow Dr	Trumbull			CT	06611-1	1111
Principal Occupation Director	i i	c of Employer f Employed		<u> </u>	 	
dependent child of a lobbyist?	ntion is in excess of \$400 to a candidate ity does contributor or business he/she ity valued at more than \$5,000?			Amour	nt of Cont	ribution
event reported in Section L1?	a principal of a state contractor or pre- cate which branch or government the with:	-	∐ res ✓No			\$100.00
John John John John John John John John		Date Received	Aggregate contributions	ł		

\$250.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 18 of 70

See instructions from Small Contributory Subfoal Section A \$0.000	NAME OF COMMITTEE (Provide Com	olete Name as Registered with Fi	ling Reposi	itory)		TYPE OF REPORT	(Spirota (Artit) Pa		
Substitutions for definition of Small Contributions Substitutions from Individuals	Sierra for Treasurer 2023					April 10 filing	****		
B. Itemized Contributions from Individuals First First Elizabeth First	A. Total Contributions from Small C	ontributors - Received this	Period O	NLY					
Mail More	(See instructions for definition of Small Co	ntributor)			Subtotal Section A				\$0.00
Motes		B. Itemized C	Contributi	ons fi	om Individuals		150 300 000		
Redieval al Street Address City Newlington State CT 08111-1035	Last Name	***	,	First					M.I.
Principal Occupation Newington Newington Name of Employee Aggregate contribution is in excess of \$400 to a condidate compilator with and contribution abobysist, spouse, or departed and following the present of the contribution is in excess of \$400 to a condidate compilator of the contribution is in excess of \$400 to a condidate compilator of the contribution of the contribution is in excess of \$400 to a condidate compilator of the contribution of the contribution is in excess of \$400 to a condidate compilator of the contribution o	Motes			Eliz	abeth				
Name of Employer Altra molition Name of Employer Altra molition	Residential Street Address	<u> </u>	City						
Is contributor a lobbysis, agonus, or dependent child of a lobbysis, a			Newing				CT	06111-1	035
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes No									
dependent child of a lobbyist? No				Aitra					
## When the form that the contribution associated with an event reported in Section L17 Yes Myse, inst Event #	demonstrate abilid a F a Indicated	municipality does contributor	or business l		s associated with have	a contract with said	Amoun	t of Conti	ribution
### Amount of Contribution State Personal Cheek Credit/Debit Card Payroll Deduction Money Order Date Received O3/04/2023 Aggregate contributions State Sta	1 1 V eq			or prosj	pective state contractor	? Yes			\$5.00
Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 03/04/2023 \$5.00	✓ No	branches of government the		ecutive	: Legisla	ntive No			ψυ.συ
Residential Street Address 519 Cypress Rd Name of Employer Hartford Public Library		bit Card Payroll Deduction	Money Ord	ег	i				
Residential Street Address 519 Cypress Rd Name of Employer Hartford Public Library	Last Name			First					M.I.
Secontributor a lobbyist, spouse, or dependent child of a lobbyist? Yes with the personal Cheek Yeredit/Debit Card Payroll Deduction Money Order Date Received Orlando Selection Personal Cheek Yeredit/Debit Card Payroll Deduction Money Order Orlando Selection Selec	Mendez			Nar	ісу				
Name of Employer Hartford Public Library	Residential Street Address		1 "					1 '	
Librarian Hartford Public Library			Newing				СТ	06111-8	625
Is this contribution associated with an event reported in Section L1? Yes Who Is this contribution of contribution Yes Who Is this contribution associated with an Yes Yes Who Yes						у			
## State Sta	damandant abild of a labbriat?	municipality does contributor	or business l		s associated with have	a contract with said	Amoun	t of Cont	ribution
Method of contribution:				or prosj	pective state contractor	? Yes			\$20.00
Cash	✓No	branches of government the		ecutive	eLegisla	ative No			Ψ20.00
Residential Street Address 13574 Rontgen Cir Principal Occupation Self employed Name of Employer MG Insurance Services Group CO Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Date Received Aggregate contributions		bit Card Payroll Deduction	Money Ord	ег					
Residential Street Address 13574 Rontgen Cir Principal Occupation Self employed Name of Employer MG Insurance Services Group CO Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions	Last Name			First		,			M.I.
13574 Rontgen Cir Principal Occupation Self employed Name of Employer MG Insurance Services Group CO Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Method of contribution: Date Received Aggregate contributions	Gonzalez			Mar	ridory				
Principal Occupation Self employed Name of Employer MG Insurance Services Group CO Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Name of Employer MG Insurance Services Group CO Amount of Contribution Figure 1 Figure 2 Figure 3 Figure 3 Figure 4 Figure	Residential Street Address		City	.1					
Self employed Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Method of	13574 Rontgen Cir		Orlando				FL	32827-7	7931
dependent child of a lobbyist? No						es Group CO			
event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Method of contribution: Yes	domandant shild of a labbrriat?	municipality does contributor	or business l		s associated with have	a contract with said	Amoun	t of Cont	ribution
Method of contribution: Date Received Aggregate contributions	event reported in Section L1?	If yes, indicate which branch of branches of government the	er			∐ Yes ✓ No			\$100.00
		contact is with:							
		ebit Card Payroll Deduction	Money Ord	ler					

SUBTOTAL Section B - This Page	\$125.00
TOTAL of Section B Pages	\$26,696.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$26,696.00

Page 19 of 70

NAME OF COMMITTEE (Provid	le Complei	te Name as Registered with Fi	ling Reposi	itory)		TYPE OF REPORT			. 1916 - 1916 - 1
Sierra for Treasurer 2023		<u> </u>			a engles to the later of the Control	April 10 filing		- understäterigen	
A, Total Contributions from Si (See instructions for definition of Sn	445040000000000000000000000000000000000		Period O	av sne	Subtotal Section A				\$0.00
		1998 Carl Day at the 1984 and the state of the 1994 and an extra place of the 1997	ontributi	econdentitos	rom Individuals	1	Unit (810A)		8.00
Last Name	The street of the street			First		e Arranes (Cora e descripto e servicio de Arranes de Arranes de Arranes de Arranes de Arranes de Arranes de Ar	21 se-21 100 2 500 1 80 00	Control of Section Control Section (Section Section Section Section Section Section Section Section Section Sec	M.I.
Canuel				Dav	rid				
Residential Street Address			City	<u> </u>			State	Zip Code	L
864 Gulf Pavilion Dr, Apt 103			Naples				FL	34108-8	3763
Principal Occupation				1	of Employer				
Substitute Teacher				Collie	er County Public	Schools			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Yes No	Is contributor a principal of a state If yes, indicate which branch or branches of government the		or prosp		□ res ☑ No			\$100.00
Method of contribution: Cash Personal Check CC	redit/Debit	contract is with: Card Payroll Deduction	 _		Date Received 03/05/2023	Aggregate contributions \$100.00			
Last Name				First			<u> </u>		M.I.
Beauchamp				Hat	tie				,
Residential Street Address			City		· · · · · · · · · · · · · · · · · · ·		State	Zip Code	
1885 NW 79th Ter			Pembro	ke Pi	nes		FL	33024-3	677
Principal Occupation				ſ	of Employer		-		
Retired. Former Principal at M	liddle Sci	hool in Witby		Retir	ed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amour	t of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Yes	Is contributor a principal of a state If yes, indicate which branch or		or pros	pective state contractor	res			\$100.00
If yes, list Event#	√ No	branches of government the contract is with:	Ex	ecutive	eLegisla	ative No			
Method of contribution: Cash Personal Check CC	redit/Debit	Card Payroll Deduction	Money Ord	er	Date Received 03/05/2023	Aggregate contributions \$100.00			
Last Name				First					M.I.
Sierra				Jos	е				
Residential Street Address			City				State	Zip Code	
2907 Ivy Lake Ct			Lakelan				FL	33811-2	2066
Principal Occupation Manager				•	of Employer Employed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amour	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	∐Yes ✓No	Is contributor a principal of a state If yes, indicate which branch or branches of government the	r	or prosp	·	∐ 1 es ✓ No			\$50.00
Method of contribution:		contract is with:		Cunve	Date Received	Aggregate contributions	1		
Cash Personal Check 🗸 C	Credit/Debit	Card Payroll Deduction	Money Ord	ет	03/06/2023	\$50.00			

\$250.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

20

Subject Subj	NAME OF COMMITTEE (Provi	de Complet	te Name as Registered with Fit	ling Repos	itory)			TYPE OF REPORT			(1) (2) (3) (4) (4) (4)
See instructions for definition of Small Contributors Subtrotal Section A	Sierra for Treasurer 2023							April 10 filing			
Last Name First Marcos First Marcos State CT Off-106-3501 Marcos CT Off-106-3501	A. Total Contributions from S	mall Con	tributors - Received this	Period O	NLY						
First Marcos First Marcos Mil.	(See instructions for definition of S	mall Contr	ibutor)			Subtot	al Section A				\$0.00
Residential Street Address 6 City 6 Allendade Rd 8 Principal Occupation Marrage 7 City of Hartford 8 Sub 7 25 Code 6 1060-8-3601 8 Principal Occupation Marrage 8 City of Hartford 8 Name of Employer City of Hartford 8 City		r di di della	B. Itemized C	ontribut	ions fi	rom In	dividuals		g se av	n na na sa	
Residential Street Address 64 Allendale Rd Findingial Occupation Manager Is contributor a lobbyist, spouse, or dependent child of a lobbyist? No Is this contributor a sobistic street with an amunicipality valued at more than \$5,000? If yes, this Event # No Redicted of contributors: Call Personal Check Credit/Debit Card Peyroll Deduction Manager Is contributor a lobbyist, spouse, or denote with an amunicipality valued at more than \$5,000? Yes You Yes You Yes	Last Name				First						M.I.
Hartford Hartford Stoch CT 06106-3501	Rivera				Mai	rcos					
Name of Employer City of Hartford City of Har	Residential Street Address			City					State	Zip Code	
Is contributor a lothyist, spoise, or dependent child of a lobbyist? Yes If contribution is in excess of \$400 to a candidate committee for a chief executive difficer of a municipality valued at more than \$5,000? Yes No	64 Allendale Rd	<u> </u>		Hartford	d				CT	06106-3	3501
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes No	l '				i	•	-				
dependent child of a lobbysis? No manicipality does contributor or business bothes is associated with have a contract with sail simulations associated with an event reported in Section L1? Yes No Pyes, indicate which branch or branches of government the contact is with: Secontification Date Received Date Recei	Manager				City	or mart	iora 				
Second Section L17			municipality does contributor	or business	he/she i	is associat	ed with have	a contract with said	Amoun	t of Cont	ribution
### Appears in the Event ##		Yes	- ·		or pros	pective st	ate contractor	Yes			\$50.00
Method of constitution: Cash Personal Chock Cordit/Debit Card Payrall Deduction Money Order Date Received Aggregate contributions \$50.00	_	V No					—	✓ No	}		Ψ00,00
Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 03/08/2023 \$50.00	<u> </u>			Ex	ecutiv			ative	4		
Last Name Colon Residential Street Address SD Dix Rd Principal Occupation Instructor Is contributor a fobbyist, spouse, or dependent child of a lobbyist? Is contributor a sociated with an account that or branches of government the contract is with: State		Credit/Debit	Card Payroll Deduction	Money Ord	ler	ı					
Colon Josue Residential Street Address City Wethersfield CT O6109-2904		 					,				M.I.
Residential Street Address 50 Dix Rd Principal Occupation Instructor Instructor Instructor Instructor Instructor Instructor Is contributor a lobbyjst, spouse, or dependent child of a lobbyjst? Yes	Colon				Jos	ue					[
Principal Occupation Instructor Name of Employer NASCTF	<u> </u>			City	1				State	Zip Code	L
Instructor Is contributor a fobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L.1? If yes, list Event # Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order Date Received O3/06/2023 \$250.00 Last Name Garibay Marissa Residential Street Address Principal of a Maris Principal of a Maris Principal of a Maris Principal of a Institution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or principal of a state contractor? Yes \$250.00 Marissa Principal Occupation Payroll Deduction Money Order O3/06/2023 \$250.00 Is this contributor a Jobbyist, spouse, or dependent child of a Jobbyist, spouse, or dependent child of a Jobbyist? Principal of a state contractor or prospective state contractor? Yes If contributor a principal of a state contractor or prospective state contract with said municipality valued at more than \$5,000? Yes No Is this contributor a Section L.1? Yes If contributor a principal of a state contractor or prospective state contractor? Yes Yes					sfield				ì		2904
International contribution associated with an examination of payroll peduction Manney Order Marissa	· · ·						yer				
Is this contribution associated with an event reported in Section I.1?			municipality does contributor	or business	he/she i		ed with have	a contract with said	Amour	it of Cont	ribution
Method of contribution: Cash			If yes, indicate which branch or		or pros	pective st	ate contractor	res			\$250.00
Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 03/06/2023 \$250.00 Last Name First M.I. Garibay Marissa Residential Street Address City Haddam CT 06438-1124 Principal Occupation Patient Service Coordinator Name of Employer Hartford Hospital Is contributor a lobbyist, spouse, or dependent child of a lobbyist? No If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,600? Yes No Is this contribution associated with an event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions Method of contribution: Date Received Aggregate contributions Date Received Aggregate contributions Date Received Aggregate contributions M.I.	If yes, list Event#	▼ I40		☐ Ex	ecutiv	е	Legisla	ative V 140			
Caribay Marissa		endia/Po. Lita	с., Гъ. пъ. <u>4</u> . П	lx		ſ			1		
Residential Street Address Principal Occupation Patient Service Coordinator If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Marrissa State Zip Code O6438-1124 Name of Employer Hartford Hospital Name of Empl		Cremonent	Cana Payron Deduction	inoney Ord			12023	\$250.00	<u></u>		107
Residential Street Address 91 Church Hill Rd Principal Occupation Patient Service Coordinator Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: State Zip Code O6438-1124											M.1.
91 Church Hill Rd Principal Occupation Patient Service Coordinator Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? Is contributor a principal of a state contractor or prospective state contractor? If yes, list Event # Method of contribution: Patient Service Coordinator Name of Employer Hartford Hospital	<u> </u>	 .			Ma	rissa			T 71	1	L
Principal Occupation Patient Service Coordinator Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Name of Employer Hartford Hospital Name of Employer Hartford Hospital Name of Employer Hartford Hospital Amount of Contribution of a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes Is contributor a principal of a state contractor or prospective state contractor? Yes If yes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions	1			i '	n				1	1 '	1124
Patient Service Coordinator Hartford Hospital				riadual		of Emple	ver		1 5,	00400-	, ; 4-7
dependent child of a lobbyist? No municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state contractor or prospective state contractor? Yes					,						
dependent child of a lobbyist? No municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state contractor or prospective state contractor? Yes	Is contributor a labbuist snouse or	Yes	If contribution is in excess of	\$400 to a ca	ndidate	committe	e for a chief	executive officer of a	<u> </u>		
event reported in Section L1? If yes, list Event # You	dependent child of a lobbyist?		municipality does contributor municipality valued at more th	or business an \$5,000?	he/she i	is associal	ed with have Yes	a contract with said	Amour	it of Cont	ribution
If yes, list Event #		Yes	• -		or pros	pective st	ate contractor	f? ☐Yes			\$250.00
Method of contribution: Date Received Aggregate contributions	<u> </u>	⊘ No	branches of government the		recutiv	e	Legisl	ative No			,
		Credit/Debit		Money Ord	ler '	į	1				
	L					•		<u></u>			

\$550.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 21 of 70

NAME OF COMMITTEE (Provide Comp	lete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT		40 G G	0 3 3 1
Sierra for Treasurer 2023				<u> </u>	April 10 filing			
A. Total Contributions from Small Co (See instructions for definition of Small Con		Period O	NLY	Subtotal Section A				\$0.00
	B. Itemized C	ontributi	ons f	rom Individuals		Miller (S. Off	30.00	
Last Name			First		<u> </u>			M.I.
Hernandez Sierra			Myr	riam L				
Residential Street Address		City	<u> </u>		· · · · · · · · · · · · · · · · · · ·	State	Zip Code	·
9614 Villas De Ciudad Jardin, Apt H8	02	Canova	ınas			PR	00729-9	9803
Principal Occupation Unemployed				of Employer nployed	,			
Is contributor a lobbyist, spouse, or Yes dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business	ndidate	committee for a chief		Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	Is contributor a principal of a state of the	te contractor	or pros	pective state contractor	T? Yes ✓ No			\$100.00
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Deb	contract is with:			Date Received 03/07/2023	Aggregate contributions \$100.00			
Last Name			First	 _		L		M.I.
Grijalvo			Eve	elyn				
Residential Street Address		City	<u>.</u>			State	Zip Code	
7532 Cleveland St		Hollywo	ood	_		FL	33024-5	5340
Principal Occupation Retired			Name Retir	of Employer ed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more t	or business				Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes V No If yes, list Event #	Is contributor a principal of a star If yes, indicate which branch o branches of government the contract is with:	ır	or pros	_	∐ les ✓ No			\$100.00
Method of contribution: Cash Personal Check Credit/Det		Money Ord	er	Date Received 03/07/2023	Aggregate contributions \$100.00			
Last Name			First					M.I.
Grobe			Rul	th				
Residential Street Address		City				State	Zip Code	
PO Box 370		Farmin				СТ	06034-0	0370
Principal Occupation Homemaker			1	of Employer Employed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more t	or business	he/she i			Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a sta If yes, indicate which branch o branches of government the	or	_		∐ 16s			\$50.00
If yes, list Event#	contract is with:	Ex	ecutiv		ative	1		
Method of contribution: Cash Personal Check ✓ Credit/Det	oit Card Payroll Deduction	Money Ore	ier 	Date Received 03/07/2023	Aggregate contributions \$50.00			

SUBTOTAL Section B - This Page \$250.00	
TOTAL of Section B Pages \$26,696.00	
ROM INDIVIDUALS (Sections A + B) \$26,696.00 ine 13, Column A of Summary Page	TOTAL OF ALL

Page 22 of 70

NAME OF COMMITTEE (Prov	ide Compl	ete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT		1 de 18 de	
Sierra for Treasurer 2023		<u></u>				April 10 filing		<u> </u>	
A. Total Contributions from !	Small Co	ntributors - Received this	Period O	NLY					
(See instructions for definition of S	Small Con	tributor)	9.40 (4.6)		Subtotal Section A	4			\$0.00
	3. 3. 3. 3.	B. Itemized C	ontribut	ions fi	rom Individuals			S. 15 - 12 - 15	
Last Name				First		·			M.I.
Herboldt				Gin	а				
Residential Street Address			City	'			State	Zip Code	
228 Goodrich St			Hartford	d			CT	06114-2	2833
Principal Occupation Retired			-	Name Retir	of Employer		-		
Kemed				Ketii	eu 				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amoui	it of Conti	ribution
Is this contribution associated with an	Yes	Is contributor a principal of a stat	e contractor	or prosi	pective state contracto	r? Yes			\$50.00
event reported in Section L1? Hyes, list Event #	No	If yes, indicate which branch o branches of government the contract is with:		ecutive	eLegisl	ative No			φυυ.υυ
Method of contribution: ☐ Cash ☐ Personal Check ✓	Credit/Debi	t Card Payroll Deduction	Money Ord	ler	Date Received 03/08/2023	Aggregate contributions \$80.00			_
Last Name				First					M.I.
Herboldt				Gin	а				
Residential Street Address			City				State	Zip Code	
228 Goodrich St			Hartford				СТ	06114-2	2833
Principal Occupation Retired				Name Retir	of Employer ed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amou	nt of Conti	ribution
Is this contribution associated with an event reported in Section L1?	Yes	Is contributor a principal of a state If yes, indicate which branch o		or pros	pective state contracto	r? ☐ Yes ✓ No			\$30.00
If yes, list Event #	✓ No	branches of government the contract is with:	Ex	ecutive	eLegisl	ative			
Method of contribution: Cash Personal Check	Credit/Debi	t Card Payroll Deduction	Money Ord	ler	Date Received 03/31/2023	Aggregate contributions \$80.00			
Last Name				First					M.I.
Claudio				Aída	a				
Residential Street Address			City				State	Zip Code	
200 Buxton Ct			Windso				СТ	06095-1	494
Principal Occupation Associate Director					of Employer ss Amherst				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more t	or business	he/she i			Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Yes	Is contributor a principal of a stat		or pros	pective state contracto	1? ☐Yes	ļ		\$250.00
If yes, list Event #	⊘ No	If yes, indicate which branch o branches of government the contract is with:		ecutive	e []Legisl	lative			
Method of contribution: Cash Personal Check	Credit/Debi	t Card Payroll Deduction	Money Ord	er	Date Received 03/08/2023	Aggregate contributions \$250.00			!

\$330.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 23 of 70

NAME OF COMMITTEB (Provide Complete Name as Sierra for Treasurer 2023	Registered with Filing Repositor	sa e se sus estados estados estados estados estados estados en entre en estados en entre en entre entre entre e	TYPE OF REPORT April 10 filing		apend apend engine	<u> তথ্যসংগ্রহণ করিবলৈ</u>
	**************************************		April 10 ming			
A. Total Contributions from Small Contributors (See instructions for definition of Small Contributor)	- Received tills Feriod (11)	Subtotal Section A				\$0.00
	B. Itemized Contribution	s from Individuals				
Last Name	1	First				M.I.
Garcia	ļ. (Carmen and Luis				
Residential Street Address	City			State	Zip Code	
106 Stillwold Dr	Wethersfi	eld		СТ	06109-3	3033
Principal Occupation Retired	1 _1	ame of Employer etired				
dependent child of a lobbyist? municipa	oution is in excess of \$400 to a candii ality does contributor or business held ality valued at more than \$5,000?			Атош	nt of Conti	ribution
event reported in Section L1? If yes, ind	or a principal of a state contractor or dicate which branch or of government the		∐ res VNo			\$50.00
Method of contribution;	Payroll Deduction Money Order	Date Received 03/08/2023	Aggregate contributions \$50.00			
Last Name	[]	First		<u></u>		M.I.
Bell		Jamie				
Residential Street Address	City			State	Zip Code	 -
35 S Main St	East Ham	pton		СТ	06424-1	645
Principal Occupation Self Employed	j	ame of Employer self Employed				
dependent child of a lobbyist? Inunicipa	oution is in excess of \$400 to a candi- dity does contributor or business he/s dity valued at more than \$5,0007			Amour	nt of Cont	ribution
event reported in Section L1? If yes, ind branches o	or a principal of a state contractor or place which branch or of government the		∐ Fes ✓ No			\$100.00
Method of contribution:	with:	Date Received 03/08/2023	Aggregate contributions \$100,00			
Last Name		First				M.I.
Bergenn	1.	Jim				
Residential Street Address	City			State	Zip Code	<u> </u>
50 Castlewood Rd	West Hart	tford		СТ	06107-2	2903
Principal Occupation Attorney		ame of Employer hipman & Goodwin				
dependent child of a lobbyist? municipa	oution is in excess of \$400 to a candi- ality does contributor or business he/s ality valued at more than \$5,000?			Amour	nt of Cont	ribution
event reported in Section L17 If yes, ind	or a principal of a state contractor or it icate which branch or if government the	prospective state contractor utive Legisla	∐ 1es VNo			\$250.00
If yes, list Event # contract is	with:	unto [] Logisti		1		

\$400.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

f	70

NAME OF COMMITTEE (Provide Complete 1	Name as Registered with Fil	ing Repos	itory)		TYPE OF REPORT	0.000		12 (E) (S)
Sierra for Treasurer 2023					April 10 filing			
A. Total Contributions from Small Contr (See instructions for definition of Small Contribu		Period O	NLY	Subtotal Section A			'	\$0.00
La complete de la co	B. Itemized C	ontributi	ons fi	rom Individuals				i jak üçek işini
Last Name			First					M.I.
Motley			Joh	n				ļ
Residential Street Address		City	<u></u>		· · · · · · · · · · · · · · · · · · ·	State	Zip Code	<u> </u>
39 Canterbury Rd		Hamde				СТ	06514-2	2016
Principal Occupation Consultant		-		of Employer By Consulting				
Is contributor a lobbyist, spouse, or Yes dependent child of a lobbyist?	If contribution is in excess of s municipality does contributor of municipality valued at more th	or business l				Amoun	t of Cont	ribution
event reported in Section L1?	contributor a principal of a state If yes, indicate which branch or branches of government the			_	∐ Fes ✓ No			\$250.00
Method of contribution: Cash Personal Check Credit/Debit Ca	contract is with: rd Payroll Deduction	Money Ord	ecutive 	Date Received 03/09/2023	Aggregate contributions \$250.00			
Last Name			First					M.I.
Harrington			Ant	hony				
Residential Street Address		City			<u></u>	State	Zip Code	<u> </u>
3 Boysen Dr		Bloomfi	eld			СТ	06002-	1146
Principal Occupation Business Service Representative	-		Name EDS	of Employer [
Is contributor a lobbyist, spouse, or Yes dependent child of a lobbyist?	If contribution is in excess of 5 municipality does contributor municipality valued at more th	or business l				Amour	t of Cont	ribution
event reported in Section L.1?	contributor a principal of a state If yes, indicate which branch or branches of government the contract is with:	_	or pros		□ res ✓ No			\$150.00
Method of contribution: Cash Personal Check ✓ Credit/Debit Ca	rd Payroll Deduction	Money Ord	er	Date Received 03/09/2023	Aggregate contributions \$150.00			
Last Name			First					M.I.
Melendez.			Yve	ette				
Residential Street Address		City				State	Zip Code	
94 Southpond Rd		South C	,	<u>-</u>		СТ	06073-2	2324
Principal Occupation Retired			Name Retir	of Employer ed				
Is contributor a lobbyist, spouse, or Yes dependent child of a lobbyist?	If contribution is in excess of smunicipality does contributor municipality valued at more the	or business l				Amour	nt of Cont	ribution
event reported in Section L1?	contributor a principal of a state If yes, indicate which branch or branches of government the contract is with:	·	or pros	_	∐ 1es ✓ No			\$250.00
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Debit Ca		Money Ord	er	Date Received 03/09/2023	Aggregate contributions \$250.00			

\$650.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 25

of

70

NAME OF COMMITTEE (Provide Complete Name as Registered	d with Filing Repos	itory)		TYPE OF REPORT	0.170-50-10		
Sierra for Treasurer 2023				April 10 filing			
A. Total Contributions from Small Contributors - Receiv (See instructions for definition of Small Contributor)	ed this Period O		Subtotal Section A				\$0.00
B. Iten	nized Contributi	ions fr	om Individuals		no cara digerale Si daga yelebilar		
Last Name		First				M.I.	
Chadburn		Carl					
Residential Street Address	City	<u></u>	·	· · · · · · · · · · · · · · · · · · ·	State	Zip Code	
94 Southpond Rd	South 6	Glastor	bury		СТ	06073-2	2324
Principal Occupation Retired		Name o	of Employer ed				
dependent child of a lobbyist? No municipality does comunicipality valued	excess of \$400 to a car entributor or business of at more than \$5,000?	he/she is	associated with have	a contract with said No	Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal yes, indicate which branches of governme contract is with:	branch or	ecutive		∐ 1es ✓No			\$250.00
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Debit Card ☐ Payroll Ded	uction Money Ord	der	Date Received 03/09/2023	Aggregate contributions \$250.00			
Last Name		First					M.I.
Orsaris		Erini	İ				
Residential Street Address	City				State	Zip Code	
375 Fairfield Ave	Hartford				СТ	06114-2	2718
Principal Occupation Adult Probation		1	of Employer Ial Branch				
dependent child of a lobbyist? municipality does co	excess of \$400 to a ca ontributor or business at more than \$5,000?	hc/she is			Amow	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Yes If yes, indicate which branches of government contract is with:	t branch or	or prosp	Legisl	ative			\$100.00
Method of contribution: Cash Personal Check	luction Money Ord	der	Date Received 03/09/2023	Aggregate contributions \$100.00	\		
Last Name		First	03/03/2020	ψ100.00	<u>′</u> 1		M.I.
Nappier		Den	lea				2
Residential Street Address	City	Dell	136		State	Zip Code	<u> </u>
110 Westerly Ter	Hartford	ď			CT	06105-	1117
Principal Occupation Retired		Name o	of Employer ed		<u>. </u>	<u>, t</u>	
dependent child of a lobbyist? municipality does co	excess of \$400 to a ca ontributor or business at more than \$5,000?	he/she is			Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a princip If yes, indicate which branches of government contract is with:	1 branch or	r or prosp xecutive		✓ No			\$100.00
Method of contribution: Cash Personal Check ✓ Credit/Debit Card Payroll Ded	luction Money Ord	der	Date Received 03/09/2023	Aggregate contributions \$100.00	1		

\$450.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 26 of 70

NAME OF COMMITTEE (Provide Complete Name as I	egistered with Filing Reposi	itory)	TYPE OF REPORT			48 25 24
Sierra for Treasurer 2023			April 10 filing			
A. Total Contributions from Small Contributors -	Received this Period O	NLY				
(See instructions for definition of Small Contributor)		Subtotal Section A	Š.			\$0.00
	B. Itemized Contributi	ions from Individuals		V (6) (6) (7)		
Last Name		First				M.I.
Berry		Evelyn				
Residential Street Address	City		 	State	Zip Code	!
665 Saratoga Rd, Apt 342	Gansev	roort		NY	12831-1	683
Principal Occupation		Name of Employer				
Cinsultant		Self Employed				
dependent child of a lobbyist? Line municipal	tion is in excess of \$400 to a car ity does contributor or business l ity valued at more than \$5,000?			Amoun	t of Conti	ribution
arrant removed in Continu Y 19	a principal of a state contractor	or prospective state contracto	r? Yes			\$250.00
	eate which branch or government the Ex	ecutiveLegisl	√No			Ψ200.00
Method of contribution:	ayroll Deduction Money Ord	Date Received er 03/10/2023	Aggregate contributions \$250.00			
Last Name		First	<u> </u>	L		M.I.
Claudio-Marrero		Ana				
Residential Street Address	City	L		State	Zip Code	L
59 Chipper Dr	East Ha	artford		СТ	06108-2	2708
Principal Occupation Retired	!	Name of Employer Retired				
dependent child of a lobbyist? Lane municipal	tion is in excess of \$400 to a car ity does contributor or business I ity valued at more than \$5,000?			Amoun	t of Conti	ribution
event reported in Section L1?	a principal of a state contractor cate which branch or	or prospective state contractor	1 es			\$150.00
	government the	ecutiveLegisl	ative No			
Method of contribution: Cash Personal Check Credit/Debit Card Personal Check Credit/Debit Card Personal Check Personal Check	ayroll Deduction Money Ord	Date Received 03/10/2023	Aggregate contributions \$150,00			
Last Name		First				M.I.
HUNTER		Непгу				
Residential Street Address	City			State	Zip Code	1044
387 Sea Cliff St	Islip Te			NY	11752-1	1211
Principal Occupation President		Name of Employer Zeke Success, LLc				
dependent child of a lobbyist? municipal	tion is in excess of \$400 to a can ity does contributor or business i ity valued at more than \$5,000?			Amoun	it of Conti	ribution
event reported in Section L1?	a principal of a state contractor cate which branch or	or prospective state contracto	r? ☐Yes ☑No			\$250.00
If yes, list Event # branches of contract is w	government the Ex	ecutive Legisl	ative			
Method of contribution: ☐ Cash ☐ Personal Check ☑ Credit/Debit Card	ayroll Deduction Money Ord	Date Received 03/11/2023	Aggregate contributions \$250.00			
		·—·				

\$650.0	SUBTOTAL Section B - This Page
\$26,696.0	TOTAL of Section B Pages.
\$26,696.0	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 27 of 70

NAME OF COMMITTEE (Provide Complete	e Name as Registered with Fi	ling Reposit	tory)		TYPE OF REPORT		- G - G - G - G	(0) 07. Su
Sierra for Treasurer 2023	- W ₁₉		<u> </u>		April 10 filing	<u> </u>		
A. Total Contributions from Small Cont (See instructions for definition of Small Contri		Period Of		ubtotal Section /			,	\$0.00
	B. Itemized C	ontributio	ons fro	m Individuals				
Last Name			First					M.I.
Perez			Jean	ette				
Residential Street Address		City		<u></u>		State	Zip Code	
60 Division Ave, Apt 24D		Brooklyn				NY	11249-6	3614
Principal Occupation Patient Registration Associate				[·] Employer rooklyn Hospite	i			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business h				Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Yes No	Is contributor a principal of a state If yes, indicate which branch of branches of government the contract is with:	_	or prospe	ctive state contractor	∐ 1es ✓ No			\$25.00
Method of contribution: ☐ Cash Personal Check ✓ Credit/Debit (Money Orde	1	Date Received 03/11/2023	Aggregate contributions \$25.00			
Last Name			First					M.I.
Padua			Osca	г				
Residential Street Address		City				State	Zip Code	
65 Oak St		Southing	gton			СТ	06489-3	3274
Principal Occupation Educator			Name of Princip	Employer pal				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business h				Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state		or prospe	ctive state contracto	r?			\$100.0
If yes, list Event#	branches of government the contract is with:	☐ Exe	cutive	Legisl	ative LY_110			
Method of contribution: ☐ Cash ☐ Personal Check ☑ Credit/Debit C	Card Payroll Deduction	Money Orde		Date Received 03/11/2023	Aggregate contributions \$100.00	1		
Last Name	·		First					M.I.
Segarra			Pedro	<u> </u>				
Residential Street Address	···	City				State	Zip Code	0000
1 Gold St		Hartford				СТ	06103-2	2900
Principal Occupation Attorney			State of	Employer of CT				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more th	or business h				Amoui	ıt of Cont	ribution
Is this contribution associated with an event reported in Section L17 Yes V No If yes, list Event #	Is contributor a principal of a stat If yes, indicate which branch or branches of government the contract is with:	r	or prospe	ctive state contracto	∐ res ☑No			\$250.0
Method of contribution: Cash Personal Check Credit/Debit			T:	Date Received	Aggregate contributions	1		

\$375.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 28 of 70

NAME OF COMMITTEE (Provi	de Comple	ete Name as Registere	d with Fit	ling Reposit	tory)		TYPE OF REPORT			
Sierra for Treasurer 2023				. 			April 10 filing			
A. Total Contributions from S (See instructions for definition of S	6. 01 N N N N N N N N N N N N N N N N N N	460.5650GCVGG-65059410-6-460	ved this	Period Ol		Subtotal Section				\$0.00
		B. Ite	mized C	ontributi	ons fr	om Individuals			1. S4 1.34 S414	((\$5 ab (ab
Last Name	·				First					M,I.
Hunter					Jona	athan				
Residential Street Address				City				State	Zip Code	
4 Cedar Dr				Cromwe				CT	06416-2	2617
Principal Occupation Carpenter				,		of Employer ock Constructio	n company Inc			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No		ontributor (or business h			executive officer of a a contract with said No	Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	∐Yes ☑No	Is contributor a princip If yes, indicate which branches of governm contract is with:	h branch or		or prosp	F	∐ res ✓No			\$250.00
Method of contribution: Cash Personal Check	Credit/Debi		fuction [Money Orde	ж	Date Received 03/12/2023	Aggregate contributions \$250.00			
Last Name					First				: <u>.</u>	M.I.
Cruz-Aponte					Mari	lynn				
Residential Street Address				City				State	Zip Code	
163 Bradford Walk				New Brit				СТ	06053-	1073
Principal Occupation Retired				1	Name of Retire	of Employer OCI				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No		ontributor (or business h		committee for a chief associated with have Yes	executive officer of a a contract with said	Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?	∐Yes ✓ No	Is contributor a princip If yes, indicate which branches of government	h branch or		or prosp	ective state contracto	¹? ☐Yes ✓No			\$250.00
If yes, list Event#		contract is with:		Exe	ecutive		ative			
Method of contribution: Cash Personal Check	Credit/Debi	t Card Payroll Dec	luction [Money Orde	er _	Date Received 03/12/2023	Aggregate contributions \$250.00			
Last Name					First					M.I.
Gandara					Mari	lda				<u> </u>
Residential Street Address				City				State	Zip Code	4400
155 Scarborough St				Hartford		CF 1		СТ	06105-	1108
Principal Occupation Retired				1	Retire	of Employer Ad				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	municipality does c	ontributor of at more th	or business h nan \$5,000?	e/she is	associated with have	executive officer of a a contract with said	Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L17	Yes	Is contributor a princip			or prosp	ective state contracto	r? Yes			\$250.00
	Νo	If yes, indicate which branches of governm contract is with:			ecutive	Legis	ative No			Ψ
Method of contribution: Cash Personal Check	Credit/Debi	t Card Payroll Dec	luction	Money Orde	er e	Date Received 03/12/2023	Aggregate contributions \$250.00			
				-					_	

\$750.0	SUBTOTAL Section B - This Page
\$26,696.0	TOTAL of Section B Pages
\$26,696.0	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

SEEC 1	FORM	20
Revised	Innuary	2015

Page	29	of	70

NAME OF COMMITTEE (Provide C	Complete Name as Registered with Fil	ing Reposi	tory)		TYPE OF REPORT			
Sierra for Treasurer 2023		<u> </u>			April 10 filing			
A. Total Contributions from Sma	all Contributors - Received this	Period O	NLY					
(See instructions for definition of Smal	ll Contributor)			Subtotal Section A			\$(0.00
	B. Itemized C	ontributi	ons f	rom Individuals				
Last Name			First				M.I	Ī.
Velasquez			Luis	3				
Residential Street Address		City	Ь			State	Zip Code	
1077 Silas Deane Hwy		Wethers	sfield			CT	06109-4229	}
Principal Occupation				of Employer				
Self Employed, Real Estate Brok	ker	Ì	Self	Employed				
dominidant abild of a labbraist?	Yes If contribution is in excess of some individual to the individual to the individual at more that the individual at more that is the individual at more than individual at mor	or business b				Amoun	t of Contribu	tion
Is this contribution associated with an	Yes Is contributor a principal of a state	contractor (or pros	pective state contractor	? Yes		ድ ላ በ.	n 00
cvent reported in Section L1? If yes, list Event #	If ves, indicate which branch or		ecutiv	e []Legisla	✓No		Φ10	0.00
Method of contribution: Cash Personal Check Credi		Money Orde	er	Date Received 03/12/2023	Aggregate contributions \$100.00			
Last Name			First	·		·	M,I	Ī.
Anderson			Arti	nur				
Residential Street Address		City	J			State	Zip Code	
221 Trumbuli St, Apt 2705)	Hartford	i			CT	06103-1526	i
Principal Occupation		,		of Employer				
Executive		ļ	lmag	jineers, Ilc				
4	Yes If contribution is in excess of a municipality does contributor municipality valued at more the	or business h				Amoun	t of Contribu	tion
Is this contribution associated with an	Yes Is contributor a principal of a state	contractor	or pros	pective state contractor	7 Yes] [¢os.	0.00
event reported in Section L17	No If yes, indicate which branch or branches of government the	_		_	✓ No	1	Φ ΖΟ'	U.UC
If yes, list Event #	contract is with:	Exe	ecutiv	eLegisla	ative			
Method of contribution: ☐ Cash ☐ Personal Check ☑ Credi	dit/Debit Card Payroll Deduction	Money Orde	er	Date Received 03/13/2023	Aggregate contributions \$250.00			
Last Name			First		· · · ·		M.)	I.
JARVIS			MA	RCUS				
Residential Street Address		City				State	Zip Code	
55 Hartland St		Hartford				СТ	06112-1131	i
Principal Occupation Carpenter				of Employer mployed				
do-und-ut-hild of a labbrial?	Yes If contribution is in excess of smunicipality does contributor municipality valued at more the	or business h				Amoun	t of Contribu	tion
event reported in Section L17	Yes Is contributor a principal of a state If yes, indicate which branch or branches of government the		or pros	•	∐ res [✓] No		\$2 5	50,00
If yes, list Event#	contract is with:	Ex	ecutiv	eLegisla	ative			
Method of contribution: ☐ Cash Personal Check ✓ Cred	dit/Debit Card Payroll Deduction	Money Orde	er	Date Received 03/14/2023	Aggregate contributions \$250.00			
						_		

\$600.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 30 of 70

NAME OF COMMITTEE (Provide Complete Name as Registered with	h Filing Repos	sitory)		TYPE OF REPORT			
Sierra for Treasurer 2023		<u> </u>		April 10 filing			
A. Total Contributions from Small Contributors - Received the See instructions for definition of Small Contributor)	his Period C	NLY	Subtotal Section 2				\$0.00
B. Itemize	d Contribut	ions f	rom Individuals		n (\$ 19 1)		vanje diskrija
Last Name		First					M,L
Miranda		Mai	rlyn			_	
Residential Street Address	City				State	Zip Code	
1022 Boulevard	West H				CT	06119-	1801
Principal Occupation Broker Realtor			of Employer ealty, LLC				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess municipality does contribution in the municipality valued at mo	utor or business	hc/she i			Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of a ff yes, indicate which branches of government the contract is with:	ch or	r or pros	_	∐ res ☑No			\$100.00
Method of contribution: Cash Personal Check ✓ Credit/Debit Card Payroll Deduction	Money Ord	der	Date Received 03/14/2023	Aggregate contributions \$100.00	1		
Last Name		First		·			M.I.
Paramo		Cor	nstanza				
Residential Street Address	City				State	Zip Code	
2 Hilltop Dr	Bloomf				СТ	06002-	1626
Principal Occupation Librarian			of Employer mfield Board of I	Ed			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess municipality does contribution in excess municipality valued at more municipality valued at more dependent child of a lobbyist?	utor or business	he/she i			Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Yes Is contributor a principal of a ffyes, indicate which branches of government the branches of government the	ch or			∐ Fes √No			\$50.00
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction		der	Date Received 03/14/2023	Aggregate contributions	1		
Last Name		First					M.I.
Jones		Kar	1				
Residential Street Address 45 Shingle Mill Rd	City Bristol	_,			State CT	Zip Code 06010-8	8039
Principal Occupation Analyst ugh		Name Aligh	of Employer nt				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess municipality does contribution in the municipality valued at more than the contribution is in excess municipality does contribution.	utor or business	he/she i			Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Yes, indicate which branches of government the	ch or	r or pros	pective state contracto	rr?			\$250.00
If yes, list Event # branches of government the contract is with:	, <u>П</u> в	xecutiv	eLegis	lative			
				Aggregate contributions			

\$400.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 31

αf

70

NAME OF COMMITTEE (Provide (Complete Name as Registered with Fil	ing Reposi	itory)		TYPE OF REPORT			
Sierra for Treasurer 2023					April 10 filing			
A. Total Contributions from Sma (See instructions for definition of Smal		Period O		Subtotal Section	1A			\$0.00
	B. Itemized Co	ontributi	ions fr	om Individual	a	(1) (4) (4) (2) (4) (4)		
Last Name			First					M.I.
Okun			Mar	cAnthony				
Residential Street Address		City	_			State	Zip Code	2240
21 Clarke Rd		Tolland		of Employer		СТ	06084-3	5210
Principal Occupation Manager				Employed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of \$\frac{1}{2}\$ Mo municipality does contributor of municipality valued at more the	or business l				Amoui	nt of Cont	ribution
event reported in Section L17	Yes Is contributor a principal of a state If yes, indicate which branch or branches of government the contract is with:		or prosp	_	tor?			\$100.00
Method of contribution: Cash Personal Check ✓ Cred		Money Ord	ler	Date Received 03/14/2023	Aggregate contributions \$100.00			
Last Name			First					M.I.
Johnson			Сур	суопе				
Residential Street Address		City			<u> </u>	State	Zip Code	
20 Hansom Hill Rd		Windso			<u> </u>	СТ	06095-	1805
Principal Occupation Engineering			TRC	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of a municipality does contributor of municipality valued at more the	or business l	he/she is			Amou	nt of Cont	ribution
event reported in Section 1.17 —	Yes Is contributor a principal of a state If yes, indicate which branch or branches of government the contract is with:	-	or prosp	_	otor?			\$25.00
Method of contribution: Cash Personal Check Cred			T	Date Received 03/14/2023	Aggregate contributions			
Last Name		-	First	OUT WEDE		1		M.I.
Deodat			Roc	pnarine				
Residential Street Address		City				State	Zip Code	I
67 Carson Ave		Wether	sfield			СТ	06109-	1507
Principal Occupation Carpenter				of Employer enters union lo	ocal326			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of \$ ✓ No municipality does contributor of municipality valued at more the	or business	he/she is			Amou	nt of Cont	ribution
event reported in Section L1?	Yes Is contributor a principal of a state If yes, indicate which branch or branches of government the contract is with:		or pros		ctor? Yes VNo			\$150.00
Method of contribution: ☐ Cash ☐ Personal Check ✓ Cree		Молеу Ord	ler	Date Received 03/14/2023	Aggregate contributions \$150.00			
					<u></u>	1	4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

SUBTOTAL Section B This Page	\$275.00
TOTAL of Section B Pages	\$26,696.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$26,696.00

Page 32 of 70

NAME OF COMMITTEE (Provide	e Comple	te Name as I	Registered witi	h Filing Re	pository	y)		TYPE OF REPORT	10 (A) (A)	(18 mg/s 18 mg/s 18 mg/s	
Sierra for Treasurer 2023				· · · · · · · · · · · · · · · · · · ·			·	April 10 filing		<u> </u>	
A. Total Contributions from Sn (See instructions for definition of Sn		en instrumentario	- Received t	his Perioc	IONL		btotal Section A				\$0.00
a garage to the contract of			B. Itemize	d Contrib	utions	s fron	ı Individuals		V 9 4 5		
Last Name			<u> </u>		Fi	irst		· · · · · · · · · · · · · · · · · · ·			M.I.
Avallone					V	incen	ıt				
Residential Street Address				City				 	State	Zip Code	
1 Ashford Ct				Wall	ingford				СТ	06492-	5207
Principal Occupation					- 1		imployer				
Retired					Re	etired					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓No	municipa		utor or busin	ess he/sh			executive officer of a a contract with said No	Атош	nt of Cont	ribution
Is this contribution associated with an	Yes				ctor or pr	rospect	ive state contractor	? Yes			\$100.00
event reported in Section L1?	√ No		icate which bran f government the					✓ No			Ψ100.00
17 yes, list Event #]	contract is			Execut		Legisla	ative	_		
Method of contribution: Cash Personal Check C	redit/Debit	Card Di	Payroll Deduction	ı Money	Order		ate Received	Aggregate contribution \$100.0			
Last Name						irst	3/14/2023	Ψ100.0	<u> </u>		M.I.
ł					j		_				141.1.
Martinez				1 24.	Jê	aionie	} 		1 5	I et e t	L
Residential Street Address 20 Hansom Hill Rd				City Wind	tear				State	Zip Code 06095-	1805
Principal Occupation				1 ******		me of F	imployer		10,	1 00000	.000
Nurse					1		ployed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	municipa		utor or busin	ess he/sh			executive officer of a a contract with said No	Атош	nt of Cont	ribution
Is this contribution associated with an	Yes				ctor or pr	rospect	ive state contractor	? Yes			\$20.00
event reported in Section L1? [Wyes, list Event #	√No		icate which bran f government the		Execut	tive	Legisla	✓No ative	ļ		ψ20.00
Method of contribution:			Willia.		<u>'</u>	De	ate Received	Aggregate contribution	s		
Cash Personal Check C	redit/Debit	t Card 🔲 I	Payroll Deduction	а Мопсу	Order	03	3/14/2023	\$20.0	0		
Last Name					Fi	irst					M.I.
Johnson					R	Romai	ne				
Residential Street Address	<u></u>			City					State	Zip Code	
20 Hansom Hill Rd				Wind					СТ	06095-	1805
Principal Occupation Machinist							imployer Aerospace U	JSA			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	municipa		utor or busin	ess he/sh			executive officer of a a contract with said	Amour	nt of Cont	ribution
Is this contribution associated with an	Yes		-		ctor or pr	rospect	ive state contractor	7 Yes	1		\$20.00
event reported in Section L17	√No		icate which bran f government the	e				✓ No	1		Ψ20.00
If yes, list Event #		contract is			Execut	tive	Legisl	ative	_		
Method of contribution: Cash Personal Check ✓ C	redit/Debi	t Card]	Payroll Deduction	n Money	Order		ate Received 3/14/2023	Aggregate contribution \$20.0	1		

\$140.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 33 of 70

NAME OF COMMITTEE (Provide Co.	mplete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT			
Sierra for Treasurer 2023		<u></u>		<u> </u>	April 10 filing			
A. Total Contributions from Small (See instructions for definition of Small (Period O	\$ 50 CO (F)	Subtotal Section A				\$0.00
		ontribut	ions fr	om Individuals	1	11 (27 E)		
Last Name			First					M.I.
Hernandez			Ram	on				
Residential Street Address		City				State	Zip Code	
7 Parents Way		Bloomfi	ield			СТ	06002-1	927
Principal Occupation Administrator			Name o	f Employer J		***		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	If yes, indicate which branch or	r	or prospe	ective state contractor	∐ Fes ✓ No			\$200.00
Method of contribution: Cash Personal Check Credit/		Money Ord	. (Date Received 03/15/2023	Aggregate contributions \$200.00			
Last Name			First					M.I.
Medina			Davi	d				
Residential Street Address		City				State	Zip Code	
4 Skytop Dr, Apt F		Croton	On Hu	dson		NY	10520-1	1376
Principal Occupation Retired			Name o Retire	of Employer ed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of municipality does contributor municipality valued at more the	or business	hc/she is			Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	If ves. indicate which branch or	r	or prospe	ective state contractor	∐ res ✓ No			\$100.00
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/		Money Ord		Date Received 03/15/2023	Aggregate contributions \$100.00			1
Last Name			First					M.J.
Nadal			Jacq	Jueline				
Residential Street Address		City	.1			State	Zip Code	1007
370 Freeman St		Hartford	_	Ch 1		СТ	06106-4	1221
Principal Occupation Banker			BOA	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of municipality does contributor municipality valued at more that	or business	hc/she is			Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1?	If ves, indicate which branch o		or prosp	ective state contractor	?			\$100.00
If yes, list Event #	o branches of government the contract is with:	Ex	cecutive	Legisla	ative			
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit	Debit Card Payroll Deduction	Мопеу Ого	ler	Date Received 03/16/2023	Aggregate contributions \$100.00	\		

\$400.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 34 of 70

NAME OF COMMITTEE (Provide Complete Name as Registered with	Filing Repos	itory)		TYPE OF REPORT		85 (A) (B) (B)	
Sierra for Treasurer 2023			· · · · · · · · · · · · · · · · · · ·	April 10 filing	<u> </u>		
A. Total Contributions from Small Contributors - Received thi	s Period O	NLY					
(See instructions for definition of Small Contributor)			Subtotal Section /				\$0.00
B. Itemized	Contributi	ions fr	om Individuals		45.85.8	646 de 1824	
Last Name	,	First					M.I.
Healy		Chri	stopher				
Residential Street Address	City				State	Zip Code	
27 Dorchester Rd	Wether				CT	06109-23	320
Principal Occupation Executive Director	!	ł	of Employer atholic Conferer	ice			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? No If contribution is in excess of municipality does contribute municipality valued at more	or or business l				Amour	nt of Contri	ibution
Is this contribution associated with an event reported in Section L1? Yes If yes, indicate which branch branches of government the		or prosp	ective state contracto	r?		4	\$250.00
If yes, list Event # 032923a	∐Ex	ecutive	Legisl	ative VINO			
Method of contribution: ☐ Cash ☐ Personal Check ✔ Credit/Debit Card ☐ Payroll Deduction ☐	Money Ord	ler	Date Received 03/16/2023	Aggregate contributions \$250.00			
Last Name	. <u></u> .	First		<u> </u>	<u></u>		M,I.
Soto		Glad	dys				
Residential Street Address	City				State	Zip Code	
274 Broadway	Milford				СТ	06460-58	824
Principal Occupation Administrator			of Employer et Shores Adult	Day Health Center			
Is contributor a lobbyist, spouse, or	or or business !				Amour	nt of Contri	ibution
Is this contribution associated with an event reported in Section L1? Yes If yes, indicate which branch		or prosp	pective state contracto			9	\$250.00
If yes, list Event # V No branches of government the contract is with:	Ex	ecutive					
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Debit Card ☐ Payroll Deduction [Money Ord	ler	Date Received 03/16/2023	Aggregate contributions \$250.00			
Last Name		First					M.I.
Dave		Smi	ta				
Residential Street Address	City				State	Zip Code	040
192 Brookside Rd	Newing		6m 1		CT	06111-1	310
Principal Occupation Homemaker		1	of Employer emaker				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess a municipality does contribute municipality valued at more	or or business l	he/she is			Amou	nt of Contr	ibution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a section L1?		or prost	ective state contracto	t? Yes		9	\$100.00
If yes, list Event # If yes, list Event # If yes, indicate which branch branches of government the contract is with:	_	ecutive	eLegisl	ative No			
Method of contribution: Cash Personal Check ✓ Credit/Debit Card Payroll Deduction	Money Ord	ier	Date Received 03/16/2023	Aggregate contributions \$100.00),		
						_	

\$600.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

SEEC FORM 20	
Revised January 2015	

Page	35	of	70

NAME OF COMMITTEE (Provi	de Comple	ete Name as Registered with F	iling Repos	itory)	- 60 EU 60 EU 62 EU	TYPE OF REPORT			
Sierra for Treasurer 2023			<u> </u>			April 10 filing		<u> </u>	
A. Total Contributions from S	mall Co	ntributors - Received this	Period C	NLY	6 5 3 45 5				
(See instructions for definition of S	mall Cont	tributor)			Subtotal Section	A			\$0.00
		B. Itemized (Contribut	ions fr	om Individuals				100000000000000000000000000000000000000
Last Name		The state of the s		First			***********		M,I.
King				Mich	nael				
Residential Street Address			City	1			State	Zip Code	
7141 E Rancho Vista Dr, Unit	7004		Scottsd	lale			AZ	85251-	1489
Principal Occupation				Name o	of Employer				
Filmmaker				Self E	Employed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more t	or business	he/she is			Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1?	∐Yes ✓No	Is contributor a principal of a sta		or prosp	ective state contracto	or? ☐ Yes ☑ No			\$250.00
If yes, list Event #	A I 140	branches of government the contract is with:	Ex	ecutive	Legis	lative V 100			
Method of contribution: Cash Personal Check	Credit/Debi	t Card Payroll Deduction	Money Ord	ler	Date Received 03/17/2023	Aggregate contributions \$250.00)		
Last Name				First	······································				M.I.
Johnson				Mica	ah				
Residential Street Address			City				State	Zip Code	<u> </u>
20 Hansom Hill Rd			Windso)Г			СТ	06095-	1805
Principal Occupation					of Employer			* '/	
Sales				Raym	nour and Flanig	an			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more t	or business	he/she is			Amour	nt of Cont	ribution
Is this contribution associated with an	Yes	Is contributor a principal of a sta	te contractor	or prosp	ective state contracto	or? Yes	1		\$30.00
event reported in Section L1? If yes, list Event #	✓No	If yes, indicate which branch of branches of government the		cecutive	Legis				φου.υι
Method of contribution:		contract is with:			Date Received	Aggregate contributions	1		
Cash Personal Check	Credit/Debi	t Card Payroll Deduction	Money Ord	ler	03/16/2023	\$30.00	1		
Last Name				First	 _		- !		M,I.
Moore				Patr	ick				
Residential Street Address			City				State	Zip Code	4
5 Hampton Pi			Avon				СТ	06001~	4554
Principal Occupation				i .	of Employer				
Owner				Hillto	p Apiaries				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more t	or business	he/she is			Amou	nt of Cont	ribution
Is this contribution associated with an	Yes	Is contributor a principal of a sta	te contractor	or prosp	ective state contracte	or? Yes	1		ዕ ደለ ለ4
event reported in Section L1?	☑ No	If yes, indicate which branch o	or						\$50.00
If yes, list Event #	TA LIAO	branches of government the contract is with:	☐]Ex	ecutive	Legis	lative			
Method of contribution:				$\overline{}$	Date Received	Aggregate contributions	1		
Cash Personal Check	Credit/Debi	t Card Payroll Deduction	Money Ord	ler (03/17/2023	\$50.00	4		

\$330.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 36 of 70

NAME OF COMMITTEE (Prov	ide Comple	ete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT				
Sierra for Treasurer 2023						April 10 filing		·		
A. Total Contributions from S	Small Co	ntributors - Received this	Period O	NLY	en sen nen i ne describer d'en					
See instructions for definition of S	Small Coni	ributor)			Subtotal Section A	Å			\$0.00	
		B. Itemized C	ontribut	ions fr	om Individuals			100 No. 100 No		
Last Name				First					M.I.	
Wasyl				Ama	anda				1	
Residential Street Address			City				State	Zip Code	<u> </u>	
175 Freeman St			Hartford	d			СТ	06114-2	2722	
Principal Occupation			·	Name	of Employer					
Student				Studi	ent					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more th	or business?				Amoui	nt of Cont	ribution	
Is this contribution associated with an event reported in Section L.1?	☐Yes ✓No	Is contributor a principal of a stat If yes, indicate which branch or branches of government the	r			∐ 1es ☑No			\$120.00	
If yes, list Event #		contract is with:	Ex	ecutive		ative]			
Method of contribution: Cash Personal Check	Credit/Debi	t Card Payroll Deduction	Money Ord	ler	Date Received 03/17/2023	Aggregate contributions \$120.00	,			
Last Name				First		· · · · · · · · · · · · · · · · · · ·			M.I.	
Perez				Adri	ianna				ł	
Residential Street Address	-		City				State	Zip Code		
1212 Main St, Apt 348			Hartford				СТ	06103-	1267	
Principal Occupation Photographer				l .	of Employer employed					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓No	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amour	nt of Cont	ribution	
Is this contribution associated with an event reported in Section L1? If yes, list Event #	∐Yes ✓ No	Is contributor a principal of a stat If yes, indicate which branch o branches of government the contract is with:	r	or prosp		∐ res ☑No	-		\$50.00	
Method of contribution: Cash Porsonal Check	Credit/Debi	t Card Payroll Deduction	Money Ord	ler	Date Received 03/17/2023	Aggregate contributions \$150.00	1			
Last Name				First					M.I.	
Perez				Adri	ianna				Ì	
Residential Street Address		· · · · · · · · · · · · · · · · · · ·	City				State	Zip Code	·	
1212 Main St, Apt 348			Hartford	d			CT	06103-	1267	
Principal Occupation Photographer				1	of Employer employed					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the second	or business	he/she is			Amour	nt of Cont	ribution	
Is this contribution associated with an event reported in Section L17 If yes, list Event #	☐ Yes	Is contributor a principal of a state If yes, indicate which branch o branches of government the contract is with:	r	or prosp		∐ res ☑No			\$100,00	
Method of contribution:		COMMENT IS AIM!			Date Received	Aggregate contributions	1			

\$270.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 37 of

NAME OF COMMITTEE (Provide Co	mplete Name as Registered with F	iling Repos	itory)		TYPE OF REPORT	is in the		
Sierra for Treasurer 2023					April 10 filing			
A. Total Contributions from Small (See instructions for definition of Small		Period O		Subtotal Section A				\$0.00
annsanth a seasan dha se	B. Itemized (Contributi	ions fr	om Individuals	755 C 47 G 58 G 65 G 65 G			10 ZU 13 13
Last Name			First					M.I.
Williams			Verd	onica				
Residential Street Address		City				State	Zip Code	
166 Homestead St		Manche	ester			CT	06042-3	057
Principal Occupation Program Assistant				of Employer of Hartford-BOE				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of municipality does contributed municipality valued at more	r or business l	he/she is			Атоп	ıt of Conti	ribution
Is this contribution associated with an event reported in Section L1? Yes, list Event #	If ves. indicate which branch of	or	or prosp		∐ res √No			\$20.00
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credite		Money Ord	ler	Date Received 03/17/2023	Aggregate contributions \$20.00			
Last Name			First		<u> </u>			M.I.
Gordon			Zan	dralyn				
Residential Street Address 11 Marble Faun Ln		City Windso	or	-		State CT	Zip Code 06095-4	766
Principal Occupation Principal			1	of Employer ord Public Schoo	ols			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of municipality does contribute municipality valued at more	r or business l	he/she is			Amour	ıt of Conti	ribution
Is this contribution associated with an event reported in Section L1?	If yes, indicate which branch of		or prosp	ective state contractor	? ☐Yes ✓ No			\$30.00
If yes, list Event #	o branches of government the contract is with:	Ex	ecutive		ative			
Method of contribution: ☐ Cash Personal Check ☐ Credit	Debit Card Payroll Deduction	Money Ord	ler	Date Received 03/17/2023	Aggregate contributions \$30.00			
Last Name			First			<u> </u>		M.I.
Sierra			Jose	•				(
Residential Street Address		City				State	Zip Code	
225 New London Rd		Colche				CT	06415-1	1823
Principal Occupation Manager			Name i Napa	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes If contribution is in excess of municipality does contribute municipality valued at more	r or business	he/she is			Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	o If yes, indicate which branch of branches of government the	or	or prosp		∐ res ✓No			\$150.00
Method of contribution:	contract is with:			Date Received	Aggregate contributions	1		
Cash Personal Check Credit	Debit Card Payroll Deduction	Money Ord	ler	03/18/2023	\$150.00	1		

\$200.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 38 of 70

NAME OF COMMITTEE (Providence)	de Comple	ete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT			
Sierra for Treasurer 2023	<u></u>					April 10 filing			
A. Total Contributions from S (See instructions for definition of S	55 M 5 M 5 M		Period O	1000	Subtotal Section	A			\$0.00
		B. Itemized C	ontribut	ions fr	om Individuals		4,0,00	VI (12 125 ASS A	
Last Name				First					M.I.
Neary				Jan	es				
Residential Street Address			City				State	Zip Code	
105 Fairway Dr		 	Portlan			 	CT	06480-1	16/4
Principal Occupation IT Services				1	of Employer Game Strategy				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more to	or business	he/she is			Amour	nt of Cont	ribution
event rehotted in acciton 1711	✓ Yes	Is contributor a principal of a state If yes, indicate which branch of branches of government the	t			∐1 tes ☑No			\$250.00
If yes, list Event # 032923a Method of contribution: Cash Personal Check		contract is with:	Money Ord	ler	Date Received 03/18/2023	lative Aggregate contributions \$250.00	-		
Last Name				First	00,10,2020	Ψ200.00	<u>'</u>		M.I.
Garnes				Geo	orge				
Residential Street Address			City	J			State	Zip Code	
197 Longvue Dr			Wether	sfield			CT	06109-3	3350
Principal Occupation Cook				Name Cook	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more t	or business	he/she is			Amoui	ot of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Yes	Is contributor a principal of a state If yes, indicate which branch o		or prosp	pective state contracto	[_] i es			\$100.00
If yes, list Event#	☑No	branches of government the contract is with:	В×	ecutive	Legis	lative No			
Method of contribution: Cash Personal Check (1)	Credit/Debi	t Card Payroll Deduction	Money Ord	ier	Date Received 03/18/2023	Aggregate contributions \$100.00	1		
Last Name				First					M.I.
Sparkes				Hor	atio				
Residential Street Address			Cîty	-			State	Zip Code	0454
78 Wildwood Dr			Dix Hills				NY	11746-6	0.10.1
Principal Occupation Executive				Retir	of Employer ed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more t	or business	he/she í:			Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	∐Yes ☑No	Is contributor a principal of a state of the	r	or prosp		∐ res [✓] No			\$250.00
L		contract is with:	LJex			Aggregate contributions	-		
Method of contribution: Cash Personal Check	Credit/Debi	t Card Payroll Deduction	Money Ord	ler	Date Received 03/19/2023	Aggregate contributions \$250.00			

\$600.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page

39

of 70

NAME OF COMMITTEE (Provide Complete Name as Registered w	ith Filing Repos	itory)		TYPE OF REPORT		-11 -55 (99)(99) -57 (91)(91)	220 SIMBARA KANASA SA
Sierra for Treasurer 2023				April 10 filing			
A. Total Contributions from Small Contributors - Received	this Period O	NLY					
(See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
B. Itemíz	ed Contributi	ions fi	om Individuals		(0): (52) 50		
Last Name	H. 1,000	First					M.I.
Alverio		Yvo	nne				!
Residential Street Address	City			<u></u>	State	Zip Code	<u> </u>
21674 Tall Palm Cir	Boca R	aton			FL	33433-3	3100
Principal Occupation		1 .	of Employer				
Consultant		Self					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? VNo If contribution is in execution in the contribution in the contribution is in execution in the contribution in the contribution is in execution in the contribution in the contribution is in execution in the contribution in the contribution in the contribution is in execution in the contribution in the contribution is in execution in the contribution in the contribution in the contribution is in execution in the contribution is in execution in the contribution in the contribu	ibutor or business l nore than \$5,000?	he/she i	s associated with have	a contract with said No	Amoun	t of Conti	ribution
Is this contribution associated with an event reported in Section L1? Yes If yes, indicate which by		or pros	pective state contractor	Yes Yes			\$25.00
If yes, list Event # No branches of government to contract is with:	he 🚐	ecutive	Legisla	ativeNo			
Method of contribution: Cash Personal Check ✓ Credit/Debit Card Payroll Deduction	on Money Ord	ler	Date Received 03/19/2023	Aggregate contributions \$25.00	1		
Last Name		First	03/19/2023	Ψ20.00	<u></u>		M.I.
Reyes-Dawes		Wa	nda				Wi.i.
Residential Street Address	City				State	Zip Code	
44 Jeffrey Alan Dr	Manche			<u> </u>	СТ	06042-1	704
Principal Occupation Counselor		1	of Employer chester Commun	ity College			
Is contributor a lobbyist, spouse, or Ves If contribution is in execution dependent child of a lobbyist? If no municipality does contributed at municipality valued at municipality valued at municipality.	ibutor or business i	hc/she i			Amour	t of Cont	ribution
Is this contribution associated with an Yes Is contributor a principal of	f a state contractor	or pros	pective state contractor	Yes]		\$25.00
If yes, indicate which branches of government t	he	ecutive	e [Legisla	✓ No			Ψ23.00
Method of contribution;			Date Received	Aggregate contributions	-		
Cash Personal Check V Credit/Debit Card Payroll Deducti	on Money Ord	ler	03/19/2023	\$25.00]		
Last Name		First			!		M.I.
mullins		lisa					1
Residential Street Address	City	ــــــــــــــــــــــــــــــــــــــ			State	Zip Code	<u> </u>
2241 Edgartown Ln SE	Smyrna	3			GA	30080-6	5501
Principal Occupation retired		Name Retir	of Employer ed			, , , , , , , , , , , , , , , , , , ,	
Is contributor a lobbyist, spouse, or Yes If contribution is in exc. dependent child of a lobbyist? No municipality valued at r	ibutor or business	he/she i	s associated with have	a contract with said	Amour	t of Cont	ribution
To application and a life and the second state and			Yes	No	-		
event reported in Section L1?		or bros	hoorise ande countielos	Yes			\$50.00
If yes, list Event # V No branches of government to contract is with:	he	cecutive	e [Legisl	ative			
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Debit Card ☐ Payroll Deducti	on Money Ord	ler	Date Received 03/20/2023	Aggregate contributions \$50.00	í		
							

\$100.00	SUBTOTAL Section 8 - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 40 of 70

NAME OF COMMITTEE (Prov Sierra for Treasurer 2023 A Total Contributions from	ervice consider to the section		2-7-1 2-1 2-1 1 1						
A Total Contributions from						April 10 filing		1 (1 mg/m 1 m 2 (2 mg/m	erchande and the shad.
(See instructions for definition of .		ntributors - Received this tributor)	Period O	NLY	Subtotal Section A				\$0.00
		B. Itemized C	ontribut	ions f	rom Individuals				1 68 85 65
Last Name		 		First	· · · · · · · · · · · · · · · · · · ·				M.I.
Ross				Tina	a				
Residential Street Address			City				State	Zip Code	
25 Skinner Rd			Vernon				CT	06066-2	2718
Principal Occupation					of Employer				
Administrative Assistant				UAW	1				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes No	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amour	ıt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	∐Yes ✓ No	Is contributor a principal of a stat If yes, indicate which branch or branches of government the		or pros		[] Yes			\$100.00
Method of contribution: ☐ Cash ☐ Personal Check ✓	Credit/Debi	contract is with:	Money Ord		Date Received 03/20/2023	Aggregate contributions \$100.00			
Last Name				First	·		·—	 	M.I.
Crandall				Mila	agros				
Residential Street Address			City	J		. 	State	Zip Code	
2907 Ivy Lake Ct			Lakelar	nd			FL	33811-2	2066
Principal Occupation Retired				Name Retir	of Employer ed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more that	or business				Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	☐Yes ✓No	Is contributor a principal of a stat If yes, indicate which branch or branches of government the	r	or pros	·	∐ 1es ✓lNo			\$100.00
Method of contribution: Cash Personal Check	Credit/Debi	contract is with:			Date Received 03/20/2023	Aggregate contributions \$100.00			
Last Name	<u>'</u>		<u> </u>	First		ψ100.00	<u> </u>		M.I.
Gersten				Kat					
Residential Street Address			City	Ital			State	Zip Code	<u> </u>
231 Farmington Ave			Farming	aton			CT	06032-	
Principal Occupation			L	_	of Employer		<u> </u>		
Artist	1 11	- 		<u> </u>	ce Dance Perforr				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	✓ Yes ☐ No	If contribution is in excess of municipality does contributor municipality valued at more th	or business				Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	∐Yes ✓ No	Is contributor a principal of a stat If yes, indicate which branch of branches of government the contract is with:	·	or pros	-	∐ 1es ✓No			\$250.00
Method of contribution:		COMPACT IS WITH:			Date Received	Aggregate contributions	1		
Cash Personal Check	Credit/Debi	t Card Payroll Deduction	Money Ord	ler	03/20/2023	\$250.00			

\$450.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 41 of 70

NAME OF COMMITTEE (Provide Complete Name as Registered with a	Filing Reposi	itory)		TYPE OF REPORT			51053-550366
Sierra for Treasurer 2023				April 10 filing			·—·—
A. Total Contributions from Small Contributors - Received thi (See instructions for definition of Small Contributor)	s Period O	NLY	Subtotal Section A				\$0,00
B. Itemized	Contributi	ions fi	rom Individuals			NO STATE	
Last Name		First		······································			M.I.
Plessy-Cloud		Nice	ole				
Residential Street Address	City	• • •	 		State	Zip Code	
86 Bloomfield Ave	Hartford	d			CT	06105-	1006
Principal Occupation Administrator		,	of Employer of Hartford				
Is contributor a lobbyist, spouse, or Ves If contribution is in excess of municipality does contribute municipality valued at more	or or business l				Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L17 Yes Is contributor a principal of a st If yes, indicate which branch If yes, indicate which branches of government the	or			∐ res ✓No			\$250.00
If yes, list Event # contract is with: Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	 _	ecutive ler	Date Received 03/20/2023	Aggregate contributions \$250.00			
Last Name	• • • • •	First			·		M.I.
Reginatto		Gin	a				}
Residential Street Address	City				State	Zip Code	
PO Box 1148	South V				СТ	06074-7	7148
Principal Occupation Owner		1	of Employer Distributors				
Is contributor a lobbyist, spouse, or Yes if contribution is in excess of municipality does contribute municipality valued at more	or or business !				Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes If yes, indicate which branch branches of government the		or pros	pective state contractor	? ☐Yes ☑No			\$250.00
If yes, list Event # Contract is with:	Ex	ecutive		ative	}		
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord	ler	Date Received 03/22/2023	Aggregate contributions \$250.00			
Last Name		First		·			M.I.
Leone		Jon					
Residential Street Address	City	A.C			State	Zip Code	7440
PO Box 1148	South V				CT	06074-7	7148
Principal Occupation Owner		•	of Employer Distributors				
Is contributor a lobbyist, spouse, or Yes If contribution is in excess of dependent child of a lobbyist? No If contribution is in excess of municipality does contribute municipality valued at more	or or business l	hc/she i			Amour	ıt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 032923a If yes, list Event # 032923a Is contributor a principal of a st if yes, indicate which branch branches of government the contract is with:	or	or prosp		∐ Tes √No			\$250.00
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord	er	Date Received 03/22/2023	Aggregate contributions \$250.00			

\$750.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

42

of 70

NAME OF COMMITTEE (Provide Complete Name as Registered with	th Filing Repos	itory)		TYPE	OF REPORT		100 A40 A50 A50	F/8 (140 53)
Sierra for Treasurer 2023	·		·	April 1	0 filing	 -		
A. Total Contributions from Small Contributors - Received	this Period C	NLY				<u></u> -		··
(See instructions for definition of Small Contributor)			Subtotal Section	on A				\$0.00
B. Itemize	ed Contribut	ions fi	om Individus	als				
Last Name		First		 				M.I.
Escalera		Yas	ha					
Residential Street Address	City					State	Zip Code	·L
39 Cobb Hill Rd	Manch	_				СТ	06040-6	6713
Principal Occupation Retired		Name Retir	of Employer od					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in exceed in unicipality does contributed in unicipality valued at municipality valued at	outor or business	he/she i			t with said	Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1?		or pros	pective state contra	actor?	Yes			\$100.00
If yes, list Event # V No branches of government the contract is with:	· ·	cecutive	E Lo	gislative	☑ No			•
Method of contribution; Cash Personal Check	n Money Ord	ler	Date Received 03/22/2023	Aggreg	ate contributions \$100.00			
Last Name		First			<u>_</u>			M.I.
Zarrilli		Gia	nni					
Residential Street Address	City					State	Zip Code	4000
208 Highland St	Wether					СТ	06109-	4023
Principal Occupation President		1	of Employer sportation Ma	ınagemeni	Solutions			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excemunicipality does contribution is in exact municipality does contribution is in exact municipality valued at municipality valued at municipality valued at municipality.	butor or business	hc/she i			t with said	Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes If yes, indicate which bran branches of government the	nch or	or pros	pective state contr	actor?	☐Yes ✓No			\$250.00
If yes, list Event # V No branches of government the contract is with:	E E	kecutive	e 🔲 Le	gislative	[V] IVO			
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Debit Card ☐ Payroll Deduction	n Money Ord	der	Date Received 03/22/2023	Aggreg	ate contributions \$250.00			
Last Name		First						M,I.
Marotta		Sal						
Residential Street Address	City	E (1))			-	State	Zip Code	0007
23 Autumn Cir	Rocky					СТ	06067~	2867
Principal Occupation President			of Bmployer mn transporta	ation				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excemunicipality does contribution is in excemunicipality does contribution is in excemunicipality valued at municipality valued at municipality valued at municipality.	butor or business	he/she i			t with said	Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Yes If yes, list Event # Is contributor a principal of If yes, indicate which branches of government the contract is with	nch or	r or pros		actor? egislative	∐Yes ✓ No			\$250.00
Method of contribution:			Date Received		ate contributions	1		
Cash Personal Check Credit/Debit Card Payroll Deduction	m Money Or	der	03/22/2023		\$250.00			

\$600.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 43 of 70

NAME OF COMMITTEE (Provide	Complete	e Name as Registered with Fi	ling Reposi	itory)		TYPE OF REPORT			
Sierra for Treasurer 2023			<u> </u>			April 10 filing			<u></u>
A. Total Contributions from Sn (See instructions for definition of Sm			Period O	NLY	Subtotal Section A				\$0.00
			ontributi	ons f	rom Individuals	4	Association		ASAUNANINAN
Last Name	and the grades, and the grades are for			First		and the second of the second o	on diversity	11001100110000000000000000000000000000	M.I.
Badash				Yol	/el				
Residential Street Address		, , , , , , , , , , , , , , , , , , , 	City				State	Zip Code	·
35 Willard St			Hartford	1			CT	06105-1	813
Principal Occupation Owner					of Employer Employed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L.1? If yes, list Event # 032923a	Yes No	Is contributor a principal of a state If yes, indicate which branch or branches of government the	·	or pros		∐ res √No			\$77.77
Method of contribution: ☐ Cash ☐ Personal Check ✔ Cr	redit/Debit (contract is with: Card Payroll Deduction	Money Ord		Date Received 03/22/2023	Aggregate contributions \$111.00			
Last Name				First					M.I.
Badash				You	rel .				
Residential Street Address			City			_ 	State	Zip Code	
35 Willard St			Hartford				СТ	06105-1	813
Principal Occupation Owner				l .	of Employer Employed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amour	t of Cont	ribution
event reported in acciton ciri	Yes No	Is contributor a principal of a stat If yes, indicate which branch of branches of government the contract is with:	·	or pros		∐ 1 es ✓ No			\$33.23
Method of contribution: ☐ Cash ☐ Personal Check ✓ Cr	redit/Debit	Card Payroll Deduction	Money Ord	er	Date Received 03/29/2023	Aggregate contributions \$111.00			
Last Name				First					M.I.
Cloud				Dia	ne				b
Residential Street Address			City	ır.	,		State	Zip Code	1000
795 Prospect Ave, Apt C3			West H				CT	06105-4	1220
Principal Occupation Retired				Reti	of Employer red				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more th	or business l				Amour	t of Cont	ribution
event reported in acction L1?]Yes ☑No	Is contributor a principal of a state If yes, indicate which branch of branches of government the	г	<i>or pros</i> ecutiv		∐ Tes ✓ No			\$250.00
Method of contribution: ☐ Cash Personal Check ☐ Cr	redit/Debit	contract is with: Card Payroll Deduction	 _		Date Received 03/14/2023	Aggregate contributions \$250.00			
<u></u>					1		1	. "	· · · ·

\$361.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page	44	of	70

NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)				TYPE OF REPORT			
Sierra for Treasurer 2023			April 10 filing				
A. Total Contributions from Small Contributors - R	eceived this Period	ONLY				 · · · · ·	
(See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
I	3. Itemized Contribu	tions f	rom Individuals				
Last Name		Firs	t				M.I.
Epstein		Ang	gela]
Residential Street Address	City				State	Zip Code	
779 Prospect Ave	West	Hartfor			CT	06105-4	236
Principal Occupation Administrator		1	of Employer Employed				
dependent child of a lobbyist? The municipality	m is in excess of \$400 to a does contributor or busines valued at more than \$5,000	s he/she			Amoun	it of Conti	ibution
avent concerted in Caption T 19	principal of a state contracto e which branch or vernment the	•	_	[J] No			\$150.00
Method of contribution:	off Deduction Money O	ixecutiv ————	Date Received 03/23/2023	Aggregate contributions \$150.00			
Last Name		Firs	t				M.I.
Lacosse		Din	юта				
Residential Street Address	City				State	Zip Code	
99 Hollister Dr	East	lartior			СТ	06118-2	167
Principal Occupation Retired		Reti	of Employer red				
dependent child of a lobbyist?	on is in excess of \$400 to a contributor or busines valued at more than \$5,000	s he/she			Amoun	t of Conti	ibution
event reported in Section L1? If yes, indicate	principal of a state contractor which branch or	or or pros	spective state contractor	? ☐Yes ☑No			\$250.00
If yes, list Event # VNO branches of go contract is with		kecutiv	e Legisla	tive			
Method of contribution: ☐ Cash ☐ Personal Check ☑ Credit/Debit Card ☐ Payr	oll Deduction [] Money O	rder	Date Received 03/24/2023	Aggregate contributions \$250.00			
Last Name		Firs	t				M,I.
John		Ma	rtin				
Residential Street Address	City				State CT	Zip Code 06095-1	049
8 Plum Rdg	Winds		-CP 1		CI	00095-1	912
Principal Occupation Accountant		HSB	of Employer				
dependent child of a lobbyist? Division municipality	on is in excess of \$400 to a c does contributor or busines valued at more than \$5,000	s he/she i			Amoun	t of Conti	ibution
Yes Yes	principal of a state contracto	or or pros	pective state contractor	? Yes			\$50.00
If yes, list Event # If yes, indicate branches of go contract is with		ecutiv	e []Legisla	√No			φυσ,υυ
Method of contribution:	oll Deduction Money O	rder	Date Received 03/24/2023	Aggregate contributions \$50.00			
							لمــــــــــــــــــــــــــــــــــــ

\$450.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 45 of 70

Last Name	NAME OF COMMITTEE (Provide Complete Name as Registere	ed with Filing Repo	sitory)		TYPE OF REPORT		design	8 8 8
Social Instructions for definition of Small Contributions Subtered Section A	Sierra for Treasurer 2023				April 10 filing			<u> </u>
Lest Name First Adam Sinte Zig Code Cod	A. Total Contributions from Small Contributors - Recei	ved this Period (ONLY			<u>-</u>		
Last Name First Addres First Addres State Addres Amount of Contribution State Amount of Contribution State Amount of Contribution A	(See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
Cloud Adam	B. Ite	mized Contribu	tions fi	rom Individuals				6 9 9
Residential Street Address 86 Bloomfield Aye Plantford Partner Reserved Lane Vontures Reserved Lane Vontures	Last Name		First					M.I.
Residential Street Address Section L17 Yes If contributor is in excess of \$400 to a candidate committee for a chief executive officer of a loopy and the section L17 Yes If contributor is in excess of \$400 to a candidate committee for a chief executive officer of a loopy and the section L17 Yes If contributor is in excess of \$400 to a candidate committee for a chief executive officer of a loopy and the section L17 Yes If contributor is in excess of \$400 to a candidate committee for a chief executive officer of a loopy and the section L17 Yes If contributor a principal of a state contractor or prospective state contractor Yes	Cloud		Ada	am				
Name of Englover Partner	Residential Street Address	City	<u> </u>		<u></u>			
In contributor a lobylist, spouse, or dependent child of a lobylist? Yes	86 Bloomfield Ave	Hartfor	rd			CT	06105-1	006
It contribution a lobbysit, spouse, or dependent child of a lobbysit? Yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a ununicipality does contribute or thankes he/she is associated with have a contract with said provent reported in section L17 Yes If contribution application associated with an Yes If contribution application of contribution Yes If yes, list leave which branch or breadure of the contract is with: Servan								
dependent child of a lobbysis? No municipality does contribution or business br/sis is associated with have a contract with said municipality valued at more than \$5,000?	Partner		Brew	er Lane Venture	S			
Sevent reported in Section L17	dependent child of a lobbyist? [1] municipality does of	contributor or business	s he/she i	s associated with have	a contract with said	Amour	it of Conti	ribution
Method of contribution:	ii	•	or or pros	pective state contractor	Yes			\$250 00
Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 02/28/2023 \$250.00 Last Name First Delmarys M.I. Serrano Delmarys State Zip Code 33 Kelssy St Hartford Student/Homemaker Student/Homem	When list Event # VNo branches of government	ent the	xecutive	eLegisla	ative No			Ψ1.00.00
Serrano Delmarys		duction Money O	rder	1				
Residential Street Address 33 Kelsey St Principal Occupation Name of Employer	Last Name		First					M.I.
33 Kelsey St Principal Occupation Hommaker/ student Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? Yes If contribution associated with an overall present the contract is with:	Serrano		Del	marys				
Principal Occupation Homemaker/ student Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? If contribution approach are the contract of a third for a child of a lobbyist? Is this contribution associated with an event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order Date Received Aggregate contributions	Residential Street Address	1	<u> </u>			L] -	<u> </u>
Student/Homemaker Student/Homemaker Student/Homemaker		Hartfo				СТ	06106-4	337
dependent child of a lobbyist? No								
Secont Second S	dependent child of a lobbyist?	contributor or busines:	s hc/she i	s associated with have	a contract with said	Amour	ıt of Conti	ribution
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 03/03/2023 \$50.00 Last Name Huertas Residential Street Address 13 View St Principal Occupation Career Coach Navigator Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a manicipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, indicate which branch or branchs of government the contract is with: Method of contribution: Date Received Aggregate contributions Aggregate contributions State Zip Code CT 06040-4305 State Zip Code CT 06040-4305 If contributor a candidate committee for a chief executive officer of a manicipality valued at more than \$5,000? Yes VNo Substitute of the contract of the cont	event reported in Section L1? It was, indicate which branches of government to the branches o	ch branch or		_	∐ 1es ✓ No			\$50.00
Last Name Huertas Elsa Residential Street Address 13 View St Principal Occupation Career Coach Navigator Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? If yes, list Event # M.I. Manchester City Manchester Name of Employer SINA If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes Is contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Date Received Aggregate contributions	Method of contribution:			Date Received	Aggregate contributions			
Residential Street Address 13 View St Principal Occupation Career Coach Navigator Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: City Manchester		addition	_,		\$50.00			34.5
Residential Street Address 13 View St Principal Occupation Career Coach Navigator Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: City Manchester Name of Employer SINA State City O6040-4305 Amount of Contribution State CT Vip O6040-4305 Amount of Contribution State CT Vip O6040-4305 Amount of Contribution State CT Vip Code O6040-4305 Amount of Contribution State CT Vip Code O6040-4305 Amount of Contribution State CT Vip Code O6040-4305								IVI.I.
13 View St Principal Occupation Career Coach Navigator Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? If yes, list Event # Manchester Name of Employer SINA SINA Amount of Contribution a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes Is contribution associated with an event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions			Els	<u>a</u>		T	5 . 6.1	
Principal Occupation Career Coach Navigator Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Name of Employer SINA Amount of Contribution Fyes Fyes, indicate which branch or branches of government the contractor? Yes S250.6 Date Received Aggregate contributions		I -	nester			1		1305
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said trunicipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: SINA Amount of Contribution Amount of Contribution Executive Is associated with have a contract with said trunicipality valued at more than \$5,000? Yes Yes Yes Yes You Date Received Aggregate contributions		Marici		of Employer			00010	
dependent child of a lobbyist? In nunicipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: All out of Contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes Yes	Career Coach Navigator						<u></u>	<u></u>
event reported in Section L1? If yes, indicate which branch or branches of government the contract is with: Method of contribution: Section L1? If yes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions	dependent child of a lobbyist? municipality does	contributor or busines	s he/she i	is associated with have	a contract with said	Amoui	nt of Cont	ribution
Method of contribution: Date Received Aggregate contributions	event reported in Section L17 Fig. 15 Propert # Who branches of government branches of go	ch branch or	•		∐ Tes ✓ No			\$250.0
	COMPACT IS WILL:					1		
Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 03/10/2023 \$250.00		eduction Money O	rder	03/10/2023				

SUBTOTAL Section B - This Page \$550	SUB
TOTAL of Section B Pages \$26,696	
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) \$26,696 (Enter total on Line 13, Column A of Summary Page	

Page 46 of 70

NAME OF COMMITTEE (Prov	ide Comple	ete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT			
Sierra for Treasurer 2023			3			April 10 filing			
A. Total Contributions from S (See instructions for definition of S			Period O	NLY	Subtotal Section A		<u> </u>		\$0.00
		B. Itemized C	ontributi	ions f	rom Individuals				
Last Name				First	· · · · · · · · · · · · · · · · · · ·				M.I.
Segarra				Est	ela				
Residential Street Address			City	<u> </u>			State	Zip Code	
74 Haddam St			Hartford	tt			CT	06106-42	231
Principal Occupation Program Specialist				Name HPS	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓ No	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amou	nt of Contri	bution
Is this contribution associated with an event reported in Section L1? If yes, list Event #	☐Yes ☑No	Is contributor a principal of a state If yes, indicate which branch o branches of government the	г	or pros	· 	∐ Yes √No			\$50.00
Method of contribution: Cash Personal Check	Credit/Debit	contract is with:			Date Received 03/04/2023	Aggregate contributions \$50.00			
Last Name				First					M.I.
Santiago				Hild	la				
Residential Street Address			City				State	Zip Code	
16 South Ave	<u></u>		Merider				СТ	06451-76	520
Principal Occupation Legislator				l .	of Employer e Of CT				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ☑No	If contribution is in excess of municipality does contributor municipality valued at more to	or business l				Amou	nt of Contri	bution
Is this contribution associated with an event reported in Section L1?	✓ Yes	Is contributor a principal of a state If yes, indicate which branch o		or pros	pective state contractor	res		\$	100.00
If yes, list Event # 033023a	[]No	branches of government the contract is with:	∐ Ex	ecutiv	eLegisle	ative No			
Method of contribution: Cash Personal Check	Credit/Debit	Card Payroll Deduction	Money Ord	er	Date Received 03/30/2023	Aggregate contributions \$100.00			
Last Name				First					M.I.
Santana				Ine	iz				
Residential Street Address			City				State	Zip Code	204
360 State St			New Ha		a C Employee		СТ	06510-36	101
Principal Occupation Nurse				Davi	of Employer ta				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	∐Yes ✓No	If contribution is in excess of municipality does contributor municipality valued at more t	or business?				Amou	nt of Contri	bution
Is this contribution associated with an ovent reported in Section L1? If yes, list Event # 033023a	✓ Yes ☐ No	Is contributor a principal of a star If yes, indicate which branch o branches of government the contract is with:	г	or pros		[_] Yes [☑] No		\$	250.00
Method of contribution: Cash Personal Check	Credit/Debi				Date Received 03/30/2023	Aggregate contributions \$250.00			
					JUIOULULU	Ψ200.00	1		

\$400.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

SEEC FORM 20	
Revised January 2015	

Page	47	of	70

NAME OF COMMITTEE (Provide Complete Name as Registered with F	iling Repos	itory)		TYPE OF REPORT			
Sierra for Treasurer 2023				April 10 filing			
A. Total Contributions from Small Contributors - Received this (See instructions for definition of Small Contributor)	s Period O	NLY	Subtotal Section A				\$0.00
B. Itemized (Contribut	ions f	rom Individuals				
Last Name		Firs	t	· · · · · · · · · · · · · · · · · · ·			M.I.
Digel		Jar	ne .				
Residential Street Address	City			 	State	Zip Code	
24 Van Buren Ave	West H			 	СТ	06107-2	2751
Principal Occupation Volunteer Art Teacher		1	of Employer enant Preparatory	y School			
Is contributor a lobbyist, spause, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contribute municipality valued at more	r or business	he/shc			Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of a star indicate which branches of government the	or			∐ Yes ✓ No			\$250.00
Method of contribution: Cash Personal Check Credit/Debit Card Payroft Deduction		ecutiv ———	Date Received 03/10/2023	Aggregate contributions \$250,00			
Last Name		Firs	!		•		M.L.
Santos-Martinez		Jes	sica				}
Residential Street Address	City				State	Zip Code	
324 Newington Rd	West H				CT	06110-2	2330
Principal Occupation Director		1	of Employer Inn Health- State	of CT			
Is contributor a lobbyist, spouse, or Yes dependent child of a lobbyist? Yes municipality does contributo municipality valued at more	r or business	hc/she			Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L.1? Yes Yes Is contributor a principal of a star	or	-		∐ Ies			\$50.00
If yes, list event is contract is with:	Ex	ecutiv]		
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction]Мовеу Ord	ler	Date Received 03/03/2023	Aggregate contributions \$50.00			
Last Namo		Firs	!				M,I.
Farina		Mic	chael				1
Residential Street Address	City				State	Zip Code	
54 Robert Rd	Manche				CT	06040-4	1520
Principal Occupation Professor			of Employer University				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of municipality does contributed municipality valued at more	r or business	he/she			Amoun	t of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of a star of the section L1? If yes, list Event # Is contributor a principal of a star of the section L1? If yes, list Event # Is contributor a principal of a star of the section L1? If yes, list Event # Is contributor a principal of a star of the section L1?	or	or pros		[]No			\$250.00
Method of contribution: Cash Personal Check V Credit/Debit Card Payroli Deduction			Date Received 02/28/2023	Aggregate contributions \$250.00)		
L==================================			1		ــــــــــــــــــــــــــــــــــــــ		

\$550.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 48 of 70

NAME OF COMMITTEE (Provide Compi	ete Name as Registered with Fi	ling Reposi	itory)		TYPE OF REPORT			
Sierra for Treasurer 2023					April 10 filing			
A. Total Contributions from Small Co	ntributors - Received this	Period O	NLY					
(See instructions for definition of Small Con	tributor)			Subtotal Section A				\$0.00
	B. Itemized C	ontributi	ons f	rom Individuals				
Last Name			First					M,I.
Kelsey			Sar	ndra	_	_		
Residential Street Address		City				State	Zip Code	.004
610 Country Club Rd	<u></u>	Avon				СТ	06001-2	321
Principal Occupation Attorney			i .	of Employer ey Law, LLC				
-				·				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoun	t of Contr	ibution
Is this contribution associated with an event reported in Section L17	Is contributor a principal of a stat If yes, indicate which branch of		or pros	pective state contractor	? ☐Yes ☑No			\$100.00
If yes, list Event #	branches of government the contract is with:	E _X	ecutiv	e Legisla	ative VINO			
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Deb	it Card Payroll Deduction	Money Ord	ет	Date Received 03/28/2023	Aggregate contributions \$100.00			
Last Name			First					M.I.
Santana			No	emi				
Residential Street Address		City	1.			State	Zip Code	
69 Tier St		Bronx				NY	10464-1	352
Principal Occupation PR Consultant				of Employer A Communication	าร			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amoun	t of Contr	ibution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state of the		or pros	pective state contractor	? Yes			\$50.00
If yes, list Event #	branches of government the contract is with:	Ex	ecutiv	e Legisla	ative VINO			
Method of contribution: Cash Personal Check ✓ Credit/Deb	it Card Payroll Deduction	Money Ord	er	Date Received 03/20/2023	Aggregate contributions \$50.00			
Last Name			Firs	t				M.I.
Holtgrewe			Bui	rdette				
Residential Street Address		City				State	Zip Code	
27 Huntington St	<u> </u>	Manche				СТ	06040-4	235
Principal Occupation Consultant			ł .	of Employer Edge Strategies				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Атопл	of Conti	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state If yes, indicate which branch o		or pros	pective state contractor	1 es			\$5.00
If yes, list Event #	branches of government the contract is with:	☐ Ex	ecutiv	e Legisl	ative No			
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Det	it Card Payroll Deduction	Money Ord	er	Date Received 03/01/2023	Aggregate contributions \$5.00			

SUBTOTAL Section B - This Page	\$155.00
TOTAL of Section B Pages	\$26,696.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$26,696.00

Page 49 of 70

NAME OF COMMITTEE (Provide Complete Name as Registered with	Filing Repos	itory)		TYPE OF REPORT		A SEE	S. 12 (S.)
Sierra for Treasurer 2023	<u> </u>			April 10 filing			·—····
A. Total Contributions from Small Contributors - Received th	is Period C	NLY					<u> </u>
(See instructions for definition of Small Contributor)			Subtotal Section A	ļ			\$0.00
B. Itemize	l Contribut	ions f	rom Individuals	() () () () () () () () () ()		50 G 60 80	(25.16), (2.5)
Last Name		First					M.I.
Meza		Jua	ın				
Residential Street Address	City				State	Zip Code	·
64 Arnold St	Hartfon				CT	06106-3	3503
Principal Occupation Carpintero		Name Pdc	of Employer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess municipality does contribution in the contribution is in excess municipality does contribution.	tor or business	he/she i			Amour	it of Conti	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a lf yes, indicate which brane		or pros	pective state contractor				\$150.00
If yes, list Event # No branches of government the contract is with:	Ex	ecutiv					
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	Money Ord	ier	Date Received 03/25/2023	Aggregate contributions \$150.00			
Last Name		First					M.I.
Soriano		Mic	hael				
Residential Street Address	City				State	Zip Code	2000
1715 US Highway 46	Parsipp		PD 1		NJ	07054-2	2959
Principal Occupation Administrator		,	of Employer Jersey Turnpike	Authority			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess municipality does contribution in the contribution is in excess municipality does contribute municipality valued at most	tor or business	he/she i			Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a event reported in Section L1?		or pros	pective state contractor	Yes			\$100.00
No branches of government the		cecutiv	e ∐Legisla	√ No			ψ.00.00
Method of contribution:		, country	Date Received	Aggregate contributions	1		
Cash Personal Check Cedit/Debit Card Payroll Deduction	Money Ord	ler	03/26/2023	\$100.00			
Last Name		First			<u> </u>		M.ľ.
Franco	•	Ma	deline				}
Residential Street Address	City			· · · · · · · · · · · · · · · · · · ·	State	Zip Code	<u> </u>
249 Newington Rd	West H				CT	06110-2	2314
Principal Occupation Social Worker			of Employer e of CT Public De	fender Services			
Is contributor a lobbyist, spouse, or Yes If contribution is in excess dependent child of a lobbyist? In unicipality does contribution in the contribution of a lobbyist?	itor or business	he/she			Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a lf yes, indicate which brane branches of government the	th or			∐ 1es ✓No			\$50.00
If yes, list Event # contract is with:		xecutiv	·—— 		{		
Method of contribution: Cash	Money Or	ter	Date Received 03/26/2023	Aggregate contributions \$50.00	<u></u>		

\$300.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

SEEC FORM 20	
Revised January 2015	

_		_	
Page	50	of	70

Second Contributions from Small Contributors - Received this Period ONLY Subtoal Section A	NAME OF COMMITTEE (Provide Co	omplete Name as Registered with F	iling Repos	itory)		TYPE OF REPORT			
Subtrictions for definition of Small Contributions Subtrict Section A	Sierra for Treasurer 2023					April 10 filing			
Last Name Principal Countributions From Taildvidurals First Sarah			Period O	NLY	Subtotal Section A				\$0.00
First Sarah Sara	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		ontributi	one fi	en e		11/45/5/57		
Residential Sirvet Address 42 Bell St Finisipal Occupation Professor Is contributer a hobbysit, sponse, or dependent clink of a lobbysit? No	Last Name		20114114141	eritaria de la composición dela composición de la composición de la composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición de la composición de la composición dela composición de la composición dela composición dela composición dela composición dela composición dela composición dela composic	and the state of t	egen men få fra å nytillen en granne at men men fra fra gr		el este en este este de la constante de la cons	M,I.
Age Bell St Frincipal Occupation Proposition Provides or Pro	Perez			San	ah				
Name of Employer State of CTF	Residential Street Address		City	t	 		State	Zip Code	
State of CT	42 Bell St		Glaston	bury			CT	06033-	1719
Amount of Contribution associated with any or contract with said at zone than \$5,000? Yes No	•			i i					
Second Section 1.17 Test	damandani akilda 6- lahkuda62	No municipality does contributor municipality valued at more t	or business l han \$5,000?	he/she i	s associated with have a	s contract with said	Amour	ıt of Cent	ribution
Method of contribution: Credit/Debit Card Payroll Deduction Money Order O3/26/2023 Aggregate contributions \$250.00	cvent reported in Section L1?	No If yes, indicate which branch o branches of government the	or			∐ res ☑No			\$250.00
Residential Street Address City Somerville Name of Employer Tuffs University State MA 2ip Code O2144-2780]Money Ord	er					
Residential Street Address 10 Jay St, Apt 3 Principal Occupation Full time attudent Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? When the dof contribution: City Somerville	Last Name			First					M.I.
10 Jay St, Api 3 Somerville	Ayson			Kat	e				
Principal Occupation Full time atudent Secontributor a lobbyist, spouse, or dependent child of a lobbyist? No No Personal Check Credit/Debit Card Payroll Deduction Money Order Date Received Aggregate contributions Student	Residential Street Address		1					('	
Full time atudent Tufks University	\ 	 	Somerv				MA	02144-2	2780
dependent child of a lobbyist? No	1			i					
system reported in Section L1? Yes	dependent shild of a labburet?	No municipality does contributor	or business l		s associated with have a	contract with said	Amour	nt of Cont	ribution
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 03/27/2023 \$50.00 Last Name Cloud Payroll Deduction Money Order 03/27/2023 \$50.00 Last Name Cloud Danielle Residential Street Address 86 Bloomfield Avenue Hartford Ct 6105 Hartford Ct 97 06105 Principal Occupation Student Is contributor a lobbyist, spouse, or dependent child of a lobbyist? No municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No Is this contribution associated with an event reported in Section 1.17 If yes, indicate which branch or branches of government the contract is with: Method of contribution: Date Received Aggregate contributions Amount of Contribution \$250.00 Date Received Aggregate contributions	event reported in Section L1?	Vo If yes, indicate which branch o branches of government the	or .		-	[_] les			\$50.00
Cloud Residential Street Address 86 Bloomfield Avenue Hartford Ct 6105 Principal Occupation Student Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist? If contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Date Received Date Received Aggregate contributions					Date Received	Aggregate contributions			
Residential Street Address 86 Bloomfield Avenue Hartford Ct 6105 Principal Occupation Student Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? If this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: City	Last Name			First					M,I,
86 Bloomfield Avenue Hartford Ct 6105 Principal Occupation Student Is contributor a lobbyist, spouse, or dependent child of a lobbyist? In this contributor a lobbyist associated with an event reported in Section L1? If yes, list Event # Method of contribution: Hartford Name of Employer Student Name of Employer Student	Cloud			Dar	rielle				ļ
Principal Occupation Student Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Name of Employer Student Amount of Contribution Fyes Scontributor a principal of a state contractor or prospective state contractor? Yes If yes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions	Residential Street Address		City	ـــــ			State	Zip Code	
Student Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # Method of contribution: Student Yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality valued at more than \$5,000? Yes No No Yes Yes	86 Bloomfield Avenue Hartford Ct	6105	Hartford	4			CT	06105	
dependent child of a lobbyist? No municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state contractor or prospective state contractor? Yes Yes indicate which branch or branches of government the contract is with: Executive Legislative Method of contribution: Date Received Aggregate contributions	1								
event reported in Section L17 If yes, indicate which branch or branches of government the contract is with: Method of contribution: S250.00 Executive Legislative Date Received Aggregate contributions	demanders shilld as a labbraint?	municipality does contributor	or business !		s associated with have a	contract with said	Amour	it of Cont	ribution
	event reported in Section L1?	Wes, indicate which branch of branches of government the	or			∐ 168			\$250.00
		t/Debit Card Payroll Deduction]Money Ord	er			 		

\$550.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

age	51	of	70

A. Total Contributions from Small Contributors - Received this Period ONLY Subtotal Section A Subtotal Section A	NAME OF COMMITTEE (Provide Complete Name as Registered	with Filing Repo	sitory)		TYPE OF REPORT	102 104 30	(e.c. 823) edi (85)	
Substitutions for definition of Small Centributory Substitutions from Individuals	Sierra for Treasurer 2023	<u> </u>			April 10 filing			
B. Itemized Contributions from Individuals First Scott	A. Total Contributions from Small Contributors - Receive	ed this Period	ONLY					
First Scott Print Scott Scot	(See instructions for definition of Small Contributor)		W. 3.0	Subtotal Section	<u></u>			\$0.00
Hankard Scott Residential Steet Address City State Zip Code Residential Steet Address City American of Engloyer Name of Engloyer American Refirement Specialist Contribution is in excess of \$400 to a candidate commutative for a chief executive officer of a dependent child of a lobbyist? No If contribution is in excess of \$400 to a candidate commutative for a chief executive officer of a dependent child of a lobbyist? No If contribution is in excess of \$400 to a candidate commutative for a chief executive officer of a municipality dose contribution extended with any accordance with and contribution associated with any accordance with and contribution associated with any accordance with any accordance with any accordance with a contribution associated with any accordance with any accordance with a contribution associated with any accordance with any accordance with a contribution associated with any accordance with a contribution	B. Item	uzed Contribu	tions !	rom Individuals				
Reidential Street Address City Lincoln Name of Employer American Name of Employer Name of Em	Last Name		Firs	t				M.I.
Secontification Second State Second Debytist, sporase, or depoted and second state of the second sta	Hankard		Sc	ott		_		
Name of Employer Amount of Contribution Reliferant Specialist Executive officer of a deposition of the between the contribution associated with and properly does contribution of the between the contribution of the contribution of the between the contribution of the contribution	Residential Street Address	1					1 -	
Is contribution a lobbyist, spouse, or dependent child of a lobbyist? Yes dependent child of a lobbyist? Yes outribution is in excess of \$400 to a candidate contribute or branches of povernment the municipality does contribute or branches of povernment the contribution associated with have a contract with and municipality valued at more than \$5,000?		Lincol				NE	68510-2	234
dependent child of a lobbyist? No	•		1					
Section L17	dependent child of a lobbyist? municipality does con	ntributor or busines	s he/she	is associated with have	a contract with said	Amour	nt of Conti	ribution
Method of contribution: Cash	event reported in Section L1? We see indicate which branches of government with the section L1?	branch or	-	<u></u>	∐ Yes VNo			\$250.00
Salazar Residential Street Address 73 Bushnell St Principal Occupation Project Manager Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a principal of a state contractor or prospective state contractor? If contributor a principal of a state contractor or prospective state contractor prospective p	Method of contribution:			Date Received				
Residential Street Address 73 Bushnell St 73 Bushnell St 73 Bushnell St 74 Bushnell St 75 Bushnell St 76 Principal Occupation Project Manager 86 Readity Corp 87 Bushnell St 86 CT 87 Bushnell St 86 CT 87 Bushnell St 86 CT 87 Bushnell St 87 Bushnell St 87 Brincipal Occupation Project Manager 86 Readity Corp 87 Bushnell St 86 contributor a lobbyist, spouse, or dependent child of a lobbyist? 87 No 88 If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business feeding is associated with have a contract with said municipality and a more than \$5,000? 87 State CT 87 No 88 If contribution associated with an event reported in Section L17 87 Pyes, list Event # 032923a 88 No 89 Personal Check Cordit/Debit Card 89 Payroll Deduction 80 Miano 80 City 80 Wethersfield 80 State Contraction 80 Amount of Contribution 80 State Contraction 80 State City	Last Name		Firs	t		.,,,,,,		M.I.
Hartford Region	Salazar		Jos	se				
Name of Employer Rego Realty Corp	Residential Street Address	1 '				t .	1 -	
Rego Realty Corp State Contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes dependent child of a lobbyist? Yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No St his contribution associated with an event reported in Section L1? Yes If sometimate in the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract with have a contract with said municipality valued at more than \$5,000? Yes No If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality valued at more than \$5,000? Yes No No If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch or branches of government the contract is with: If yes, indicate which branch	73 Bushnell St	Hartfo	rd			CT	06114-1	828
State City Wethersfield State Contribution State City Wethersfield State City Wethersfield State City Wethersfield State City Wethersfield State City State C	- •		1					
event reported in Section L1?	dependent child of a lobbyist? municipality does con	ntributor or busines	s he/she	is associated with have	a contract with said	Amou	nt of Cont	ribution
Method of contribution:	event reported in Section L1?	branch or	-	_	∐ Yes ✓ No			\$250.00
Cash	If yes, list Event # 5020208 contract is with:		executiv		ative			
Miano Residential Street Address 5 Garden Hill Rd Principal Occupation Manager Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution associated with an event reported in Section L1? If yes, list Event # 032923a Method of contribution: Giuseppe State Zip Code O6109-3614 Name of Employer Flanders Brake and Alignment Name of Employer Flanders Brake and Alignment		oction Money O	rder	1	1			
Residential Street Address 5 Garden Hill Rd Principal Occupation Manager Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? If yes, list Event # 032923a Method of contribution: City Wethersfield Name of Employer Flanders Brake and Alignment Name of Employer Flanders Brake and Alignment Name of Employer Flanders Brake and Alignment Amount of Contribution State CTP 06109-3614 Amount of Contribution State City Ves of to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes Is contributor a principal of a state contractor or prospective state contractor? Yes If yes, indicate which branch or branches of government the contract is with: Date Received Aggregate contributions	Last Name		Firs	t				M.I.
S Garden Hill Rd Principal Occupation Manager Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? If yes, list Event # 032923a Method of contribution: Wethersfield Wethersfield Name of Employer Flanders Brake and Alignment Yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No	Miano		Git	ıseppe				
Principal Occupation Manager Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # 032923a Method of contribution: Name of Employer Flanders Brake and Alignment			G _ l =	ı			1 .	2644
If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contribution or business he/she is associated with have a contract with said municipality valued at more than \$5,000?		vvetne				CI	00 109-3	0014
dependent child of a lobbyist? No					Alignment			
event reported in Section L1? If yes, list Event # 032923a No No Figure Figu	dependent child of a lobbyist? municipality does con	ntributor or busines	s he/she	is associated with have	a contract with said	Amou	nt of Cont	ribution
Method of contribution: Method of contribution: Executive Legislative	event reported in Section L1? [V] Yes, indicate which	branch or	эг от рго	spective state contracto	1 cs			\$250.00
		nt the	Executiv		ative			
		action Money O	rder	1	1.00	i i		

\$750.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

SEEC FORM 20 Revised January 2015

Page	52	of	70
rage	JZ.	U	70

NAME OF COMMITTEE (Provide Comp	lete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT			550 00 650
Sierra for Treasurer 2023		<u> </u>			April 10 filing			
A. Total Contributions from Small C	ontributors - Received this	Period O	NLY					
(See instructions for definition of Small Co.	ntributor)			Subtotal Section A				\$0.00
	B. Itemized C	ontribut	ions f	rom Individuals		nara:	(1) (2) (3)	100 100 100
Last Name	····		First		 			M.I.
Jerez			Mai	ria D				•
Residential Street Address		City				State	Zip Code	•
2 Lincoln Ct		New Br	itain			CT	06052-1	1288
Principal Occupation				of Employer				
Self Employed			Self	Employed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business				Amour	ıt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Myes, list Event # 032923a	Is contributor a principal of a state If yes, indicate which branch or branches of government the	r	- ,		∐ Tes ✓ No			\$100.00
If yes, list Event # 5020204	contract is with:	Ex	ecutiv		ative	1		
Method of contribution: Cash Personal Check CC Credit/De	oit Card Payroll Deduction	Money Ord	er	Date Received 03/29/2023	Aggregate contributions \$200.00			
Last Name			First					M.I.
Jerez			Ma	ria D				
Residential Street Address	.—.—.—.—.—.—.—.—.	City				State	Zip Code	
2 Lincoln Ct	. 	New Br				CT	06052-1	288
Principal Occupation Self Employed			1	of Employer Employed				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more that	or business l				Атоп	ot of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a stat If yes, indicate which branch of		or pros	pective state contracto	Yes ✓No			\$100.00
If yes, list Event #	branches of government the contract is with:	Ex	ecutiv		ative	1		
Method of contribution: Cash Personal Check Credit/Del	oit Card Payroll Deduction	Money Ord	er	Date Received 03/29/2023	Aggregate contributions \$200.00			<u> </u>
Last Name			First	:				M.I.
vazquez			ron	nie]
Residential Street Address	·	City				State	Zip Code	
2 Park Pl, Apt 10F	· ···	Hartford	,	, _		СТ	06106-5	5012
Principal Occupation project manager				of Employer of hartford				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? ✓ No	municipality dags postellustor	or business	hc/she i			Amour	it of Cont	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a state If yes, indicate which branch or		or pros	pective state contracto	res			\$100.00
If yes, list Event # 032923a No	branches of government the contract is with:		ecutiv					
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/De	oit Card Payroll Deduction	Money Ord	ler	Date Received 03/29/2023	Aggregate contributions \$100.00			

\$300.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 53 of 70

NAME OF COMMITTEE (Provide Complete Name as Registered wi	ith Filing Repos	itory)		TYPE OF REPORT			
Sierra for Treasurer 2023	<u> </u>			April 10 filing			
A. Total Contributions from Small Contributors - Received	this Period C	NLY					
(See instructions for definition of Small Contributor)			Subtotal Section A	Š			\$0.00
B. Itemiz	ed Contribut	ions fr	om Individuals			4 E E E	
Last Name		First					M.I.
Ravosa		Anth	ωπν				w
Residential Street Address	City	7			State	Zip Code	1
21 Chatham Hill Rd	South (Glastor	bury		CT	06073-3	3543
Principal Occupation			f Employer	 			
Consultant		Vince	Group Inc.				i
Is contributor a lobbyist, spouse, or Yes If contribution is in exceed dependent child of a lobbyist? In winicipality does contributed by the contribution is in exceed the contribution is in exceedable to the contribution is in excee	butor or business	he/she is			Amour	nt of Cont	ribution
Is this contribution associated with an Yes Is contributor a principal of	a state contractor	or prosp	ective state contracto	r? Yes]		\$250.00
If yes, indicate which bra				√ No	}		\$230.0U
If yes, list Event # 032923a LINO branches of government the contract is with:	Ex	ecutive	Legisl	ative]		
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction	on Money Ord	ler	Date Received 03/29/2023	Aggregate contributions \$250.00			
Last Name		First		'			M.J.
Delmastro		Dani	iel				Α
Residential Street Address	City				State	Zip Code	
115 Scarborough St	Hartford	d			CT	06105-1	1108
Principal Occupation Owner		,	f Employer Consulting				
Is contributor a lobbyist, spouse, or Yes If contribution is in exceedage and the contribution is in exceedage.	butor or business	he/she is			Атош	ıt of Cont	ribution
Is this contribution associated with an Vyes Is contributor a principal of		or prosp	cctive state contracto	? Yes	1		\$250.00
event reported in Section L1? If yes, list Event # 032923a If yes, list Event # 032923a If yes, list Event # 032923a If yes, indicate which branches of government the contract is with:	ha	ecutive	Legisl	ative No]]		Ψ200.00
Method of contribution: ☐ Cash	on Money Ord	ler	Date Received 03/29/2023	Aggregate contributions \$250.00			
Last Name		First					M.I.
Bivona		Heid	ĭ				
Residential Street Address	City				State	Zip Code	
1178 Silas Deane Hwy	Wether	stield			CT	06109-4	4340
Principal Occupation Homemaker		Name o	of Employer ed				
Is contributor a lobbyist, spouse, or Yes If contribution is in exceed dependent child of a lobbyist? No municipality does contributed at numericipality valued at n	butor or business	he/shc is			Amour	nt of Cont	ribution
Is this contribution associated with an VYes Is contributor a principal of event reported in Section L1?		or prosp	ective state contracto	r?]		\$250.00
If yes, list Event # 032923a No If yes, indicate which bra branches of government the contract is with:	he	cecutive	Legisl	ative No] 		7250100
Method of contribution: ☐ Cash Personal Check Credit/Debit Card Payroll Deduction	on Money Ord	ier	Date Received 03/29/2023	Aggregate contributions \$250.00			

\$750.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 54 of 70

NAME OF COMMITTEE (Provide Complete Name as Registered wit	h Filing Repos	itory)			TYPE OF REPORT			
Sierra for Treasurer 2023	<u></u>				April 10 filing			
A. Total Contributions from Small Contributors - Received t	his Period O	NLY				· ···· ,		··
(See instructions for definition of Small Contributor)			Subtotal Sec	tion A				\$0.00
B. Itemize	d Contribut	ions fr	om Individ	uals				
Last Name		First						M.I.
Botelho		Micl	hael					
Residential Street Address	City			· · · ·		State	Zip Code	
15 Pilgard Ln	Glaston	nbury				СТ	06033-3	3316
Principal Occupation		1	of Employer		<u></u>			
Attorney		UKS						
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess municipality does contribution is in excess municipality does contribution is in excess municipality valued at municipality v	outor or business.	hc/she is				Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a green indicate which branches of government the branches of government the section L1?	ich or	or prost	occtive state cor	itractor?	☐ Yes ✓ No			\$250.00
If yes, list Event # 032923a No branches of government the	Ex	ecutive	<u> </u>	Legislat	tive			
Method of contribution: Cash ✓ Personal Check Credit/Debit Card Payroll Deduction	n Money Ord	đer	Date Received 03/29/202		Aggregate contributions \$250.00			
Last Name		First						M.I.
Barker		Con	rad					
Residential Street Address	City					State	Zip Code	<u></u>
110 Franklin Woods Dr	Somers	S				CT	06071-	1767
Principal Occupation Owner		1	of Employer Employed					
Is contributor a lobbyist, spouse, or Yes dependent child of a lobbyist? Yes Mo William Is in excession with the contribution is in excession with the contribution in the contribution is in excession. Yes municipality does contributed at monicipality valued at monicipality v	outor or business	hc/she is				Amoui	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # Is contributor a principal of If yes, indicate which bran branches of government the	ich or	r or prosi		ntractor? Legislat	∐ Yes ✓ No			\$250.00
Method of contribution:		10000111	Date Received		Aggregate contributions	1		
Cash Personal Check Credit/Debit Card Payroll Deductio	n Money Ord	der	03/30/202		\$250.00			
Last Name		First		1_	<u> </u>	<u>' </u>		M,I.
Barker		Car	men					
Residential Street Address	City					State	Zip Code	
110 Franklin Woods Dr	Somers	S				СТ	06071-	1767
Principal Occupation		1	of Employer					***
Owner		Self	Employed					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in exceed municipality does contributed at municipality valued at municipality valued at municipality valued.	outor or business	he/she i:				Amou	nt of Cont	ribution
Is this contribution associated with an event reported in Section LI? If yes, list Event # Is contributor a principal of If yes, indicate which branches of government the contract is with:	ach or	r or prosp		ntractor?	✓ No			\$250.00
Method of contribution:			Date Receive		Aggregate contributions	1		
Cash Personal Check Card Payroll Deduction	n Money Ord	der	03/30/202	3	\$250.00			

SUBTOTAL Section B - This Page	\$750.00
TOTAL of Section B Pages	\$26,696.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$26,696.00

Page 55

af

70

NAME OF COMMITTEE (Provide Complete	Name as Registered with Filing R	Repository)		TYPE OF REPORT	55 (0) (6)		
Sierra for Treasurer 2023				April 10 filing		**	
A. Total Contributions from Small Cont (See instructions for definition of Small Contri		od ONLY	/ Subtotal Section A				\$0.00
	B. Itemized Contri	ibutions	from Individuals		A. 25. 34.	a estado de	
Last Name		Fir					M.I.
Concepcion		Ju	lio				·
Residential Street Address	City	,			State	Zíp Code	<u> </u>
1212 Main St, Apt 221	Hai	rtford			CT	06103-1	262
Principal Occupation		1	e of Employer				
Executive Director		Har	tford Chamber of (Commerce			
Is contributor a lobbyist, spouse, orYes dependent child of a lobbyist?	If contribution is in excess of \$400 to municipality does contributor or bus municipality valued at more than \$5,	siness he/she			Amoun	t of Conti	ribution
	ls contributor a principal of a state contr	ractor or pro	spective state contractor	Yes			\$100.00
cvent reported in Section L1? If yes, list Event # 033023a No	If yes, indicate which branch or branches of government the contract is with:	Executi	veLegisla	vitive No			ψ100.00
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Debit C		ey Order	Date Received 03/30/2023	Aggregate contributions \$100.00			
Last Name		Fir	st			-	M.I.
Hunter		Ja	rrett				
Residential Street Address	City				State	Zip Code	
60 Fitch Meadow Ln	Sou	uth Wind			СТ	06074-1	037
Principal Occupation Police		1	e of Employer of hartford				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to municipality does contributor or bus municipality valued at more than \$5,	siness he/sho			Amoun	t of Conti	ribution
Is this contribution associated with an event reported in Section L1?	ls contributor a principal of a state contr	ractor or pro	spective state contractor	7 Yes			\$50.00
If yes, list Event # 033023a	If yes, indicate which branch or branches of government the	Executi	ve \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	utive No			400 100
Method of contribution:	contract is with:		Date Received	Aggregate contributions			
Cash Personal Check Credit/Debit C	Card Payroll Deduction Mone	ey Order	03/30/2023	\$50.00			
Last Name		Fir	st				M.I.
Melley		Re	ebecca				•
Residential Street Address	City	<u>_</u>			State	Zip Code	1
1 Riverside St	Por	rtland			CT	06480-1	952
Principal Occupation Project Manager			e of Employer nas & Power				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to municipality does contributor or bus municipality valued at more than \$5,	siness he/she			Amoun	t of Conti	ribution
Is this contribution associated with an event reported in Section L1? If yes, list Event # 033023a	Is contributor a principal of a state conta If yes, indicate which branch or branches of government the	_	_	∐ res √No			\$250.00
If yes, list Event # 0000200	contract is with:	jExecuti		itive			
Method of contribution: Cash Personal Check ✓ Credit/Debit C	Card Payroll Deduction Mone	ey Order	Date Received 03/30/2023	Aggregate contributions \$250.00			

SUBTOTAL Section B - This Page	\$400.00
TOTAL of Section B Pages	\$26,696.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$26,696.00

Page 56 of 70

NAME OF COMMITTEE (Provide Complete Name	as Registered with Filing Reposi	lory)	TYPE OF REPORT			res (filosofie) Nacional
Sierra for Treasurer 2023			April 10 filing		1.400	
A. Total Contributions from Small Contribut	ors - Received this Period O	NLY				
(See instructions for definition of Small Contributor)		Subtotal Section A				\$0.00
	B. Itemized Contributi	ons from Individuals				
Last Name		First			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	M.I.
Aponte-Garcia		Alexandra				
Residential Street Address	City			State	Zip Code	····
358 Alexander Rd	New Bri	tain		СТ	06053-1	056
Principal Occupation		Name of Employer				
School Counselor		School District of Nev	v Britain			
dependent child of a lobbyist?	ntribution is in excess of \$400 to a car icipality does contributor or business h icipality valued at more than \$5,000?			Amoun	it of Conti	ibution
	butor a principal of a state contractor	or prospective state contractor	? Yes			\$25.00
event reported in acciton is it	indicate which branch or		✓ No			ֆ∠ 5.00
I Marge lief Rivert # UUUULUG	tes of government the Exect is with:	ecutive Legisl	ative Fix			
Method of contribution: Cash Personal Check Credit/Debit Card	Payroll Deduction Money Orde	Date Received 03/30/2023	Aggregate contributions \$25.00			
Last Name		First		<u></u>		M.I.
Decordova		Marisel				
Residential Street Address	City			State	Zip Code	
79 Bristol St	Hartford	i		СТ	06106-4	102
Principal Occupation Therapist		Name of Employer Dote119	-	_		
dependent child of a lobbyist?	ntribution is in excess of \$400 to a car icipality does contributor or business I icipality valued at more than \$5,000?			Amoun	it of Conti	ribution
	ibutor a principal of a state contractor	or prospective state contractor	r? Yes			\$80.00
event reported in Section 1.1! If yes,	indicate which branch or nes of government the		✓ No			φου.υυ
I If use list Event # 0000Z0a —	ct is with:	ecutive Legisl	ative	ļ		
Method of contribution: Cash ✓ Personal Check Credit/Debit Card	Payroll Deduction Money Orde	Date Received	Aggregate contributions			
		00/00/2020	\$80.00		0	NOT
Last Name		First				M.I.
Ortiz		Mitzchka			1 -1 -1	
Residential Street Address	City New Bri	itain	!	State CT	Zip Code 06053-2	646
540 Slater Rd Principal Occupation	IACM DI	Name of Employer			00000-2	.0-10
Accounting/Compliance Officer		Hartford Housing Aut	hority			
dependent child of a lobbyist? mun	entribution is in excess of \$400 to a car icipality does contributor or business i icipality valued at more than \$5,000?			Amour	it of Conti	ribution
V Yes	ibutor a principal of a state contractor	or prospective state contractor	r? Yes			\$30.00
Figs. list Event # 033023a No branch	indicate which branch or nes of government the act is with;	ecutive Legisl	ative No			ψ00.00
Method of contribution: Cash Personal Check Credit/Debit Card	Payroll Deduction Money Ord	Date Received	Aggregate contributions \$30.00			
L	·		<u> </u>	<u> </u>		

\$135.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 57 of 70

NAME OF COMMITTEE (Provide Comple	ete Name as Registered with Fi	ling Repos	itory)		TYPE OF REPORT		6 10 E	60 Maria
Sierra for Treasurer 2023					April 10 filing		· · · · · · · · · · · · · · · · · · ·	
A. Total Contributions from Small Co	ntributors - Received this	Period O	NLY					
(See instructions for definition of Small Con-	tributor)			Subtotal Section				\$0.00
	B. Itemized C	ontributi	ions fi	rom Individuals				100 00 00
Last Name			First					M.I.
Acosta			Olg	а			:	М
Residential Street Address		City				State	Zip Code	<u>. </u>
6 Munnisunk Dr	<u> </u>	Simsbu	iry			СТ	06070-1	212
Principal Occupation			1	of Employer				
Realtor			Self					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business i	he/she i:			Атоп	t of Conti	ribution
Is this contribution associated with an event reported in Section L1?	Is contributor a principal of a stat If yes, indicate which branch or branches of government the	r			∐ 1es ☑No			\$50.00
If yes, list Event # 000020a	contract is with:	Ex	ecutive		ative			
Method of contribution: Cash	t Card Payroll Deduction	Money Ord	ler	Date Received 03/30/2023	Aggregate contributions \$50.00			
Last Name			First		·	<u> </u>		M.I.
Calderon			Jorg	ge			,	[
Residential Street Address		City				State	Zip Code	
17 Merriam Ave		Bloomfi				СТ	06002-3	3806
Principal Occupation Carpenter				of Employer I Group				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business !	he/she i:			Amour	ıt of Conti	ribution
Is this contribution associated with an Yes	Is contributor a principal of a stat	e contractor	or pros	pective state contracto	r? Yes			\$100.00
event reported in Section L1? If yes, list Event # 033023a	If yes, indicate which branch of branches of government the contract is with:		ecutive	e	ative No			<i>\$100.</i> 00
Method of contribution:	Contract is with:		$\neg \neg$	Date Received	Aggregate contributions			
Cash Personal Check Credit/Debi	t Card Payroll Deduction	Money Ord	ler	03/30/2023	\$100.00			
Last Name	· · · · · · · · · · · · · · · · · · ·		First					M.I.
Corbin			Cla	rence				w
Residential Street Address		City				State	Zip Code	
199 Branford St		Hartford	, .			СТ	06112-1	1406
Principal Occupation Civil Engineer			1	of Employer MDC				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more th	or business	he/she i			Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? No. 1033023a	Is contributor a principal of a state If yes, indicate which branch o		or pros	pective state contracto	r? Yes			\$100.00
If yes, list Event # 033023a	branches of government the contract is with:	Ex	cecutive	eLegisl	ative [V] 140			
Method of contribution: Cash Personal Check Credit/Debi	it Card Payroll Deduction	Money Ord	ler	Date Received 03/30/2023	Aggregate contributions \$100.00			
·					<u>, </u>			

\$250.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 58 of 70

Store for Treasurer 2023 April 10 filing	NAME OF COMMITTEE (Provide Comp	lete Name as Registered with Fi	iling Reposi	itory)		TYPE OF REPORT	valota a		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
Substitution For definition of Small Contributory Substitutions from Individuals	Sierra for Treasurer 2023					April 10 filing	<u></u>		
B. Itemized Contributions from Individuals From	A. Total Contributions from Small C	ontributors - Received this	Period O	NLY					
Parallecide Picts Daniel State Daniel	(See instructions for definition of Small Co.	ntributor)			Subtotal Section A	X .			\$0.00
Pandiscia Daniel	St. 12 (44)	B. Itemized C	Contributi	ions fr	om Individuals				(2)
Residential Street Address 37 Sao Creek Ave Name of Employee DefRoyal	Last Name			First					M.I.
Name of Employer Security S	Pandiscia			Dan	iel				
Name of Employer DeRoyal	Residential Street Address		City	<u> </u>			State	Zip Code	<u> </u>
Assistant Manager to contribution a foldysist, spowers, or dependent child of a lobbysist? In this contribution associated with an executive officer of a manicipality does contributor or business holds is associated with have a contract with axid manicipality valued at more than \$5,0007	37 Sea Crest Ave		Niantic				СТ	06357-3	807
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes Mo	/			3					
dependent child of a lobbyist? No	Assistant Manager			DeRo	oyal				
## Special contribution:	demandant shild of a labbraist?	municipality does contributor	or business l	he/she is	associated with have	a contract with said	Amour	nt of Conti	ribution
Pyes, list Event # 032923a	/ INTIVES	Is contributor a principal of a state	te contractor	or prosp	ective state contractor	17 Yes	1		ውድ ብ ስብ
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction Money Order O3/29/2023 S50.00	event reported in Section L1?	branches of government the		ecutive	Legisl	√ V No			გ ეს.სს
Last Name Zaheer Residential Street Address 332 Conestoga Way Principal Occupation Medical Supplies Vendor Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution associated with an contract is with: City Glastonbury	Method of contribution:	Contract is with.					1		
Rafey Rafey Rafey Rafey Rafey Rafey Rafey Rafey Residential Street Address City Glaston-bury Glaston-bury Glaston-bury City Glaston-bury City Glaston-bury City Glaston-bury Rafey R	Cash Personal Check Credit/De	oit Card Payroll Deduction	Money Ord	ler	03/29/2023	\$50.00			
Residential Street Address 332 Conestoga Way Principal Occupation Medical Supplies Vendor Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section 1.17 If yes, list Event # 032923a Is this contributor a lobbyist, spouse, or dependent child of a lobbyist? Method of contribution State City Medzah Amount of Contribution Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: Silva Method of contribution: City Wethersfield Silva State City Wethersfield State City Wethersfield State City No State State Silva Amount of Contribution State Amount of Contribution Silva Amount of Contribution Silva Amount of Contribution Silva Amount of Contribution Contribution Silva Amount of Contribution Silva Amount of Contribution Silva Amount of Contribution Silva M.I. Hideky Residential Street Address Occupation Computer Engineer Is contributor a lobbyist, spouse, or dependent child of a lobbyist? No Is this contribution associated with an order of the security of the securi	Last Name			First			<u></u> -		M.I.
State Constitution Contribution Contributio	Zaheer			Rafe	э у				
Principal Occupation Medical Supplies Vendor Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contributor a principal of a state contractor or prospective state contractor? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality dose contributor or business he/she is associated with avea a contract with said municipality and the armore than \$5,0007? Is this contribution associated with an event reported in Section L17 If yes, indicate which branch or branches of government the contract is with: Silva	Residential Street Address		City	<u> </u>					
Medical Supplies Vendor Is contributor a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business hu/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # 032923a	332 Conestoga Way		Glaston	bury			СТ	06033-3	3361
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	[1		-			
Information	Medical Supplies Vendor			Medz	zah				
sevent reported in Section L1?	dance dance ability of a labeliated	municipality does contributor	or business l		associated with have	a contract with said	Amour	nt of Cont	ribution
State Stat		Is contributor a principal of a sta	te contractor	or prosp	occtive state contractor	r? \(\subseteq \text{Yes} \)			ቀ ልፎል ልል
Contract is with: Executive Legislative	event reported in Section 2.17	1	er			·]		\$250,00
Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 03/29/2023 \$250.00	If yes, list Event # 032923a		☐ Ex	ecutive	Legisi	ative [V] 110	1		
Last Name First M.I. Hideky Silva Residential Street Address City Wethersfield Principal Occupation Computer Engineer Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Ves If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality valued at more than \$5,000? Yes No Is this contribution associated with an event reported in Section L1? No If yes, list Event # 032923a No M.I. M. M. M. M.							1		
Residential Street Address 80 Hillcrest Ave Wethersfield Name of Employer Athletic Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? If yes, list Event # 032923a Method of contribution: City Wethersfield State Zip Code O6109-2101 Name of Employer Athletic Name of Employer Amount of Contribution Name of Employer Amount of Contribution Name of Employer Amount of Contribution Name of Employer Amount of Contribution Name of Employer Amount of Contribution Name of Employer Amount of Contribution Name of Employer Amount of Contribution Name of Employer Amount of Contribution Name of Employer Amount of Contribution Name of Employer Amount of Contribution Name of Employer Of 109-2101	<u> </u>	oit Card Payroll Deduction	Money Ord		03/29/2023	\$250.00	<u> </u>		
Residential Street Address 80 Hillcrest Ave Wethersfield Name of Employer Athletic Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? If yes, list Event # 032923a Method of contribution: City Wethersfield Wethersfield CT O6109-2101	Last Name			First					M.I.
80 Hillcrest Ave Principal Occupation Computer Engineer Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? If yes, list Event # 032923a Method of contribution: Wethersfield Name of Employer Athletic Athletic Athletic Athletic Amount of Contribution of a contribution of a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes Yes If contribution a principal of a state contractor or prospective state contractor? Yes Yes \$150.00 Amount of Contribution or prospective state contractor? Yes State Contribution or prospective state contractor? Yes Aggregate contributions	Hideky			Silva	a				L
Principal Occupation Computer Engineer Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is this contribution associated with an event reported in Section L1? If yes, list Event # 032923a Method of contribution: Name of Employer Athletic Athletic Athletic Athletic Amount of Contribution of a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes If contribution or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes If yes, indicate which branch or branches of government the contract or prospective state contractor? Yes \$150.00 Method of contribution: Date Received Aggregate contributions	1								2404
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is contribution a lobbyist, spouse, or dependent child of a lobbyist? If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Is this contribution associated with an event reported in Section L1? If yes, list Event # 032923a No If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality valued at more than \$5,000? Yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality valued at more than \$5,000? Yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality valued at more than \$5,000? Yes Yes \$150.00 If yes, list Event # 032923a Date Received Aggregate contributions			vvetner		672 1		UI.	06109-2	101
Mo municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No Yes No Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state contractor or prospective state contractor? Yes \$150.00 If yes, list Event # 032923a No No Executive Legislative Legislative Legislative Legislative Method of contributions Date Received Aggregate contributions Afficient of the contractor of prospective state contractor? Yes \$150.00 Method of contribution: Date Received Aggregate contributions Date Received 1			1 .						
event reported in Section L17 If yes, list Event # 032923a No If yes, list Event # 032923a No State which branch or branches of government the contract is with: Executive Legislative	dance dent skild a Co lobberint?	municipality does contributor	or business !	he/she is	associated with have	a contract with said	Amour	it of Cont	ribution
If yes, list Event # 032923a No branches of government the contract is with: Method of contribution: If yes, indicate which branch or branches of government the contract is with: Executive Legislative		• •		or prosp	occtive state contracto.	r? Yes			\$150 0 0
Method of contribution: Date Received Aggregate contributions	event reported in Section 1.17	branches of government the		ecutive	. TLegist	✓No			ψ100.00
		contract is with:					}		
		bit Card Payroll Deduction	Money Ord	ler					

\$450.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

SEEC FORM 20 Revised January 2015

I. MONETARY RECEIPTS (Sections A-K)

Page 59 of 70

NAME OF COMMITTEE (Provide Comp	lete Name as Registered with Fi	ling Reposi	itory)	(5) (5) (5) (5) (5)	TYPE OF REPORT			j. (2.9)
Sierra for Treasurer 2023					April 10 filing			
A. Total Contributions from Small Co (See instructions for definition of Small Con		Period O		Subtotal Section A				\$0.00
	B. Itemized C	ontributi	ons fr	om Individuals				
Last Name			First					M.I.
Reategui-Gomez			Luis	;				
Residential Street Address		City				State	Zip Code	
382 Goff Rd		Wethers	sfield			CT	06109-2	2408
Principal Occupation Realestate			ı	of Employer Reality Corp				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amour	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? **Market Report	Is contributor a principal of a stat If yes, indicate which branch of branches of government the contract is with:	r	or prosp		∐ 1es ✓ No			\$250.00
Method of contribution: ☐ Cash Personal Check ☐ Credit/Deb	it Card Payroll Deduction	Money Ord	er	Date Received 03/29/2023	Aggregate contributions \$250.00			
Last Name			First					M.L.
Winkler			Dan	ielle				
Residential Street Address		City				State	Zip Code	
8 Pershing Dr		Plainvill	e			СТ	06062-2	2919
Principal Occupation Senior Counselor			ł	of Employer eler Clinic				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Авношт	nt of Cont	ribution
Is this contribution associated with an event reported in Section L1? Yes Yes, list Event #	Is contributor a principal of a stat If yes, indicate which branch or branches of government the	г	or prosp		∐ res ✓No			\$100.00
Method of contribution: ☐ Cash ☐ Personal Check ✓ Credit/Deb	contract is with:	Money Ord		Date Received 03/31/2023	Aggregate contributions \$100.00			
Last Name			First					M.I.
Cruz-Serrano			San	dy				
Residential Street Address		City				State	Zip Code	
113 Stage Coach Rd		Windso		 		СТ	06095-	1249
Principal Occupation Administrator			Name (of Employer C				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of municipality does contributor municipality valued at more the	or business l				Amour	nt of Cont	ribution
Is this contribution associated with an cvent reported in Section L1? If yes, list Event #	Is contributor a principal of a stat If yes, indicate which branch of branches of government the contract is with:	г	or prosp ecutive		∐ les √No	يا ما جوال		\$150.00
Method of contribution: Cash Personal Check Credit/Deb	it Card Payroll Deduction	Money Ord	er	Date Received 03/31/2023	Aggregate contributions \$150.00			

\$500.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

of

NAME OF COMMITTEE (Provide Complete Name as Registered with Fili	ng Reposito	ry)		TYPE OF REPORT			
Sierra for Treasurer 2023		<u></u>		April 10 filing			
A. Total Contributions from Small Contributors - Received this P	eriod ON	LY					
(See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
B. Itemized Co	ntributio	ns fr	om Individuals				
Last Name	71, 11 11 11 11, 11, 11, 11, 11, 11, 11,	First		ende te en an en discuse y en altrant in president de sant de sant de sant en en automobilité de la company de	2445 T251 045 CV CTC	en statue ne native en milita	M.I.
Reategui		Marc	garet				
	City	ividit	30101		State	Zip Code	L
	Wethersfi	ield			CT	06109-2	517
Principal Occupation			of Employer				
Manager			Realty Corp				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$\frac{1}{2}\$ If contribution is in excess of \$\frac{1}{2}\$	r business he/ in \$5,000?	shc is	associated with have	a contract with said No	Amoun	nt of Cont	
event reported in Section L1? If yes, list Event # 032923a If yes, indicate which branch or branches of government the contract is with:	Exec	utive	Legisla	√No			\$150.00
Method of contribution: ☐ Cash ☐ Personal Check ☐ Credit/Debit Card ☐ Payroll Deduction ☐ 1	Money Order		Date Received 03/29/2023	Aggregate contributions \$150.00			
Last Name		First			·		M.I.
Reategui	}	Jess	ica				
Residential Street Address	City				State	Zip Code	
75 Colonial Dr	Wethersfi	ield			СТ	06109-2	517
Principal Occupation			f Employer				
Director of Operations	ĮR	Rego	Realty Corp				
Is contributor a lobbyist, spouse, or Yes If contribution is in excess of \$\frac{1}{2}\$ dependent child of a lobbyist? Yoo municipality does contributor or municipality valued at more that	r business he/				Amoun	nt of Contr	ibution
Is this contribution associated with an Yes Is contributor a principal of a state	contractor or	prosp	ective state contractor	? Yes	}		\$250.00
event reported in Section L.1? If yes, indicate which branch or branches of government the				✓No	-		Ψ200.00
If yes, list Event # 032923a INO branches of government the contract is with:	Exec	utive	Legisla	itive	}		
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction I	Money Order		Date Received 03/29/2023	Aggregate contributions \$250.00			
Last Name		First					M.I.
Griffin	[]	Viole	eta				
	City				State	Zip Code	
474 Church St	Wethersfi	ield			CT	06109-2	8008
Principal Occupation Bookkeeper			FEmployer Realty Corp				
Is contributor a lobbyist, spouse, or Yes If contribution is in excess of \$\frac{1}{2}\$ dependent child of a lobbyist? No If contribution is in excess of \$\frac{1}{2}\$ municipality does contributor of municipality valued at more than	r business he/				Amoun	it of Conti	ibution
Is this contribution associated with an Yes Is contributor a principal of a state	contractor or	prosp	ective state contractor	? Yes			\$250.00
event reported in Section L1? If yes, list Event # 032923a No If yes, list Event # 032923a If yes, list Event # 032923a If yes, indicate which branch or branches of government the contract is with:	Exec	utive	Legisla	wive No			ψ ∠ υυ.υι
Method of contribution: Cash Personal Check Credit/Debit Card Payroll Deduction 1	Money Order		Date Received 03/29/2023	Aggregate contributions \$250.00			

\$650.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
\$26,696.00	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

Page 61 of 70

NAME OF COMMITTEE (Provide Complete Name as Registered with File	ing Reposi	itory)		TYPE OF REPORT			
Sierra for Treasurer 2023				April 10 filing			_
A. Total Contributions from Small Contributors - Received this I	Period O	NLY					
(See instructions for definition of Small Contributor)			Subtotal Section A				\$0.00
B, Itemized Co	ontributi	ons f	rom Individuals		ra iya		
Last Name		First					M.I.
Reategui		Pila	r				
Residential Street Address	City		,		State	Zip Code	
382 Goff Rd	Wethers	sfield			CT	06109-2	408
Principal Occupation			of Employer				
Manager		Rego	Realty Corp				
Is contributor a lobbyist, spouse, or Yes If contribution is in excess of \$\frac{1}{2}\$ dependent child of a lobbyist? No If contribution is in excess of \$\frac{1}{2}\$ municipality does contributor of municipality valued at more that	r business l				Amour	t of Cont	ibution
Is this contribution associated with an Yes Is contributor a principal of a state	contractor	or pros	pective state contractor	[?]			\$250.00
event reported in Section L1? If yes, list Event # 032923a If yes, list Event # 032923a If yes, list Event # 032923a If yes, indicate which branch or branches of government the contract is with:	_	ecutive	eLogisla	✓ No			ΦΖ Ο υ.υ υ
Method of contribution: ☐ Cash Personal Check Credit/Debit Card Payroll Deduction ☐	Money Orde	er	Date Received 03/29/2023	Aggregate contributions \$250.00			
Last Name		First					M,I,
Curtis		Lav	vrence				
Residential Street Address	City			****	State	Zip Code	
211 lpswich Rd	Boxford	l			MA	01921-1	619
Principal Occupation			of Employer				
President		Winn	Development				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Wes a lf contribution is in excess of smunicipality does contributor of municipality valued at more than the contribution is in excess of smunicipality valued at more than the contribution is in excess of smunicipality valued at more than the contribution is in excess of smunicipality valued at more than the contribution is in excess of smunicipality valued at more than the contribution is in excess of smunicipality valued at more than the contribution is in excess of smunicipality.	r business b				Amoun	t of Conti	ibution
Is this contribution associated with an count reported in Section L.1? Is contributor a principal of a state If yes, indicate which branch or	contractor	or pros	pective state contractor	☐ res			\$250.00
If yes, list Event # 032923a No branches of government the contract is with:	Ехс	ecutive	E Legisla	tive No			
Method of contribution: Cash ✓ Personal Check Credit/Debit Card Payroll Deduction	Money Ordo	er	Date Received 03/29/2023	Aggregate contributions \$250.00			
Last Name		First					M.I.
Merced		Mai	ia :				
Residential Street Address	City				State	Zip Code	
304 3rd Ln	Greena				FL	33463-4	346
Principal Occupation Retired		Name Retir	of Employer ed				
Is contributor a lobbyist, spouse, or	er business l				Amour	it of Conta	ibution
Is this contribution associated with an event reported in Section L1? Yes Is contributor a principal of a state		or pros	pective state contractor	? Yes			\$100.00
If yes, list Event # If yes, indicate which branch or branches of government the contract is with:		ecutive	Legisla	— √No ative			¥,00.00
Method of contribution:	Money Orde		Date Received 03/31/2023	Aggregate contributions \$100.00			
			<u> </u>				

\$600.00	SUBTOTAL Section B - This Page
\$26,696.00	TOTAL of Section B Pages
320.090.U L	TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page

SEEC	FORM	20	
Revised	l lannary	201	5

Page	62	of	70
e T			

A. Total Contributions from Small Contributors - Received this Period ONLY (See instructions for definition of Small Contributor) B. Itemized Contributions from Individuals First
Subtotal Section A Subtotal Section A Subtotal Section A
B. Itemized Contributions from Individuals Last Name First M.I. Jaynes Frances Residential Street Address City State Zip Code 83 APT B MORRIS St Hartford CT 06114 Principal Occupation Name of Employer Clinical Research Assistant State Gronnecticut
Last Name Jaynes Frances Residential Street Address Residential Street Address Residential Street Address B3 APT B MORRIS St Hartford Name of Employer Clinical Research Assistant Name of Connecticut
Jaynes Frances Residential Street Address Resid
Residential Street Address 83 APT B MORRIS St Principal Occupation Clinical Research Assistant City Hartford CT 06114 Name of Employer State of Connecticut
83 APT B MORRIS St Hartford CT 06114 Principal Occupation Name of Employer Clinical Research Assistant State of Connecticut
Principal Occupation Clinical Research Assistant Name of Employer State of Connecticut
Clinical Research Assistant State of Connecticut
West to the state of the state
Is contributor a lobbyist spouse or Yes If contribution is in excess of \$400 to a condidate committee for a chief executive officer of a
dependent child of a lobbyist? Test It contribution is in excess of \$400 to a candidate committee for a chief executive officer of a chief executive of a chief ex
Is this contribution associated with an Yes Is contributor a principal of a state contractor or prospective state contractor? Yes S50.0
VNo
If yes, list Event#
Method of contribution: Date Received Aggregate contributions Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 03/31/2023 \$50.00
Last Name Pirst M.I.
Acosta Michael
Residential Street Address City State Zip Code
777 Main St Hartford CT 06103-2308
Principal Occupation Name of Employer
Student Student
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No Amount of Contribution
Is this contribution associated with an Yes Is contributor a principal of a state contractor or prospective state contractor? Yes \$250.0
If yes, indicate which branch or
If yes, list Event # branches of government the contract is with: Executive Legislative
Method of contribution: Date Received Aggregate contributions Cash Personal Check ✓ Credit/Debit Card Payroll Deduction Money Order 03/31/2023 \$250.00
Last Name First M.I.
Rose Jillian
Residential Street Address City State Zip Code 190 Blue Ridge Dr Manchester CT 06040-6818
190 Blue Ridge Dr Manchester C1 06040-6818 Principal Occupation Name of Employer
Vice President and Chief Health Equity Officer Hospital for Special Surgery
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she is associated with have a contract with said municipality valued at more than \$5,000? Yes No
Is this contribution associated with an vest contributor a principal of a state contractor or prospective state contractor? If yes, list Event # Is contributor a principal of a state contractor or prospective state contractor? Yes If yes, indicate which branch or branches of government the contract is with: Executive Legislative
Method of contribution: Date Received Aggregate contributions Cash Personal Check Credit/Debit Card Payroll Deduction Money Order 03/31/2023 \$100.00

SUBTOTAL Section B - This Page	\$40
TOTAL of Section B Pages	\$26,69
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A + B) (Enter total on Line 13, Column A of Summary Page	\$26,6

I. MONETARY RECEIPTS (Sections A-	K)	Page	63	of	70
NAME OF COMMITTEE (Provide Complete Name as Registered with Filing Repository)	TYPE OF RE	PORT		12.00	
Sierra for Treasurer 2023	April 10 filing	9			
Summary of Other Monetary Receipts (Sections D-K)					
Total Loans Received this Period (Section D)					\$0.00
Total Receipts from Entities other than Individuals or Other Committees (Section E)	+				\$0.00
Total Amount Transferred from Affiliated Business Treasury (Section F)	+				\$0.00
Total Amount Transferred from Affiliated Labor Union or Other Organization Treasury (Section G)	+				\$0.00
Total Amount of Personal Funds of the Candidate Received this Period (Section H)	+				\$0.00
Total Amount of Interest from Deposits in Authorized Accounts (Section J)	+				\$0.00
Total Miscellaneous Monetary Receipts not Considered Contributions (Section K)	+				\$0.00

SEEC FORM 20	
Revised January 2015	

II. EVENT ACTIVITY (Sections L1-L5)

one	64	of	7
age	04	OI	- /

NAME OF COMMITTEE	(Provide Complete Name as Registered with .	Filing Repository)	TYPE OF REPORT				
Sierra for Treasurer 20	23		April 10 filing				
	L1. Event Info	ormation					
Event # Date of Event Letter 03/29/2023 a	Description Meet and Greet Event			Was this a fundraising event? ✓ Yes No			
Location: Street Address 161 Main St		City Wethersfield	State CT	·			
Subpart 1: (All Com Was this event hosted	amittees) at a personal residence?	Yes (If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.)					
	lude goods or services donated by a by \$200 or items donated by an individual	Yes (If yes, go to Section L4 In-Kind Donations not Considered No Contributions and complete required information.)					
	ag sale, auction, or other sale of donated y an individual of up to \$100?	Yes (If yes, enter Total Receipts here.) No					
1	Committees, Municipal Candidates and of advertising space in a program book or ith this fundraiser?	Yes (If yes, go to Sect	-	Advertising Space in a			
Subpart 3: (Town C Did your committee se mass gathering held wi	ll food or beverage at a fair or similar	□Yes (<i>If yes</i> , enter Tota	al Receipts here.)				

SUBTOTAL Section L1-Subpart 1 (All Committees) Total Receipts from Sale of Donated Items - This Page	\$0.00
SUBTOTAL Section L1-Subpart 3 (Town Committees ONLY) Total Receipts from Food Purchases - This Page	\$0.00
TOTAL of Section L1 Pages	\$0.00
TOTAL OF ALL RECEIPTS FROM SMALL PURCHASES (Enter total on Line 16a, Column A of Summary Page Totals)	\$0.00

SEEC FORM 20
Revised January 2015

II. EVENT ACTIVITY (Sections L1-L5)

Page	65	of	7
	~~		,

NAME OF COMMIT	ree	(Provide Complete Name as Registered with 1	Filing Reposi	'ory)	TYPE OF REP	ORT			
Sierra for Treasurer	202	3			April 10 filing				
Edition Control No. 11		L1. Event Info	ormation						
Event # Date of Event Let 03/30/2023 a	ter	Description Meet and Greet Event					Was this a fundraising event? ✓ Yes No		
Location: Street Addres	s		City Windsor			State CT	Zip Code 06095-1549		
Subpart 1: (All Committees) Was this event hosted at a personal residence?				Yes (If yes, go to Section L5 In-Kind Donations not Considered Contributions Associated with a House Party and complete required information for any purchases made by host(s) for food, beverage and invitations.)					
Did this fundraiser include goods or services donated by a business entity of up to \$200 or items donated by an individual of up to \$100?			Yes (If yes, go to Section L4 In-Kind Donations not Considered No Contributions and complete required information.)						
Was this fundraiser a tag sale, auction, or other sale of donated items with purchases by an individual of up to \$100?			☐Yes (If yes, enter Total Receipts here.) ✓No						
1	ses o	ommittees, Municipal Candidates and fadvertising space in a program book or h this fundraiser?	_	Tes (If yes, go to Section	on L3 Purchas	ses of Adv	ertising Space in a		
Subpart 3: (Town Committees ONLY) Did your committee sell food or beverage at a fair or similar mass gathering held within the state?				^{(es} (<i>If yes</i> , enter Total No	Receipts here	;.)			

SUBTOTAL Section L1-Subpart 1 (All Committees) Total Receipts from Sale of Donated Items - This Page	\$0.00
SUBTOTAL Section L1-Subpart 3 (Town Committees ONLY) Total Receipts from Food Purchases - This Page	\$0.00
TOTAL of Section L1 Pages	\$0.00
TOTAL OF ALL RECEIPTS FROM SMALL PURCHASES (Enter total on Line 16a, Column A of Summary Page Totals)	\$0.00

II. EVENT ACTIVITY (Sections L1—L5)

Page 66 of 70

NAME OF COMMITTEE	(Provide Complete No	ime as Registered with F	iling Reposi	tory) TYPE O	F REPO	RT	
Sierra for Treasurer 2023 April 10 filing							
Si delle manifere delle periodice delle conservatione delle conservation delle conservation delle conservation	L3.	Purchases of Adverti	sing in a Pi	rogram Book or on a Sign			
Name of Purchaser Purchase Made By:							
DR&B Homes LLC Business Entity Other Individual/Sole Proprietorship							Other
Street Address	- option		City			State	Zip Code
			Hartford			СТ	06114-1900
722 Wethersfield Ave						<u> </u>	
03/09/2023	Event # 032923a	Aggregate Purchases fo	\$250.00	Amount of Progam Ad Purch		Amount	of Sign Purchase
			*	\$250.	uu		\$0.00
Name of Purchaser					Purchase 1	•	Z or
Metro Autobody and To	wing				=	ness Entity /idual/Sole Pr	Other
Street Address		··	City			State	Zip Code
			Hartford			CT	06114-1900
722 Wethersfield Ave	Event#	Aggregate Purchases fo				<u> </u>	
03/09/2023	032923a	Aggregate Purchases 10	\$250.00	Amount of Progam Ad Purch		Amount (of Sign Purchase
			•	\$250.	00		\$0.00
Name of Purchaser					Purchase l		✓ Other
International Marble & C	of .					ness Entity zidual/Sole Pr	
Street Address			City		Щ	State	Zip Code
440.41			Hartford			CT	06114-2005
110 Airport Rd Date Received	Event #	Aggregate Purchases fo	rall Eugata	4	-: 1	<u> </u>	ea: P 3
03/29/2023	032923a	Aggicgate Furchases to	\$250.00	Amount of Progam Ad Purch \$250.	1	Amount	of Sign Purchase \$0.00
				φ230.	00		φυ.υυ
Name of Purchaser					Purchase I	Made By: ness Entity	✓ Other
End-Game Strategy Inc	-					ridual/Sole Pr	_
Street Address			City			State	Zip Code
4400 D#- T-I Ct- 4			Berlin			СТ	06037-3251
1400 Berlin Tpke, Ste 4 Date Received	Event #	Aggregate Purchases fo	rall Evente	Amount of Progam Ad Purch		Amount	of Sign Purchase
03/29/2023	032923a		\$250.00	\$250.	- 1	Amount (\$0.00
				φ230.	00		Ψ0.00
Name of Purchaser American Ladders & Sc	affo				Purchase l	Made By: ness Entity	✓ Other
American Lauders & OC	ano					ridual/Sole Pr	oprietorship
Street Address		···	City			State	Zip Code
129 Kreiger Ln			Glastonbu	ury		CT	06033-2327
Date Received	Eyent#	Aggregate Purchases fo	r all Events	Amount of Progam Ad Purch	1959	Amount	of Sign Purchase
03/29/2023	032923a	100-100-100	\$250.00	\$250.	1	Amount	\$0.00
				· · · · · · · · · · · · · · · · · · ·			40.00
Name of Purchaser Vince Group Inc.					Purchase I Busii	Made By: ness Entity	✓ Other
Villago Group ino.					Indiv	ridual/Sole Pr	
Street Address			City	And resident Mark		State	Zip Code
140 Glastonbury Blvd, S	Sto 26		Glastonbu	ıry		CT	06033-4459
Date Received	Event #	Aggregate Purchases fo	r all Events	Amount of Progam Ad Purch	ase	Amount o	of Sign Purchase
03/29/2023	032923a		\$250.00	\$250.			\$0.00
							•
SUBTOTAL Section L3 Total Purchases of Advertising in a Program Book - This Page \$1,500.00							
			SUBTO Total Pu	TAL Section L3 <i>(Town Con</i> rchases of Advertising on a	<i>nmittee</i> Sign - Ti	s ONLY) his Page	\$0.00
TOTAL of Section L3 Pages \$2,250.00							
	ТОТ			TISING IN A PROGRAM BOO			
		(Ente	er total on L	ine 16c, Column A of Summ	ary Pag	e Totals)	\$2,250.00

II. EVENT ACTIVITY (Sections L1—L5)

Page

17

70

of

NAME OF COMMITTEE	(Provide Complete 1	lame as Registered with I	Filing Reposi	tory)	TYPE O	F REPO	ORT	
Sierra for Treasurer 2023 April 10 filing								
	L3	Purchases of Adverti	sing in a Pı	ogram Book or on a	Sign			
Name of Purchaser Rego Realty Corp.						Bu	e Made By: siness Entity lividual/Sole Pr	✓ Other
Street Address 15 Webster St			City Hartford				State CT	Zip Code 06114-1220
Date Received 03/29/2023	Event # 032923a	Aggregate Purchases fo	or all Events \$250.00	Amount of Progam A	Ad Purch \$250.		Amount	of Sign Purchase \$0.00
Name of Purchaser Brave Consulting Solution	on					Bu	e Made By: siness Entity lividual/Sole Pr	Other oprietorship
Street Address 302 Maple Ave			City Hartford				State CT	Zip Code 06114-1046
Date Received 03/30/2023	Event # 032923a	Aggregate Purchases fo	or all Events \$250.00	Amount of Progam A	4d Purch \$250.0		Amount	of Sign Purchase \$0.00
Name of Purchaser Charles Drake Enterpris	ses	1				Bus	e Made By: siness Entity lividual/Sole Pr	Other oprietorship
Street Address 181 Main St			City Wethersfi	eld			State CT	Zip Code 06109-2339
Date Received 03/31/2023	Event # 032923a	Aggregate Purchases fo	or all Events \$250.00	Amount of Progam A	\$250.		Amount	of Sign Purchase \$0.00

\$750.00	SUBTOTAL Section L3 Total Purchases of Advertising in a Program Book - This Page
\$0.00	SUBTOTAL Section L3 <i>(Town Committees ONLY)</i> Total Purchases of Advertising on a Sign - This Page
\$2,250.00	TOTAL of Section L3 Pages
\$2,250.00	TOTAL OF PURCHASES OF ADVERTISING IN A PROGRAM BOOK or ON A SIGN (Enter total on Line 16c, Column A of Summary Page Totals)

SEEC FORM	20
Revised January	2015

III. NONMONETARY RECEIPTS (Sections M-O)

age	68	of	7

NAME OF COMMITTEE (Provide Complet	te Name as Registe	red with Filing Reposit	tory)	TYPE OF R	EPORT		
Sierra for Treasurer 2023				April 10 filir	ng		
		M. In-Kind Contri	bution	8		gan is	
Name							
Brenda Torres							
Street Address		C	ity			State	Zip Code
340 Arch St			New Britain			CT	06051-2521
Type of Contributor: Committee De	ate Received	Aggregate Contributions	s I	Description of In-Kind Contribution			
✓ Individual / Sole Proprietorship Other 03/30/2023 \$185.00 Food for event							
	municipality does co	ontribution is in excess of \$400 to a candidate committee for a chief executive officer of a picipality does contributor or business he/she is associated with have a contract with said cliepality valued at more than \$5,000? Fair Market Value Contribution Contribution				,	
Is this contribution associated with an Yes	Is contributor	a principal of a state contra	actor or p	rospective state contractor? Ye	s		\$185.00
event reported in Section L1?		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
If yes, list Event #	government	the contract is with:	Exec	utive Legislative VINC	<u></u>		

SUBTOTAL Section M - This Page	\$185.00
TOTAL of Section M Pages	\$185.00
TOTAL OF ALL IN-KIND CONTRIBUTIONS (Enter total on Line 23, Column A of Summary Page Totals)	\$185.00

SEEC FO	DRM 20
Revised Is	nuary 2015

IV. EXPENDITURES (Sections P-T)

Page	69	of	7

NAME OF COMMITTE	E (Provide Complete Name as Registered with Filing	Repository)		TYPE OF REPORT			
Sierra for Treasurer 2023 April 10 filing							
	P. Expense	s Paid by Commit	ltee		uniu alaman a		
Name of Payee Harland Clarke				Date of Payment 03/16/2023	Method of Check	#	
Street Address 15955 La Cantera Pl	(wy	City San Antonio			State TX	Zip Code 78256-2589	
Purpose of Expenditure (by code) BNK	Description Event # Checks					Amount	
Expenditure # (If applicable)	Type of Expenditure (Itemization in Addendum P Required un None of the below (does not involve another candidate or Coordinated with reimbursement sought (joint expenditure) Coordinated without reimbursement sought (in-kind control of the contro	committee) Indeper	ident	cked)		\$40.30	
Name of Payee Bank of America Date of Payment 03/31/2023				Method of Payment Check # Debit Card FFT			
Street Address 790 Maple Ave		City Hartford			State CT	Zip Code 06114-2317	
Purpose of Expenditure (by code) BNK	Description		Even	t #	Amount		
Expenditure # (if applicable)						\$20.00	
Name of Payee Paragon Payment So	olutions			Date of Payment 03/31/2023	Method of Check	#	
Street Address		City Tempe			State AZ	Zip Code 85282-1895	
2141 E Broadway Ro	Y	rempe			^2	00202-1090	
Purpose of Expenditure (by code) BNK	Description Transaction fees	1	Even	t#		Amount	
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum P Required un None of the below (does not involve another candidate or Coordinated with reimbursement sought (joint expenditure) Coordinated without reimbursement sought (in-kind control of the contro	committee) Indeper	ndent	_A B C D		\$676.25	

SUBTOTAL Section P - This Page	\$736.55
TOTAL of Section P Pages	\$736.55
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 19, Column A of Summary Page Totals)	\$736.55

NAME OF COMMITT	EE (Provide Complete Name as Registered with Filing Repository)		TYPE O	F REPORT		
	S. Expenses Incurred by Comm	nittee but Not Paid	During this	Period		
Name of Creditor					Date Incurred	
Blue Edge Strate	gies	T		···········	March 1	
Street Address		City			State	Zip Code
983 Main Street		Manchester			СТ	06040
Purpose of Expenditure (by code) CONS	Description Consulting		Event#		l .	unt Incurred mate or Actual)
Expenditure # (if applicable) Type of Expenditure (Itemization in Addendum S Required unless "None of the below" is checked) None of the below Coordinated with reimbursement sought (joint expenditure) Coordinated without reimbursement sought (in-kind contribution) Organization: OB OC OD					1000	
Name of Creditor					Date Incurre	:d
The Charles					March 2	29, 2023
Street Address		City			State	Zip Code
161 Main St		Wethersfield			СТ	06109
Purpose of Expenditure	Description		Event#			unt Incurred
(by code) EVNT	Event Costs		032923a		(Esti	nate or Actual)
Expenditure # (if applicable)	Type of Expenditure (Itemization in Addendum S Required to	ınless "None of the below" i	is checked)	<u></u>	1,105.27	
	None of the below Coordinated with reimbursement sought (joint expendit Coordinated without reimbursement sought (in-kind con		radent zation: OA O	в Ос Ор		,
Name of Creditor					Date Incurre	d
Blue Edge Strate	gies				March 3	31, 2023
Street Address		City			State	Zip Code
983 Main Street		Manchester			CT	06040
Purpose of Expenditure (by code)	Description		Event#		-	unt Incurred nate or Actual)
WEB	Website				,	,
Expenditure # (If applicable)	Type of Expenditure (Itemization in Addendum S Required to	inless "None of the below"	is checked)		500	
	None of the below Coordinated with reimbursement sought (joint expendit Coordinated without reimbursement sought (in-kind con		zation: OA O	в Ос Ор		_
		SUBTOTAL Section	S-This Page	2605.27		
141. 41 1. 41. 11		OTAL of additional Sec	tion S Pages	0		
TOTAL OF ALL E	XPENSES INCURRED BY COMMITTEE DURII (Enter total on Li	NG THIS PERIOD BUT ine 28, Column A of Summa	NOT PAID Try Page Totals)	2605.27		
	Previously reported Expe	enses Unpaid and still O	utstanding	0		
	TOTAL OF ALL EXPENSES INCURRED (Enter total on Lin	BY COMMITTEE BU' e 28a, Column A of Summa		2605.27		