

SEEC FORM 20

Itemized Campaign Finance Disclosure Statement
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
Revised January 2012



131523

FILED SEEC

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1. NAME OF COMMITTEE			
Connecticut Republican SCC			
2. TREASURER NAME			
First Gary	MI M.	Last Schaffrick	Suffix
3. TREASURER ADDRESS			
Street Address 515 Emmett ST Apt. 14	City Bristol	State CT	Zip Code 06010
4. ELECTION/REFERENDUM DATE <small>(mm/dd/yyyy)</small> 11/05/2013	5. OFFICE SOUGHT <i>(Complete only if Candidate Committee)</i>		6. DISTRICT NUMBER <small>(if applicable)</small>
7. CANDIDATE NAME <i>(Complete only if Candidate or Exploratory Committee)</i>			
First	MI	Last	Suffix
8. TYPE OF REPORT <i>(Check One Box)</i>			
<input type="checkbox"/> January 10 filing	<input type="checkbox"/> 7th day preceding primary	<input type="checkbox"/> 7th day preceding referendum	<input type="checkbox"/> Initial Contribution or Disbursement <i>(PACs ONLY)</i>
<input type="checkbox"/> April 10 filing	<input type="checkbox"/> 30 days following primary	<input type="checkbox"/> 45 days following referendum	<input type="checkbox"/> Amendment to
<input type="checkbox"/> July 10 filing	<input type="checkbox"/> 7th day preceding election	<input type="checkbox"/> Deficit	Type of Report: _____
<input type="checkbox"/> October 10 filing	<input checked="" type="checkbox"/> 12th day preceding election <small><i>(State Central Committees Only)</i></small>	<input type="checkbox"/> Termination	
<input type="checkbox"/> Independent Expenditure <input type="radio"/> Primary <input type="radio"/> Election	<input type="checkbox"/> 45 days following election not held in November		
9. PERIOD COVERED			
Beginning Date 07/01/2013	thru	Ending Date 10/17/2013	
10. CERTIFICATION			
I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete.			
 TREASURER OR DEPUTY TREASURER (SIGNATURE)	Gary M. Schaffrick PRINT NAME OF SIGNER	10/23/13 DATE (mm/dd/yyyy)	
<small>PENALTY FOR FALSE STATEMENT IS PUNISHABLE BY FINE NOT TO EXCEED \$1,000, OR IMPRISONMENT FOR NOT MORE THAN ONE YEAR, OR BOTH.</small>			

SEEC FORM 20

**Itemized Campaign Finance Disclosure Statement
Candidates for Statewide Offices and General Assembly
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION**

**SUMMARY PAGE
TOTALS**

11. NAME OF COMMITTEE	REPORT TYPE	
Connecticut Republican scc	12th Day Preceding Election-11/05/2013	
	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 from day committee was formed for all other committees		\$11,734.12
12. Balance on hand at the beginning of Reporting Period	\$14,097.24	
13. Contributions received from Individuals (Sections A and B)	\$42,985.00	\$78,846.00
14. Receipts from Other Committees (Sections C1 + C2)	\$10,250.00	\$22,853.83
15. Other Monetary Receipts (Sections D-K)	\$1.68	\$1.68
16a. Total Proceeds from Small Purchases (Section L1 subpart 1 + subpart 3)	\$0.00	\$0.00
16b. Per Public Act 11-48, effective January 1, 2012, Section L2 removed		
16c. Total Purchases of Advertising - Program Book or Sign (L3) <i>Municipal and Town Committees ONLY</i>	\$2,750.00	\$2,750.00
17. Total Monetary Receipts (add totals for lines 13-16c)	\$55,986.68	\$104,451.51
18. Subtotal (add totals in line 12 + line 17 in Column A and in lines 11 + 17 in Column B)	\$70,083.92	\$116,185.63
19. Expenses Paid by Committee (Section P)	\$23,333.61	\$69,435.32
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18 in both Columns)	\$46,750.31	\$46,750.31
21. In-Kind Donations not Considered Contributions Received (Section L4)	\$0.00	\$0.00
22. In-Kind Contributions Received (Section M)	\$0.00	\$0.00
23. Refundable Deposit to Telephone Company (Section N)	\$0.00	\$0.00
24. Receipts of Organization Expenditures (Section O) OPTIONAL	\$0.00	\$0.00
25. Beginning Loan Balance	\$0.00	
25a. + Loan(s) Received (Section D)	\$0.00	\$0.00
25b. + Interest and Penalties on Loan(s)	\$0.00	\$0.00
25c. - Payments on Loan(s)	\$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)	\$0.00	
28a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section S)	\$0.00	

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	REPORT TYPE
Connecticut Republican scc	12th day preceding elec. 11/05/13

A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$110.00
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B. Itemized Contributions from Individuals

Last Name Lemetta	First Kenneth	MI L.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 0ECE8A6A-ED00-4F3C-B737-2C4A2B57479E	Amount of Contribution
Residential Street Address 13 Hitchcock Road	City Westport	State CT	Zip Code 06880-2630	Date Received 10/02/2013	\$400.00
Principal Occupation Contractor	Name of Employer Lemetta & Sons	Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # 10213A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Aggregate contributions \$400.00
Last Name Longo	First Patricia	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # DDFC454C-9414-49DD-BFB3-7E21E7DF3687	Amount of Contribution
Residential Street Address 10102 Avalon Gates	City Trumbull	State CT	Zip Code 06611-5836	Date Received 09/09/2013	\$150.00
Principal Occupation Homemaker	Name of Employer None	Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # 10213A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Aggregate contributions \$250.00
Last Name Longo	First Patricia	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 77180B95-3227-414C-8C07-059CCE899FD9	Amount of Contribution
Residential Street Address 10102 Avalon Gates	City Trumbull	State CT	Zip Code 06611-5836	Date Received 09/24/2013	\$100.00
Principal Occupation Homemaker	Name of Employer None	Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # 10213A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Aggregate contributions \$250.00
Last Name Frantz	First Leroy	MI S	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # DAD2EE4F-5153-409F-B85C-7BCD710ABA53	Amount of Contribution
Residential Street Address 123 Meadow Rd Apt 123	City Riverside	State CT	Zip Code 06878-2521	Date Received 07/19/2013	\$5,000.00
Principal Occupation President	Name of Employer Habler Capital	Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event #		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Aggregate contributions \$10,000.00
Last Name Hudson	First Jeffery	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 882ACC84-58F1-4D04-A96D-FF3FF9E2E4CE	Amount of Contribution
Residential Street Address 15 Midbrook Ln	City Darien	State CT	Zip Code 06820-3421	Date Received 09/30/2013	\$100.00
Principal Occupation Investment Advisor	Name of Employer Cedar Ridge Partners Llc	Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # 10213A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Aggregate contributions \$100.00

SUBTOTAL Section B-This Page	\$500.00
TOTAL of additional Section B Pages	\$42,375.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE						REPORT TYPE	
Connecticut Republican scc						Form 20	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>						\$110.00	
Subtotal Section A							
B. Itemized Contributions from Individuals							
Last Name Carrier	First Francine	MI H.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # C9CBA9B8-B0DE-482C-9 043-3A30B1E19223		Amount of Contribution \$200.00
Residential Street Address 19 Winston Ct		City Bristol	State CT	Zip Code 06010-2691	Date Received 09/30/2013		
Principal Occupation Assistant Manager		Name of Employer JFC Endeavors Incorporated		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$200.00		
Last Name Porter	First Mary	MI E.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # B36ABD33-C42D-4FB0-A 78D-B06C14251980		Amount of Contribution \$250.00
Residential Street Address 314 Olivia St		City Derby	State CT	Zip Code 06418-1528	Date Received 09/27/2013		
Principal Occupation Disabled Veteran		Name of Employer N/a		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$250.00		
Last Name Farrell	First Gerald	MI E.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # 4EDD8202-E7B4-4A13-86 8B-9FDA6027D76A		Amount of Contribution \$100.00
Residential Street Address 54 N Elm St		City Wallingford	State CT	Zip Code 06492-3802	Date Received 10/02/2013		
Principal Occupation Attorney/consultant		Name of Employer Self Employed		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Mocabee	First Arthur	MI W	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # D9CAA181-41B9-4BA0-9 8A0-5FC63FC278FA		Amount of Contribution \$200.00
Residential Street Address PO Box 1943		City Bristol	State CT	Zip Code 06011-1943	Date Received 09/27/2013		
Principal Occupation Financial Consultant		Name of Employer Axa Advisors Llc		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$200.00		
Last Name Reagen	First Sally	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # 2FF56F9C-2AE7-4F0D-A 89E-E49823B5C6E7		Amount of Contribution \$100.00
Residential Street Address 303 River Run		City Greenwich	State CT	Zip Code 06831-4166	Date Received 10/02/2013		
Principal Occupation Financial Advisor		Name of Employer Wells Fargo Bank		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		

SUBTOTAL Section B-This Page	\$500.00
TOTAL of additional Section B Pages	\$42,375.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE						REPORT TYPE		
Connecticut Republican scc						Form 20		
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>						\$110.00		
B. Itemized Contributions from Individuals								
Last Name Puskar		First John		MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # A1CF4C3F-587A-41B6-91 AB-3F7F9367529E	Amount of Contribution \$100.00
Residential Street Address 14 Haverhill Place		City Trumbull		State CT	Zip Code 06611-1812	Date Received 10/11/2013		
Principal Occupation Press		Name of Employer CT House of Representatives		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A				
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Flynn		First Thomas		MI M	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # FB0A3BFA-2413-401F-8F B4-F403B7078FF9	Amount of Contribution \$100.00
Residential Street Address 87 Coral Drive		City Fairfield		State CT	Zip Code 06825-3231	Date Received 10/02/2013		
Principal Occupation Consultant/CFO		Name of Employer Coral Drive Partners		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A				
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Brickley		First Ann		MI M	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # BA70C928-BDA1-411D-A 703-4CD74F371F36	Amount of Contribution \$100.00
Residential Street Address 143 Highcrest Rd		City Wethersfield		State CT	Zip Code 06109-4000	Date Received 09/30/2013		
Principal Occupation Organizational Change Manager		Name of Employer General Electric		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A				
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name DePino		First Chris		MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # F7670347-72C4-4B7B-B0 DE-3982FF61739C	Amount of Contribution \$100.00
Residential Street Address 1160 Townsend Ave		City New Haven		State CT	Zip Code 06512-1931	Date Received 09/27/2013		
Principal Occupation Lobbyist		Name of Employer Depino Associates Llc		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A				
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Kernan		First Gilbert		MI S.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # ACA08919-7409-4D14-90 1C-A365E7C709CC	Amount of Contribution \$100.00
Residential Street Address 74 Rowayton Ave		City Norwalk		State CT	Zip Code 06853-1635	Date Received 09/30/2013		
Principal Occupation Director-Business Development		Name of Employer Soluxe Energy Solutions		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A				
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		

SUBTOTAL Section B-This Page **\$500.00**

TOTAL of additional Section B Pages **\$42,375.00**

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page) **\$42,985.00**

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		REPORT TYPE
Connecticut Republican scc		Form 20
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$110.00
Subtotal Section A		

B. Itemized Contributions from Individuals

Last Name	First	MI	Method of contribution:		Contribution ID #	Amount of Contribution
Jakab	Carol	L.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	3D43FC38-1ABE-43C4-8BAC-C815427389A0	\$125.00
Residential Street Address		City	State	Zip Code	Date Received	
30 Rosedale Cir		Shelton	CT	06484-2535	09/20/2013	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section J1?			
Nurse	Cambridge Manor Health Care		If yes, list Event # 10213A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$125.00	
McPherson	Fillmore		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	EEC22263-A62C-464D-A2BA-D8E54B231BFD	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
29 Evarts Ln		Madison	CT	06443-2564	09/24/2013	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section J1?			
First Selectman			If yes, list Event # 10213A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	
Bavis	Louise	T.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	9C6A3A62-4B23-4A48-9D32-43EC1F0F059D	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
74 Alexander St		Greenwich	CT	06830-6204	10/02/2013	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section J1?			
Retired	None		If yes, list Event # 10213A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	
Hrubala	Rudolph		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	FA49A854-4FEE-450D-9F79-0597E5580328	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
252 Budwell ST Unit 10		Manchester	CT	06040-6464	09/20/2013	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section J1?			
Retired	None		If yes, list Event # 10213A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	
Sheehan	Victoria		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	8CF481CA-DA72-4FE6-9757-C89B57C10C63	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
288 Beacon Hill Drive		Cheshire	CT	06410-1701	10/11/2013	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section J1?			
Marketing	L'Oreal		If yes, list Event # 10213A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	

SUBTOTAL Section B-This Page	\$500.00
TOTAL of additional Section B Pages	\$42,375.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		REPORT TYPE
Connecticut Republican scc		Form 20
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$110.00
Subtotal Section A		

B. Itemized Contributions from Individuals

Last Name	First	MI	Method of contribution:		Contribution ID #	Amount of Contribution
Torrano	Peter	K.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	F0554C6C-79B8-4E41-B3 D3-68AD40A9D90B	\$200.00
Residential Street Address		City	State	Zip Code	Date Received	
104 Dry Hill Rd		Norwalk	CT	06851-3127	10/02/2013	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>			
Retired		None	10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
			<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$200.00
Maldonado	Eva	A.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	BB20EF96-C9E9-4F12-A8 86-2CB99C1A3A12	\$900.00
Residential Street Address		City	State	Zip Code	Date Received	
639 Summer St Apt 15		Stamford	CT	06901-1409	09/30/2013	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>			
Law Enforcement		City Of Stamford	10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
			<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$900.00
Srinivasan	Prasad		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	BF37D25F-E949-4529-86 1A-F7BC8B6F87C2	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
268 Grandview Drive		Glastonbury	CT	06033-3946	09/26/2013	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>			
Legislator		State Of Ct	10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
			<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00
Wright	Jeffrey	A.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	04970F73-E302-451D-825 4-80FBR7DD430F	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
1925 Huntington Tpke		Trumbull	CT	06611-5109	10/02/2013	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>			
Contractor		J. A. Wright Co., Inc.	10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
			<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00
Jachimczyk	Michael Charles		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check	836F050D-AAC1-451E-92 70-C8E40RA728DE	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
40 Wallacks Ln		Stamford	CT	06902-7126	09/27/2013	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>			
Attorney		Self Employed	10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
			<input type="checkbox"/> Executive <input type="checkbox"/> Legislative	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00

SUBTOTAL Section B-This Page	\$1,100.00
TOTAL of additional Section B Pages	\$41,775.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE						REPORT TYPE	
Connecticut Republican scc						Form 20	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>						\$110.00	
B. Itemized Contributions from Individuals							
Last Name McGorty	First Noreen	MI M	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 2CEF91A2-A9EB-4854-9 D70-FABD7217660F	Amount of Contribution		
Residential Street Address 3 Wigwam Drive		City Shelton	State CT	Zip Code 06484-2453	Date Received 10/02/2013		
Principal Occupation Finance		Name of Employer Spruce Pvt. Investors		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Dykas	First Melanie	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 39AC8F22-1AB0-486B-A A6A-B4DF28F72709	Amount of Contribution		
Residential Street Address 221 Saybrook Road		City Higganum	State CT	Zip Code 06441-4104	Date Received 09/27/2013		
Principal Occupation Attorney		Name of Employer Harloran & Sage LLP		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$75.00		
Last Name Stevenson	First Jayme	MI J.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 79D8059D-B1D6-4A0A-9 83B-5C1947FB2821	Amount of Contribution		
Residential Street Address 65 Saint Nicholas Rd		City Darien	State CT	Zip Code 06820-2823	Date Received 10/11/2013		
Principal Occupation Selectman		Name of Employer Town Of Darien		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$200.00		
Last Name Donovan	First Patrick	MI F.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 19B1301D-A6A7-4C58-91 8E-9E89E5F47F5B	Amount of Contribution		
Residential Street Address 189 Brookwood Ln		City New Canaan	State CT	Zip Code 06840-3104	Date Received 10/11/2013		
Principal Occupation Financial Advisor		Name of Employer Merrill Lynch		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Intrieri	First Michael	MI F.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 3A8C86DD-B799-4C29-B 8F5-6A035C977C85	Amount of Contribution		
Residential Street Address 1 Island Drive Unit 3		City Norwalk	State CT	Zip Code 06855-2718	Date Received 10/02/2013		
Principal Occupation Educational/R.E. Inventor		Name of Employer Self Employed		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		

SUBTOTAL Section B-This Page	\$450.00
TOTAL of additional Section B Pages	\$42,425.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		REPORT TYPE
Connecticut Republican scc		Form 20
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$110.00
Subtotal Section A		

B. Itemized Contributions from Individuals

Last Name	First	MI	Method of contribution	Contribution ID #	Amount of Contribution	
Levy	Allen	R.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	BF747F61-D74B-42AD-A B17-20C801E2D97B	\$100.00	
Residential Street Address		City	State	Zip Code		Date Received
19 Fillow St		Westport	CT	06880-1218		09/30/2013
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>		
Real Estate		Wenconn		10213A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	
Bacchiochi	Linda	M	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	A79E6677-10D8-4AA5-B 517-4C1592FE8525	\$200.00	
Residential Street Address		City	State	Zip Code		Date Received
12 Hopyard		Stafford Springs	CT	06076-1317		10/02/2013
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>		
State Representative		State Of Ct		10213A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$200.00	
Brooks	Frederic	H	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	EC9C5B90-11B3-49DE-A 065-99E9637552C3	\$100.00	
Residential Street Address		City	State	Zip Code		Date Received
6 Jofran Lane		Greenwich	CT	06830-4706		09/30/2013
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>		
Executive		CT Economic Corporation		10213A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	
Franzese	Sara	A.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	D5D171B6-C7F4-4A3C-B 51E-F33F748CBA36	\$100.00	
Residential Street Address		City	State	Zip Code		Date Received
39 Intervale Rd		Darien	CT	06820-3826		10/02/2013
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>		
Homemaker		None		10213A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	
Millington	Jamie		<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	E163EEF8-CD9F-4A02-A DD9-F475A ARD5B49	\$100.00	
Residential Street Address		City	State	Zip Code		Date Received
245 Unquowa Road #18		Fairfield	CT	06824-5021		10/02/2013
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>		
Police Officer		City Of Shelton		10213A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	

SUBTOTAL Section B-This Page	\$525.00
TOTAL of additional Section B Pages	\$42,350.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE						REPORT TYPE		
Connecticut Republican scc						Form 20		
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>						\$110.00		
B. Itemized Contributions from Individuals								
Last Name Cavallo		First Victor		MI J.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # 5295DBC1-C840-4438-8F FA-44B291FA3727	Amount of Contribution \$100.00
Residential Street Address 186 Rowayton Woods Dr			City Norwalk		State CT	Zip Code 06854-3944	Date Received 10/14/2013	
Principal Occupation Attorney		Name of Employer Self Employed			Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Budkins		First Camella		MI C.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # 03CCE86B-8B1D-4AC8-A 5BB-2D6F81E650DC	Amount of Contribution \$100.00
Residential Street Address 56 Alexander St			City Greenwich		State CT	Zip Code 06830-6204	Date Received 10/11/2013	
Principal Occupation Town Of Greenwich		Name of Employer Town Clerk			Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$200.00		
Last Name Budkins		First Camella		MI C.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # FF6AD2CB-BE0C-46B2- 8971-E77F68914DBF	Amount of Contribution \$100.00
Residential Street Address 56 Alexander St			City Greenwich		State CT	Zip Code 06830-6204	Date Received 09/30/2013	
Principal Occupation Town Of Greenwich		Name of Employer Town Clerk			Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$200.00		
Last Name Walsh		First John		MI P.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # EC4090A0-EEC7-43F4-99 EC-1498F3A0F05D	Amount of Contribution \$100.00
Residential Street Address 148 Ramhorne Rd			City New Canaan		State CT	Zip Code 06840-3007	Date Received 09/30/2013	
Principal Occupation Voiceover Actor		Name of Employer Self Employed			Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Buchsbaum		First Jason		MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # B770059-8183-45FB-AC 27-EDC0E6DE6353	Amount of Contribution \$75.00
Residential Street Address 291 Dublin Road			City Southbury		State CT	Zip Code 06488-1842	Date Received 09/30/2013	
Principal Occupation Attorney		Name of Employer Cohen and Wolf PC			Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$75.00		

SUBTOTAL Section B-This Page		\$475.00
TOTAL of additional Section B Pages		\$42,400.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)		\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		REPORT TYPE
Connecticut Republican scc		Form 20
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$110.00
Subtotal Section A		

B. Itemized Contributions from Individuals

Last Name	First	MI	Method of contribution:	Contribution ID #	Amount of Contribution
Slavin	Raymond	D.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	44650BC3-3C04-4CBD-9 FBA-84E355415DC6	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
4 McLaren Rd S		Darien	CT	06820-3531	09/27/2013
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A		
Retired		None			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
Walko	Stephen		<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	B5C80113-0055-4E51-A98 4-4F0C43A05F99	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
7 Charter Oak Ln		Greenwich	CT	06830-6911	09/30/2013
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A		
Attorney		Ivey Barnum & O'Mara			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
Decker	John	H.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	8A053D5B-3F67-4DCE-9 701-D04050F2B93F	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
254 S Main St		West Hartford	CT	06107-3652	10/02/2013
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A		
Wealth Advisor/C.F.P.		Morgan Stanley			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
DeFilippo	Gary	J.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	DC5AE266-D3E8-4F45-B 79A-9994FD1C74F1	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
43 Perch Rd		Shelton	CT	06484-1824	10/11/2013
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A		
Legislative Aide		State Of Ct			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
Burshtein	Kathryn	L.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	98596171-257A-4FEA-82 1-10D9C0022F337	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
321 Canterbury Lane		Norwalk	CT	06850	09/30/2013
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A		
Business Owner		Beyond IT Support			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00

SUBTOTAL Section B-This Page	\$625.00
TOTAL of additional Section B Pages	\$42,250.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) <i>(Enter total on Line 14 of Summary Page)</i>	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		REPORT TYPE
Connecticut Republican scc		Form 20
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$110.00
Subtotal Section A		

B. Itemized Contributions from Individuals

Last Name	First	MI	Method of contribution:	Contribution ID #	Amount of Contribution
Chicoine	Raymond	D.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	BA1355E9-98AE-45D5-95 64-D9E38C728069	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
93 John Hand Dr		Coventry	CT	06238-2212	10/02/2013
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A		
Retired		None			
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
Browne	Elizabeth	P.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	8B8FFFF5-CC5F-4D36-B D68-5DF88D5DCFB8	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
200 Edgewood Rd		Fairfield	CT	06825-1716	10/02/2013
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A		
Town Clerk		Town Of Fairfield			
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
Maslan	Robert	F.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	52B47F12-C97E-4116-A8 DE-59163ADD3687	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
28 Douglas Dr		Norwalk	CT	06850-1729	10/17/2013
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A		
Attorney		Self-employed			
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
Garity	Helen	B.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	516038CA-B629-4DFE-A DA9-F8F83622D4D5	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
100 Parrott Dr. Unit 1701		Shelton	CT	06484-4782	09/27/2013
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A		
Senior Managing Director		Nexspring Group Llc			
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
Feigenbaum	Marion	L.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	1BF2596F-FFB3-45CC-86 3D-9866CAC628C7	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
35 Princes Pine Road		Norwalk	CT	06850-2210	10/02/2013
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A		
Director of Conferences		NYC			
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with:		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative	Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00

SUBTOTAL Section B-This Page	\$500.00
TOTAL of additional Section B Pages	\$42,375.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	REPORT TYPE
Connecticut Republican scc	Form 20

A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$110.00
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B. Itemized Contributions from Individuals

Last Name Gidwani	First David	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	Contribution ID # 531D9173-780E-46B1-A7 9D-0F2841B9A184	Amount of Contribution \$100.00
Residential Street Address 49 Independence Drive	City Shelton	State CT	Zip Code 06484-5954	Date Received 10/11/2013	
Principal Occupation Sales	Name of Employer Oxford WS	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list Event # 10213A	
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00	

Last Name DeMaso	First Jeffrey	MI A.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	Contribution ID # DD4F7632-23E2-4591-92 FA-F0473256E51D	Amount of Contribution \$25.00
Residential Street Address 60 Country Pl	City Shelton	State CT	Zip Code 06484-3862	Date Received 08/30/2013	
Principal Occupation Compliance Counsel	Name of Employer Clayton Services Llc	Is this contribution associated with a fundraising event listed in Section J1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If yes, list Event #	
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$75.00	

Last Name Gagliola	First Lucian	MI C.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	Contribution ID # DC98B1F2-E57B-4FC5-B9 A8-9519FF79DC2D	Amount of Contribution \$75.00
Residential Street Address 986 Old Coach Rd	City Orange	State CT	Zip Code 06477-1052	Date Received 09/30/2013	
Principal Occupation Student	Name of Employer None	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list Event # 10213A	
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$75.00	

Last Name Mazza	First Joseph	MI S.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	Contribution ID # 9B369311-487B-4A64-BB B6-8805D3B5C14	Amount of Contribution \$100.00
Residential Street Address 115 Sugarbush Dr	City Guilford	State CT	Zip Code 06437-1221	Date Received 09/20/2013	
Principal Occupation 1st Selectman	Name of Employer Town Of Guilford	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list Event # 10213A	
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00	

Last Name Moynahan	First Timothy	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	Contribution ID # FEF1DB56-A3D3-4454-B 531-4FFAED0B1580	Amount of Contribution \$100.00
Residential Street Address 296 Central Ave	City Wolcott	State CT	Zip Code 06716-3005	Date Received 09/30/2013	
Principal Occupation Attorney	Name of Employer Self Employed	Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list Event # 10213A	
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00	

SUBTOTAL Section B-This Page	\$375.00
TOTAL of additional Section B Pages	\$42,500.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE Connecticut Republican scc	REPORT TYPE Form 20
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	
Subtotal Section A \$110.00	

B. Itemized Contributions from Individuals

Last Name Krawiecki	First Sharon	MI M	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 86F8893F-32A1-4281-AF D5-FD04R7349C8B	Amount of Contribution
Residential Street Address 203 Pinehurst Rd		City Bristol	State CT	Zip Code 06010-2963	Date Received 10/02/2013
Principal Occupation Registrar Of Voters		Name of Employer City Of Bristol		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A	
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$200.00
Last Name Vitali	First Michael	MI T.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 4AAB3818-3A85-42EB-83 D2-659BD7304E49	Amount of Contribution
Residential Street Address 653 N Elm St		City Wallingford	State CT	Zip Code 06492-3233	Date Received 10/02/2013
Principal Occupation Lawyer		Name of Employer Cella-flanagan		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A	
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
Last Name Penkoff	First Cynthia	MI L.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # ABB06C6F-A1AB-4AD7- 30CC-264687DF494F	Amount of Contribution
Residential Street Address 101 Columbine Dr		City Trumbull	State CT	Zip Code 06611-4600	Date Received 10/02/2013
Principal Occupation Realtor		Name of Employer Caldwell Banker		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A	
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
Last Name Elliott	First Daniel	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	Contribution ID # 19A8EC1D-4B31-4C38-A FCR-3A108408FB2A	Amount of Contribution
Residential Street Address 8 Palmieri Pl		City North Haven	State CT	Zip Code 06473-4028	Date Received 10/11/2013
Principal Occupation Attorney		Name of Employer Murtha Cullina Llp		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A	
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$75.00
Last Name Crumbine	First Peter	MI J.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 4912FD1E-02F4-4D68-85 E7-5D7470597C07	Amount of Contribution
Residential Street Address 3 Copper Beech Rd		City Greenwich	State CT	Zip Code 06830-4033	Date Received 09/20/2013
Principal Occupation Retired		Name of Employer None		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A	
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$200.00

SUBTOTAL Section B-This Page	\$600.00
TOTAL of additional Section B Pages	\$42,275.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE						REPORT TYPE		
Connecticut Republican scc						Form 20		
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>						\$110.00		
B. Itemized Contributions from Individuals								
Last Name Michlin		First Rebecca		MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # BBAFCFD1-3310-415A-8 680-3BCFB4219949	Amount of Contribution \$200.00
Residential Street Address 172 Old Farms Rd		City Southington		State CT	Zip Code 06489-2754		Date Received 09/30/2013	
Principal Occupation Legislative Aide		Name of Employer State Of Ct		Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # 10213A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$200.00		
Last Name Coyle		First Eugene		MI F.	Method of contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # D19FBB21-C62A-4431-89 D1-CEDDEC506CB	Amount of Contribution \$100.00
Residential Street Address 15 Echo Dr		City Darien		State CT	Zip Code 06820-3104		Date Received 10/02/2013	
Principal Occupation Retired		Name of Employer None		Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # 10213A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Coates		First Graham		MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # FDAC944B-8ARB-4052-B 889-DDE9FF54F70	Amount of Contribution \$75.00
Residential Street Address 239 Old Farms Road		City Avon		State CT	Zip Code 06001-2202		Date Received 09/30/2013	
Principal Occupation Attorney		Name of Employer Murtha Cullina Llp		Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # 10213A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$75.00		
Last Name Sheehan		First Patrick		MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # DA994AAC-1BB6-4AFA- A59C-4C837827F96C	Amount of Contribution \$200.00
Residential Street Address 288 Beacon Hill Dr		City Cheshire		State CT	Zip Code 06410-1701		Date Received 09/30/2013	
Principal Occupation Investments		Name of Employer Stifel Nicolaus & Co.		Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # 10213A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$200.00		
Last Name Simonetti		First Anthony		MI F.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # 89649991-762B-4015-B61 6-3D6DB69D1CF5	Amount of Contribution \$100.00
Residential Street Address 6 Hayfield Dr		City Shelton		State CT	Zip Code 06484-2177		Date Received 10/14/2013	
Principal Occupation Nursing Home Administrator		Name of Employer Marshall Lane Manor		Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # 10213A		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		

SUBTOTAL Section B-This Page							\$475.00
TOTAL of additional Section B Pages							\$42,400.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)							\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE Connecticut Republican scc	REPORT TYPE Form 20
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	
Subtotal Section A	\$110.00

B. Itemized Contributions from Individuals

Last Name Mannion	First Arthur	MI J.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	Contribution ID # B15BD9E7-7E9D-4FA3-9883-92A16FB56CA1	Amount of Contribution
Residential Street Address 132 Main Street Apt. 304		City Danbury	State CT	Zip Code 06810-7886	\$100.00
Principal Occupation Attorney		Name of Employer Self Employed		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i> 10213A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions \$100.00
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Last Name Knight	First Doris	MI F.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 5F66189B-BBB1-4A8F-A88F-B989FAFFC87	Amount of Contribution
Residential Street Address 414 Old Tavern Rd		City Orange	State CT	Zip Code 06477-3319	\$100.00
Principal Occupation Office Clerk		Name of Employer Knights Inc		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i> 10213A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions \$200.00
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Last Name Nickerson	First William	MI H.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # B60FEEB9-98BD-4E01-9688-915744F16D5D	Amount of Contribution
Residential Street Address 35 Quail Rd		City Greenwich	State CT	Zip Code 06831-3322	\$100.00
Principal Occupation Real Estate		Name of Employer E. A. Hoffman Mgt. Inc.		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i> 10213A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions \$100.00
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Last Name Hennessy	First Donal	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # 5F1494A6-DC12-4CF7-A7B9-88090F1646CB	Amount of Contribution
Residential Street Address 64 Pond Road		City Stamford	State CT	Zip Code 06902-1817	\$100.00
Principal Occupation Consultant		Name of Employer Self Employed		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i> 10213A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions \$100.00
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Last Name Bellis	First Stephen	MI R.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	Contribution ID # CEE0D6C1-A27E-4C0E-979E-5923CA13447F	Amount of Contribution
Residential Street Address 121 Lane St		City Shelton	State CT	Zip Code 06484-5224	\$100.00
Principal Occupation Attorney		Name of Employer Pellegrino Law Firm		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i> 10213A	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions \$100.00
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

SUBTOTAL Section B-This Page	\$700.00
TOTAL of additional Section B Pages	\$42,175.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE						REPORT TYPE		
Connecticut Republican scc						Form 20		
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>						\$110.00		
B. Itemized Contributions from Individuals								
Last Name Ribas		First Francisco		MI X.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # 5B7C1A5A-6C28-4FF2-84DB-230482BA36A6	Amount of Contribution \$200.00
Residential Street Address 52 New Shore Rd			City Waterford		State CT	Zip Code 06385-3609	Date Received 09/27/2013	
Principal Occupation Civil Engineer		Name of Employer Gannett Fleming Inc.			Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$200.00		
Last Name Farrell		First Lynne		MI S.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # 163D86E1-02EB-47AA-A730-02C701485463	Amount of Contribution \$100.00
Residential Street Address 25 Buddington Park			City Shelton		State CT	Zip Code 06484-5359	Date Received 10/02/2013	
Principal Occupation Attorney		Name of Employer Farrell, Leslie & Grochowski			Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Williamson		First Laurie		MI E.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # 7347B413-747A-45EB-A838-C4C3A359D49E	Amount of Contribution \$100.00
Residential Street Address 2 Tinywood Rd			City Darien		State CT	Zip Code 06820-2429	Date Received 10/02/2013	
Principal Occupation Attorney		Name of Employer Self Employed			Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Pulitzer		First Bert		MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # 97C89EE0-DD5A-4FCE-B655-47532E13AE9	Amount of Contribution \$100.00
Residential Street Address 51 Forest Avenue			City Old Greenwich		State CT	Zip Code 06870-1514	Date Received 10/11/2013	
Principal Occupation Menswear Designer		Name of Employer Self Employed			Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name McMahon		First Linda		MI E.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card		Contribution ID # DBFDD879-9AE0-4163-B44A-478F8F1ACFC3	Amount of Contribution \$5,000.00
Residential Street Address 14 Hurlingham Dr			City Greenwich		State CT	Zip Code 06831-2739	Date Received 09/23/2013	
Principal Occupation Executive		Name of Employer Self Employed			Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$10,000.00		

SUBTOTAL Section B-This Page	\$10,275.00
TOTAL of additional Section B Pages	\$32,600.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		REPORT TYPE
Connecticut Republican scc		Form 20
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$110.00
Subtotal Section A		

B. Itemized Contributions from Individuals

Last Name	First	MI	Method of contribution:	Contribution ID #	Amount of Contribution
Nielsen	Gerald	A.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card	C2E78A57-17D3-45D2-83 64-66B137812978	\$100.00
Residential Street Address 33 Rocaton Rd		City Darien	State CT	Zip Code 06820-3427	Date Received 09/30/2013
Principal Occupation Commercial Real Estate		Name of Employer The Nielsen Company		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A	
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
Serenbetz	Paul	H.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	B06136B7-1789-458C-B1 3B-3998F9C1D3876	\$100.00
Residential Street Address 100 York St Apt 17P		City New Haven	State CT	Zip Code 06511-5644	Date Received 09/26/2013
Principal Occupation Teacher		Name of Employer Clinton Bd. Of Ed.		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A	
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00
Cowperthwait	Scott		<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	3D9BEEFD-D7D8-4920-9 830-25EE71E9BB9C	\$75.00
Residential Street Address 110 Wakefield St		City Hamden	State CT	Zip Code 06517-1329	Date Received 09/30/2013
Principal Occupation Attorney		Name of Employer Shipman & Goodwin		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A	
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$75.00
Ruppap	Kate		<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	B5D16B57-4A11-4240-83 FE-C6E59A78694F	\$75.00
Residential Street Address 37 Old Mill Ct		City Simsbury	State CT	Zip Code 06070-1952	Date Received 09/30/2013
Principal Occupation Communications Specialist		Name of Employer Murtha Cullina Llp		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A	
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$75.00
Williams	Christopher		<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	6D59DEB9-3DC2-456A-9 6DC-4B27F87CF7F2	\$75.00
Residential Street Address 496 Fern Street		City West Hartford	State CT	Zip Code 06107-1408	Date Received 09/30/2013
Principal Occupation Attorney		Name of Employer Conway Stoughton LLC		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A	
Is contributor a principal of a state contractor or prospective state contractor? If yes, indicate which branch or branches of government the contract is with: <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$75.00

SUBTOTAL Section B-This Page	\$475.00
TOTAL of additional Section B Pages	\$42,400.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		REPORT TYPE	
Connecticut Republican scc		Form 20	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$110.00	
Subtotal Section A			
B. Itemized Contributions from Individuals			
Last Name Palen	First James	MI	Method of contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 45 Brookside Rd		City Darien	State CT
Principal Occupation Banking		Name of Employer Jeffries LLC	Contribution ID # 1AEEC7C8-39E1-40BC-876-BC010048348B
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions \$100.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Executive <input type="checkbox"/> Legislative <input type="checkbox"/>			
Date Received 10/02/2013		Zip Code 06820-3504	Amount of Contribution \$100.00
Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A	
Last Name Whittemore	First Edward	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 53 Westwood Road		City West Hartford	State CT
Principal Occupation Partner		Name of Employer Murtha Cullina Llp	Contribution ID # 891B8D5-3803-434A-9A73-2157DC2C2941
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions \$75.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Executive <input type="checkbox"/> Legislative <input type="checkbox"/>			
Date Received 09/30/2013		Zip Code 06117-2253	Amount of Contribution \$75.00
Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A	
Last Name McArdle	First Laurie	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 267 Brookbend Rd		City Fairfield	State CT
Principal Occupation Homemaker		Name of Employer None	Contribution ID # 0ACA4B96-BB91-48C1-A3BA-68873B2D4380
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions \$100.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Executive <input type="checkbox"/> Legislative <input type="checkbox"/>			
Date Received 09/30/2013		Zip Code 06824-3831	Amount of Contribution \$100.00
Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A	
Last Name Nolan	First Peter	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 2 Douglas Dr 6855		City Norwalk	State CT
Principal Occupation Attorney		Name of Employer Self Employed	Contribution ID # D79265E9-94A0-428C-9BEE-F85E4DA92A9J
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions \$100.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Executive <input type="checkbox"/> Legislative <input type="checkbox"/>			
Date Received 10/02/2013		Zip Code 06850-1730	Amount of Contribution \$100.00
Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A	
Last Name Zawistowski	First Tami	MI W	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 11 Seymour Rd		City East Granby	State CT
Principal Occupation Bookseller		Name of Employer Resource Books Llc	Contribution ID # 33AD6304-AEEF-48C2-A37C-B718A6B173C2
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions \$100.00
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Executive <input type="checkbox"/> Legislative <input type="checkbox"/>			
Date Received 10/01/2013		Zip Code 06026-9602	Amount of Contribution \$100.00
Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A	

SUBTOTAL Section B-This Page	\$500.00
TOTAL of additional Section B Pages	\$42,375.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE						REPORT TYPE		
Connecticut Republican scc						Form 20		
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>						\$110.00		
B. Itemized Contributions from Individuals								
Last Name Robins		First Robert		MI S.	Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card		Contribution ID # 1ABA3626-C71E-4B28-B0B8-C828EC5FA2F5	Amount of Contribution \$100.00
Residential Street Address 25 West Elm Drive #16		City Greenwich		State CT	Zip Code 06830-6469	Date Received 10/02/2013		
Principal Occupation Consultant		Name of Employer Self Employed		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A				
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Lumaj		First Pjerin		MI	Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card		Contribution ID # 31AB9EC9-CAA6-48A2-80CA-24A63AC5A827	Amount of Contribution \$100.00
Residential Street Address 745 Mill Plain Rd		City Fairfield		State CT	Zip Code 06824-3806	Date Received 10/02/2013		
Principal Occupation Attorney		Name of Employer Self Employed		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A				
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Viscogliosi		First Anthony		MI	Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card		Contribution ID # CDB94253-C360-46E1-8959-93CA06F4A80F	Amount of Contribution \$100.00
Residential Street Address 505 Park Ave #14		City New York		State NY	Zip Code 10022-1106	Date Received 10/04/2013		
Principal Occupation Principal		Name of Employer Viscogliosi Brothers		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A				
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Turner		First Mary Ann		MI R.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Credit/Debit Card		Contribution ID # 275CA593-D4AA-45DE-B3A-2121CCA1130F	Amount of Contribution \$100.00
Residential Street Address 7 Meadow Rd		City Enfield		State CT	Zip Code 06082-6003	Date Received 09/27/2013		
Principal Occupation Self Employed		Name of Employer Projects Unlimited		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A				
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Name Coudert		First Virginia		MI B.	Method of contribution: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card		Contribution ID # 24357AC3-9516-4298-A3FC-22FCF9A66BC7	Amount of Contribution \$100.00
Residential Street Address 1 Putnam Hill 3A		City Greenwich		State CT	Zip Code 06830-5702	Date Received 10/02/2013		
Principal Occupation Retired		Name of Employer None		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 10213A				
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i> <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No				Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		

SUBTOTAL Section B-This Page		\$475.00
TOTAL of additional Section B Pages		\$42,400.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)		\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		REPORT TYPE	
Connecticut Republican scc		Form 20	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$110.00	
B. Itemized Contributions from Individuals			
Last Name Klarides	First Themis	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card
Residential Street Address 23 East Ct		City Derby	State CT
Principal Occupation Attorney/Legislator		Name of Employer Self Employed/st Of Ct	Contribution ID # D0E84AE8-31EB-4068-B5C2-9BB95151R4D4
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$500.00
Date Received 09/30/2013		Zip Code 06418-2640	Amount of Contribution \$500.00
Last Name Lycksell	First Lucas	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card
Residential Street Address 266 Pearl Street		City Hartford	State CT
Principal Occupation Law Clerk		Name of Employer Murtha Cullina Llp	Contribution ID # DF2B2AB2-1AD7-4D0F-3DA5-7B9D9D86710D
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$75.00
Date Received 10/11/2013		Zip Code 06103-2004	Amount of Contribution \$75.00
Last Name Laudonia	First Anthony	MI T.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card
Residential Street Address 6 Caroline Farms Rd Unit 3		City Cos Cob	State CT
Principal Occupation Tax Collector		Name of Employer Town Of Greenwich	Contribution ID # 06EC1531-E6A5-4D46-8772-F0242F5F58F3
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$300.00
Date Received 09/30/2013		Zip Code 06807-2232	Amount of Contribution \$300.00
Last Name Wolk	First Walter	MI A.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 140 Middle River Rd		City Danbury	State CT
Principal Occupation Manager		Name of Employer Intersurface Dynamics Incorporated	Contribution ID # E3F0209C-F027-4385-8592-3DCBE74213A9
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$100.00
Date Received 10/02/2013		Zip Code 06811-4338	Amount of Contribution \$100.00
Last Name Hayes	First Brent	MI	Method of contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 6 Overbrook Lane		City Greenwich	State CT
Principal Occupation Hedge Fund/Marketing		Name of Employer Basso Capital Management	Contribution ID # 23B02A82-6AA5-4A21-B924-E167A519D812
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$100.00
Date Received 10/02/2013		Zip Code 06830	Amount of Contribution \$100.00

SUBTOTAL Section B-This Page	\$650.00
TOTAL of additional Section B Pages	\$42,225.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		REPORT TYPE	
Connecticut Republican scc		Form 20	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$110.00	
B. Itemized Contributions from Individuals			
Last Name Boughton		First Mark	MI D.
Residential Street Address 23 Alan Ave		City Danbury	State CT
Principal Occupation Mayor		Name of Employer City Of Danbury	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Aggregate contributions \$100.00		Contribution ID # B3E1A8B-1270-4F80-8A A7E14799D0DR16	
Date Received 10/14/2013		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>	
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A	
Last Name Silhavey		First Christopher Edward	MI
Residential Street Address 111 Hickory Woods Ln		City Stratford	State CT
Principal Occupation Computer Analyst		Name of Employer At & T	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Aggregate contributions \$250.00		Contribution ID # ECF50912-BD80-48EF-9C F4-27F66F4C5F66	
Date Received 09/30/2013		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>	
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A	
Last Name Schoonmaker		First Carolyn	MI P.
Residential Street Address 231 Old Kings Hwy S		City Darien	State CT
Principal Occupation Housewife		Name of Employer None	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Aggregate contributions \$100.00		Contribution ID # 2737F9D7-4C15-4E89-87 BB-372AF66739F3	
Date Received 09/24/2013		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>	
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A	
Last Name Hoheb		First Christian	MI R.
Residential Street Address 314 Main St		City Farmington	State CT
Principal Occupation Attorney		Name of Employer Self Employed	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Aggregate contributions \$250.00		Contribution ID # 95B56AD0-6CDD-49B7-B 599-6CF7CAF268F0	
Date Received 09/30/2013		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>	
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A	
Last Name Pavia		First John	MI P.
Residential Street Address 311 Silver Hill Rd		City Easton	State CT
Principal Occupation Attorney		Name of Employer Self Employed	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input checked="" type="checkbox"/> Credit/Debit Card
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Aggregate contributions \$100.00		Contribution ID # E0F1E980-125E-4391-A5 0C4D09871AE8FC	
Date Received 10/02/2013		Is this contribution associated with a fundraising event listed in Section J1? <i>If yes, list Event #</i>	
		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 10213A	

SUBTOTAL Section B-This Page **\$625.00**

TOTAL of additional Section B Pages **\$42,250.00**

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) *(Enter total on Line 14 of Summary Page)* **\$42,985.00**

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	REPORT TYPE
Connecticut Republican scc	Form 20
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	\$110.00
Subtotal Section A	

B. Itemized Contributions from Individuals

Last Name	First	MI	Method of contribution:	Contribution ID #	Amount of Contribution
Dean	Martha	A.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	AE626DB3-79EC-426B-B 54F-59630A3132B5	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
144 Reverknolls		Avon	CT	06001-2037	10/02/2013
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A	
Attorney		Self-employed			
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:			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00
Dadakis	Edward	D.	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	3ACE6550-61B5-4CC2-99 D2-83039852AF2	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
81 Mallard Dr		Greenwich	CT	06830-6708	09/30/2013
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A	
Broker		Aon Risk Services Inc Of Connecticut			
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:			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00
Clark	Marianne A. Landers		<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	D3D9DF56-EA41-499F-8 77A-E1D8B448F6A7	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
100 Westland Rd		Avon	CT	06001-2349	09/20/2013
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A	
Marketing		Self Employed			
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:			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00
Gerard	Scott		<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	8D06A6D1-CF37-4E54-9 B50-8906180D2275	\$75.00
Residential Street Address		City	State	Zip Code	Date Received
165 High Point Lane		Fairfield	CT	06824-2063	09/30/2013
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A	
Lawyer		Murtha Cullina Llp			
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:			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$75.00
Bisbikos	Andreas		<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card	76975E07-A93F-4CC5-A7 88-419DDCF40DD6	\$100.00
Residential Street Address		City	State	Zip Code	Date Received
155 Standish Road		Colchester	CT	06415-2219	09/30/2013
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section J1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 10213A	
Social Studies Teacher		Windham Middle School			
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:			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Executive <input type="checkbox"/> Legislative			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00

SUBTOTAL Section B-This Page	\$600.00
TOTAL of additional Section B Pages	\$42,275.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		REPORT TYPE	
Connecticut Republican scc		Form 20	
A. Total Contributions from Small Contributors-Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		\$110.00	
Subtotal Section A			
B. Itemized Contributions from Individuals			
Last Name Fers	First Patricia	MI J.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 28 W Brookside Ave		City Ansonia	State CT
Principal Occupation Paralegal Specialist II		Name of Employer State Of Connecticut	Contribution ID # 194C6629-0A90-4CC9-B45A-E838D3A1C296
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$100.00
Date Received 09/24/2013		Zip Code 06401-1326	Amount of Contribution \$100.00
Last Name Healy	First Christopher	MI C.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 27 Dorchester Rd		City Wethersfield	State CT
Principal Occupation Business Manager		Name of Employer Summit Financial	Contribution ID # 1FD6FC07-4B68-466D-B972-C8A272F9201C
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$100.00
Date Received 09/19/2013		Zip Code 06109-2320	Amount of Contribution \$100.00
Last Name DeRiso	First Margaret Jane	MI	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 12 Jericho Dr		City Old Lyme	State CT
Principal Occupation Analyst		Name of Employer N/a	Contribution ID # F621C8FC-A47D-4040-B9FC-D752B63F1DF9
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$100.00
Date Received 09/20/2013		Zip Code 06371-1326	Amount of Contribution \$100.00
Last Name Kriskey	First Richard	MI F.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 8 Osceola Dr		City Greenwich	State CT
Principal Occupation Managing Member		Name of Employer Livingston Builders Llc	Contribution ID # 64ED7D74-07B3-44B3-97B9-88C4F5569F95
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$100.00
Date Received 09/30/2013		Zip Code 06830-7228	Amount of Contribution \$100.00
Last Name Testani	First Jack	MI H.	Method of contribution: <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Credit/Debit Card
Residential Street Address 50 Cranbury Dr		City Trumbull	State CT
Principal Occupation New Business Director		Name of Employer Icon International	Contribution ID # 9A7640D2-4046-4CA5-AF7E-8BE9120C59E3
Is contributor a principal of a state contractor or prospective state contractor? <i>If yes, indicate which branch or branches of government the contract is with:</i>		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	\$200.00
Date Received 09/30/2013		Zip Code 06611-1413	Amount of Contribution \$200.00

SUBTOTAL Section B-This Page	\$600.00
TOTAL of additional Section B Pages	\$42,275.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary Page)	\$42,985.00

