# **SEEC FORM 20**

Itemized Campaign Finance Disclosure Statement CONNECTICUT STATE ELECTIONS ENFORCEMENT ନହ୍ୟାରଥ୍ୟ ମହାରଥ୍ୟ 2012



Do Not Mark in This Space For Official Use Only

Page 1 of 25

### **COVER PAGE**

1. NAME OF COMMITTEE							
Norwalk Democratic Town Committee	2						
2. TREASURER NAME							
First			MI	Last			Suffix
Peter				Thor			
3. TREASURER ADDRESS		1				1	
Street Address		City			State		Zip Code
4 Betts Pl		Norwa	alk		ст		06855
4. ELECTION/REFERENDUM DATE	5. OFFICE SOU	GHT (Co	mplete only if C	andidate Committee)		6 DISTR	ICT NUMBER (if applicable)
		0111 (00				0. 01011	iter i temblet (j uppiteuble)
7. CANDIDATE NAME (Complete only if Cand	idate or Exploratory C	ommittee	e)				
First			MI	Last			Suffix
8. TYPE OF REPORT							
October 10 Filing - Original							
9. PERIOD COVERED							
	Beginning Date			Ending Date			
	09/02/2013		thru	09/30/2013			
10 CERTIFICATION							
I hereby certify and state, under Itemized Campaign Finance complete.							
	<b>N</b> -4 <b>T</b> h						
-	<b>Peter Thor</b> PRINT NAME OF TH	E SIGNE	- R		<b>)/2013 7</b> CERTIFIED		1
SIGNATURE	MINT NAME OF TH	E SIGNE	5K.	DATE	<b>UEKTIFIED</b>		
PENALTY F				BLE BY FINE NOT TO EXCE THAN ONE YEAR, OR BOTH		), OR	

# SEEC FORM 20

Itemized Campaign Finance Disclosure Statement

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Revised January 2012

NAME OF COMMITTEE	TYPE OF REPORT					
Norwalk Democratic Town Committee	October 10 Filing - Original					
	COLUMN A This Period	COLUMN B Aggregate				
<ol> <li>Balance on hand January 1 of current year for Ongoing and Party Committees OR Balance on hand from day Committee was formed for all other Committees</li> </ol>		\$6,716.53				
12. Balance on hand at the beginning of Reporting Period	\$5,738.58					
13. Contributions received from Individuals (Section A and B)	\$9,073.00	\$11,048.00				
14. Receipts from Other Committees (Sections C1 and C2)	\$0.00	\$0.00				
15. Other Monetary Receipts (Section D through K)	\$0.00	\$0.00				
16a. Total Proceeds from Small Puchases (Section L1 Subpart 1 + Subpart 3)	\$0.00	\$0.00				
16b. Per Public Act 11-48, effective January 1,2012 Section L2 removed						
16c. Total Purchases of Advertising - Program Book or Sign (Section L3) Municipal and Town Committees Only	\$0.00	\$0.00				
17. Total Monetary Receipts (add totals for lines 13 through 16c)	\$9,073.00	\$11,048.00				
18. Subtotals (add totals in Line 12 + 17 in Column A and in Line 11 + 17 in Column B)	\$14,811.58	\$17,764.53				
19. Expenses Paid by Committee (Section P)	\$193.00	\$3,145.95				
20. Balance on hand at close of Reporting Period (Subtract line 19 from line 18 in both colum	\$14,618.58	\$14,618.58				
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	\$-1,007.00					
25a. + Loans Received (Section D)	\$0.00	\$0.00				
25b. + Interest and Penalties on Loan(s)	\$0.00	\$0.00				
25c Payments on Loan	\$0.00	\$0.0				
25d. Total Outstanding Loan Amount	\$-1,007.00					
26. Campaign Expenses Paid By Candidate (Section Q)	\$0.00	\$0.00				
27. Expenses Incurred on Committee Credit Card (Section R)	\$0.00	\$0.0				
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)	\$5,882.29					

#### SUMMARY PAGE TOTALS

Page 3	of 25
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	I. MONETARY RECEIPT	<u>S (Sectio</u>	on A-K)				
NAME OF COMMITTEE				Т	YPE OF REPORT		
Norwalk Democratic Town Committee				0	ctober 10 Filing - Origina	l	
A. Total Contributions from Small (	Contributors-Received this Perio	od ONL	Y				
(See instructions for definition of Small Contributor)		Subto	tal Section A		\$0.00		
	B. Itemized Contributions from I	ndividua	ls				
Last Name		Firs	st Name				MI
Igneri Residential Street Address		City	John		I	State	Zip Code
55 Bluff Ave		Norv	walk			CT	06853
Principal Occupation		<u>'</u>	Name of Employ	yer			
			Retired				
						<u> </u>	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she asso			Yes No	A	mount of Contribution
Is this contribution associated with a	Is contributor a principal of state contractor or pros	spective state	contractor?	Г	Yes X No	_	
fundraising event listed in Section L1?       X       Yes         If yes, list Event #       09212013A       No	If yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Yes M No		
Method of Contribution			Date Receiv	ved	Aggregate Contributions		
X Cash Personal Check Credit/De	bit Card Payroll Deduction	Money Order	r 09/21/2	013	\$50.00		\$50.00
Last Name		Firs	st Name		•		MI
Williams			Lupita				
Residential Street Address		City				State	Zip Code
62 Bayne St		Norv				СТ	06851
Principal Occupation			Name of Employ	yer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she asso			Yes No	А	mount of Contribution
Is this contribution associated with a fundraining quent listed in Section 1.12 X Yes	Is contributor a principal of state contractor or pros	spective state	contractor?		Yes X No		
fundraising event listed in Section L1?     If yes, list Event #     09212013A     No	If yes, indicate which branch or branches of government the contract is with:	I I	Executive	Legislative			
Method of Contribution	<u> </u>		Date Receiv	ved	Aggregate Contributions		
Cash X Personal Check Credit/De	abit Card Payroll Deduction	Money Order	r 09/21/2	013	\$50.00		\$50.00
Last Name		Firs	st Name				MI
Mann			Mary				0
Residential Street Address		City				State	Zip Code
26A Lexington Ave Principal Occupation		Norv	Name of Employ	ver		СТ	06854
			Name of Emplo	yei			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she asso			Yes No	А	mount of Contribution
Is this contribution associated with a fundraicing event listed in Section 112 Yes	Is contributor a principal of state contractor or pros	spective state	contractor?	Г	Yes X No		
fundraising event listed in Section L1?     If res       If yes, list Event #     09212013A       No	If yes, indicate which branch or branches of government the contract is with:	I I	Executive	Legislative			
Method of Contribution	1		Date Receiv	ved	Aggregate Contributions		
Cash X Personal Check Credit/De	bit Card Dayroll Deduction	Money Order	r 09/21/20	013	\$25.00		\$25.00

	I. MONETARY RECEIPT	S (Section A	A-K)		
NAME OF COMMITTEE			Т	YPE OF REPORT	
Norwalk Democratic Town Committee			0	ctober 10 Filing - Original	
	B. Itemized Contributions from I	ndividuals			
Last Name		First Na	me		MI
Scarborough		Pa	ul		
Residential Street Address		City		S	ate Zip Code
30 Elmwood Ave		Norwalk		С	T 06854
Principal Occupation		Nar	ne of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra		Yes X No	
Method of Contribution			Date Received	Aggregate Contributions	
Cash X Personal Check Credit/De	bit Card Dayroll Deduction	Money Order	09/21/2013	\$50.00	\$50.00
Last Name		First Na	me		MI
Moriarity			rienne		
Residential Street Address		City		S	ate Zip Code
2 W Lake Ct		Norwalk		С	T 06851
Principal Occupation Retired		Nar	ne of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra		Yes X No	-
Method of Contribution			Date Received	Aggregate Contributions	
Cash X Personal Check Credit/De	bit Card Payroll Deduction	Money Order	09/21/2013	\$25.00	\$25.00
Last Name		First Na	me		MI
Davis		De	idra		I
Residential Street Address		City		S	ate Zip Code
261 Ely Ave # B22 AptB		Norwalk		C	T 06854
Principal Occupation		Nar	ne of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate aan \$5000?	ed with have	Yes No	Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra		Yes X No	
Method of Contribution			Date Received	Aggregate Contributions	
Cash Personal Check Credit/De	bit Card Payroll Deduction	Money Order	09/21/2013	\$30.00	\$30.00

	I. MONETARY RECEIPT	S (Section A	<b>A-K</b> )		
NAME OF COMMITTEE				YPE OF REPORT	
Norwalk Democratic Town Committee				ctober 10 Filing - Original	
	B. Itemized Contributions from I	ndividuals			
Last Name		First Nat	me		MI
Franklin		Da	isy		
Residential Street Address		City		S	tate Zip Code
82 S Main St Apt 2		Norwalk		C	T 06854
Principal Occupation		Nan	ne of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra		Yes X No	
Method of Contribution	•		Date Received	Aggregate Contributions	1
Cash Personal Check Credit/De	bit Card Payroll Deduction	Money Order			
		inoney order	09/21/2013	\$25.00	\$25.00
Last Name		First Na	me		MI
King		Do	nna		
Residential Street Address		City		S	tate Zip Code
71 Aiken St # Q16		Norwalk		C	T 06851
Principal Occupation		Nan	ne of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra		Yes X No	
Method of Contribution			Date Received	Aggregate Contributions	1
Cash E Personal Check Credit/De	bit Card Payroll Deduction	Money Order			
		,	09/21/2013	\$25.00	\$25.00
Last Name		First Nar	me		MI
Stewart		Sh	awn		
Residential Street Address		City		S	tate Zip Code
15 Madison St # I9		Norwalk		С	T 06854
Principal Occupation		Nar	ne of Employer		
Soical Worker			NEON		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate nan \$5000?	ed with have	Yes No	Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra		Yes X No	
Method of Contribution			Date Received	Aggregate Contributions	
Cash Personal Check Credit/De	bit Card Payroll Deduction	Money Order	09/21/2013	\$25.00	\$25.00

	I. MONETARY RECEIPT	<u>S (Sec</u>	tion A	<u>4-K)</u>					
NAME OF COMMITTEE				Т	YPE OF REPORT				
Norwalk Democratic Town Committee				0	ctober 10 Filing - Origin	al			
	B. Itemized Contributions from I	ndivid	uals	· · · · · · · · · · · · · · · · · · ·					
Last Name			First Na	me					MI
Sumpter			Na	than					
Residential Street Address		City				State	Т	Zip Cod	le
45 Baxter Dr		N	lorwalk			СТ		06854	1
Principal Occupation			Na	ne of Employer		-			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to a candidate of				Yes No		Amou	unt of Cor	ntribution
	officer of a municipality does contributor or busine a contract with said municipality valued at more th			a with have					
X No									
Is this contribution associated with a fundraising event listed in Section L1?	Is contributor a principal of state contractor or pros	spective s	tate contr	actor?	Yes X No				
If yes, list Event # <u>09212013A</u> No	If yes, indicate which branch or branches of government the contract is with:		Execu	tive Legislative					
Method of Contribution				Date Received	Aggregate Contributions	-+			
				Date Received	Aggregate Contributions				
X Cash Personal Check Credit/De	bit Card Payroll Deduction	Money C	Order	09/21/2013	\$25.00			\$25.0	0
				00,21,2010	420100			<i>\</i>	
Last Name			First Na						MI
Swartzell			Lo	S			<u> </u>		J
Residential Street Address		City				State		Zip Cod	
88 Old Hwy		V	Vilton			СТ		06897	/
Principal Occupation			INat	ne of Employer					
Atty				GECC _GE Capita	l Int'l				
Is contributor a lobbyist, spouse,	If contribution is in excess of \$400 to a candidate of	committee	e for a chi	ef executive			Amor	unt of Cor	ntribution
or dependent child of a lobbyist?	officer of a municipality does contributor or busine	ess he/she	associate		Yes No				
× No	a contract with said municipality valued at more th	an \$5000	?						
Is this contribution associated with a fundamining quart listed in Section 1.12 X Yes	Is contributor a principal of state contractor or pros	spective s	tate contr	actor?	Yes X No				
fundraising event listed in Section L1?     Yes       If yes, list Event #     09212013A	If yes, indicate which branch or branches of	Г	Execu						
1 yes, list Event # 03212013A	government the contract is with:				-				
Method of Contribution				Date Received	Aggregate Contributions				
Cash Rersonal Check Credit/De	bit Card Payroll Deduction	Money C	Order						
	-			09/21/2013	\$500.00			\$500.0	00
Last Name			First Na	me					MI
Ward			Jei	nnifer					
Residential Street Address		City				State	Т	Zip Cod	le
11 Rainbow Rd		N	lorwalk			СТ		06851	L
Principal Occupation			Nai	ne of Employer					
Contractor				Self					
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busine				Yes No		Amou	unt of Cor	ntribution
X No	a contract with said municipality valued at more th								
	Is contributor a principal of state contractor	nectivo -	tate contr	actor?					
fundraising event listed in Section L1?	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of	· –	-		Yes X No				
If yes, list Event # 09212013A No	government the contract is with:	L	Execu	tive Legislative					
Method of Contribution	L			Date Received	Aggregate Contributions	$\neg$			
Cash X Personal Check Credit/De	bit Card Payroll Deduction	Money C	Order	09/21/2013	\$60.00			\$60.0	0

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	I. MONETARY RECEIPT	S (Section A	<b>A-K</b> )		
NAME OF COMMITTEE				YPE OF REPORT	
Norwalk Democratic Town Committee				ctober 10 Filing - Original	
	B. Itemized Contributions from I	ndividuals			
Last Name		First Na	me		MI
Blank		Ad	am		
Residential Street Address		City		S	tate Zip Code
49 Bartlett Ave		Norwalk		C	T 06850
Principal Occupation		Nan	ne of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra		Yes X No	-
Method of Contribution	<u>.</u>		Date Received	Aggregate Contributions	]
Cash Personal Check Credit/De	bit Card Payroll Deduction	Money Order	09/21/2013	\$60.00	\$60.00
				4	· · · · · · · · · · · · · · · · · · ·
Last Name		First Nar	ren		MI
Spencer Residential Street Address		City	ren	s	tate Zip Code
83 Ledgebrook Dr		Norwalk			T 06854
Principal Occupation		Nar	ne of Employer	ľ	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra		Yes X No	-
Method of Contribution			Date Received	Aggregate Contributions	1
Cash X Personal Check Credit/De	bit Card Dayroll Deduction	Money Order	09/21/2013	\$25.00	\$25.00
Last Name		First Na			MI
Herschberger		Bri			1911
Residential Street Address		City		S	tate Zip Code
21 Elton Ct		Norwalk			T 06851
Principal Occupation		Nan	ne of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra		Yes X No	
Method of Contribution			Date Received	Aggregate Contributions	
Cash Personal Check Credit/De	bit Card Payroll Deduction	Money Order	09/21/2013	\$25.00	\$25.00

	I. MONETARY RECEIPT	S (Section	on A-K)					
NAME OF COMMITTEE				Т	YPE OF REPORT			
Norwalk Democratic Town Committee				0	ctober 10 Filing - Origina	al		
	B. Itemized Contributions from I	ndividua	ıls					
Last Name		Fir	rst Name					MI
Aley			Jud					
Residential Street Address		City				State	Zip Cod	
21 Splitrock Rd Principal Occupation		Nor	walk Name of Emplo			СТ	06854	•
			Name of Emplo	yei				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she ass			Yes No	1	Amount of Cor	itribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	·		Legislative	Yes X No			
Method of Contribution			Date Recei	ved	Aggregate Contributions			
X   Cash   Personal Check   Credit/De	bit Card Payroll Deduction	Money Orde	er 09/21/2	013	\$40.00		\$40.0	D
Last Name		Fir	rst Name					MI
Harris			Sherelle					
Residential Street Address		City				State	Zip Cod	le
2 West Ave		Nor	walk			СТ	06854	Ļ
Principal Occupation			Name of Emplo	yer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she ass			Yes No	A	Amount of Cor	itribution
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:		_	Legislative	Yes X No			
Method of Contribution			Date Recei	ved	Aggregate Contributions			
Cash Personal Check Credit/De	bit Card Payroll Deduction X	Money Orde	er 09/21/2	013	\$40.00		\$40.0	0
Last Name		Fir	rst Name					MI
DelGreco			Jim					
Residential Street Address		City				State	Zip Cod	le
41 Elmwood Ave		Nor	walk			CT	06854	ļ
Principal Occupation			Name of Employ	yer				
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she ass an \$5000?	sociated with have		Yes No	1	Amount of Cor	atribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:			Legislative	Yes X No			
Method of Contribution			Date Recei	ved	Aggregate Contributions			
Cash X Personal Check Credit/De	bit Card Payroll Deduction	Money Orde	er 09/21/2	013	\$100.00		\$100.0	0

	I. MONETARY RECEIPT	S (Section A	4-K)			
NAME OF COMMITTEE TYPE OF REPORT						
Norwalk Democratic Town Committee				ctober 10 Filing - Original		
	B. Itemized Contributions from I	ndividuals				
Last Name		First Na	me			MI
Riley		Gr	egory			L
Residential Street Address		City			State	Zip Code
703 Forest Rd	West Haven CT 06516					
Principal Occupation		Nai	ne of Employer			
Is contributor a lobbyist, spouse,	If contribution is in excess of \$400 to a candidate of	committee for a chi	ef executive		Amo	ount of Contribution
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	officer of a municipality does contributor or busine			Yes No		
x <sub>No</sub>	a contract with said municipality valued at more the	nan \$5000?				
Is this contribution associated with a	Is contributor a principal of state contractor or pro-	spective state contr	actor?	Yes X No	_	
fundraising event listed in Section L1?     Yes       If yes, list Event #     09212013A	If yes, indicate which branch or branches of	Execu				
	government the contract is with:		5			
Method of Contribution			Date Received	Aggregate Contributions		
Cash X Personal Check Credit/De	bit Card Deduction	Money Order	09/21/2013	\$25.00		\$25.00
			09/21/2013	\$25.00		\$25.00
Last Name		First Na				MI
Gevas			phia			
Residential Street Address		City			State	Zip Code
44 Fairfield Ave Principal Occupation		Norwalk	ne of Employer		СТ	06854
		144	ne of Employer			
Is contributor a lobbyist, spouse,	If contribution is in excess of \$400 to a candidate of			Yes No	Amo	ount of Contribution
	officer of a municipality does contributor or busing a contract with said municipality valued at more the		ed with have			
x <sub>No</sub>						
Is this contribution associated with a fundraising event listed in Section L1?	Is contributor a principal of state contractor or pro-	spective state contr	actor?	Yes X No		
If yes, list Event # <u>09212013A</u> No	If yes, indicate which branch or branches of government the contract is with:	Execu	tive Legislative			
Method of Contribution			Date Received	Aggregate Contributions	_	
Cash Personal Check Credit/De	bit Card Payroll Deduction	Money Order	09/21/2013	\$50.00		\$50.00
Last Name		First Na	me	-	•	MI
Robinson			nrilyn			C
Residential Street Address		City	,		State	Zip Code
21 Linden St # 5		Norwalk			СТ	06851
Principal Occupation		Nai	ne of Employer	·		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busing			Yes No	Amo	ount of Contribution
× No	a contract with said municipality valued at more th					
	Is contributor a principal of state contractor or pro-	spective state contr	actor?		-	
fundraising event listed in Section L1? Yes	If yes, indicate which branch or branches of			Yes X No		
If yes, list Event # <u>09212013A</u> No	government the contract is with:	Execu	tive Legislative			
Method of Contribution			Date Received	Aggregate Contributions		
Cash E Personal Check Credit/De	bit Card Payroll Deduction	Money Order				
		oney Order	09/21/2013	\$100.00		\$100.00

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	I. MONETARY RECEIPTS	<u>S (Section</u>	on A-K)	-		
NAME OF COMMITTEE				TYPE OF REPORT		
Norwalk Democratic Town Committee				October 10 Filing - Origir	ıal	
	B. Itemized Contributions from I	ndividua	ıls	*		
Last Name		Fir	rst Name			MI
Rilling			Harry			w
Residential Street Address		City			State	Zip Code
98 Gillies Ln		Norv	walk		СТ	06854
Principal Occupation			Name of Employer			
Compliance Manager			Brescome Ba	rton		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more the	ess he/she ass		Yes No	Am	nount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	·	Executive Legis	Yes X No		
Method of Contribution	-		Date Received	Aggregate Contributions		
Cash Rersonal Check Credit/De	ebit Card Payroll Deduction	Money Orde	er			
		-	09/21/2013	\$100.00		\$100.00
Last Name		Fir	rst Name			MI
Mobilia			Anthony			N
Residential Street Address		City			State	Zip Code
47 Allen Rd Principal Occupation		Nor	walk Name of Employer		СТ	06851
			Name of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more the	ess he/she ass		Yes No	Am	nount of Contribution
Is this contribution associated with a fundation second list of in Section 112	Is contributor a principal of state contractor or pros	spective state	contractor?	Yes <b>X</b> No		
fundraising event listed in Section L1?       X       Yes         If yes, list Event #       09212013A       No	If yes, indicate which branch or branches of government the contract is with:		Executive Legis			
Method of Contribution			Date Received	Aggregate Contributions	_	
				inggregate controlations		
Cash X Personal Check Credit/De	bit Card Payroll Deduction	Money Orde	er 09/21/2013	\$25.00		\$25.00
Last Name		Fir	rst Name	•		MI
Mobilia			Dorothy			A
Residential Street Address		City			State	Zip Code
47 Allen Rd		Nor	walk		СТ	06851
Principal Occupation			Name of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more the	ess he/she ass		Yes No	Am	ount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	·	Executive Legis	Yes X No		
Method of Contribution			Date Received	Aggregate Contributions		
Cash X Personal Check Credit/De	ebit Card Dayroll Deduction	Money Orde	er 09/21/2013	\$25.00		\$25.00

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	I. MONETARY RECEIPTS	S (Section A	<u>4-K)</u>			
NAME OF COMMITTEE			г	YPE OF REPORT		
Norwalk Democratic Town Committee			c	ctober 10 Filing - Origina	al	
	B. Itemized Contributions from I	ndividuals				
Last Name		First Na	me			MI
Krummel		· · · · · · · · · · · · · · · · · · ·	lliam			
Residential Street Address		City			State	Zip Code
21 Little Fox Ln		Norwalk			СТ	06850
Principal Occupation		INAT	ne of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more the	ess he/she associate		Yes No	Am	ount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contr				
Method of Contribution			Date Received	Aggregate Contributions		
Cash X Personal Check Credit/De	bit Card Payroll Deduction	Money Order	09/21/2013	\$50.00		\$50.00
Last Name		First Na	me			MI
Bender		Se	an			
Residential Street Address		City			State	Zip Code
168 Minerva St		Derby			СТ	06418
Principal Occupation		Nar	ne of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more the	ess he/she associate		Yes No	Am	nount of Contribution
Is this contribution associated with a fundamental sector L12 X Yes	Is contributor a principal of state contractor or pros	spective state contr	actor?	Yes X No	—	
fundraising event listed in Section L1?       X       Yes         If yes, list Event #       09212013A       No	If yes, indicate which branch or branches of government the contract is with:	Execu				
Method of Contribution			Date Received	Aggregate Contributions		
Cash X Personal Check Credit/De	bit Card Depayroll Deduction	Money Order	09/21/2013	\$6,418.00		\$6,418.00
Last Name		First Na	me			MI
Sacchinelli		Nic				
Residential Street Address		City			State	Zip Code
15 Perry Ave # 11A		Norwalk			СТ	06850
Principal Occupation		Nar	ne of Employer			-
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Am	nount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contr		Yes X No		
Method of Contribution			Date Received	Aggregate Contributions		
X Cash Personal Check Credit/De	ebit Card Dayroll Deduction	Money Order	09/21/2013	\$20.00		\$20.00

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	I. MONETARY RECEIPT	S (Section A	A-K)			
NAME OF COMMITTEE			г	YPE OF REPORT		
Norwalk Democratic Town Committee October 10 Filing - Original				al		
	B. Itemized Contributions from I	ndividuals				
Last Name		First Na	me			MI
Mangiacopra			ncent			
Residential Street Address		City			State	Zip Code
8 Thistle Ln		Norwalk			СТ	06851
Principal Occupation		INAT	ne of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Am	ount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra				
Method of Contribution	ebit Card Depayroll Deduction	Money Order	Date Received	Aggregate Contributions		
			09/21/2013	\$50.00		\$50.00
Last Name		First Na	me			MI
Bowman			aedra			L
Residential Street Address		City			State	Zip Code
28 Mlk Dr # 70 Principal Occupation		Norwalk	ne of Employer		СТ	06854
		INAL	ne of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Am	ount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra		Yes X No		
Method of Contribution			Date Received	Aggregate Contributions		
Cash X Personal Check Credit/De	ebit Card Dayroll Deduction	Money Order	09/21/2013	\$25.00		\$25.00
Last Name		First Na	me			MI
Tepper		Ka	te			
Residential Street Address		City			State	Zip Code
186 Gillies Ln		Norwalk			СТ	06854
Principal Occupation		Nar	ne of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Am	ount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contra		Yes X No		
Method of Contribution			Date Received	Aggregate Contributions		
Cash X Personal Check Credit/De	bit Card Payroll Deduction	Money Order	09/21/2013	\$50.00		\$50.00

	I. MONETARY RECEIPTS	S (Section A	A-K)			
NAME OF COMMITTEE			Т	YPE OF REPORT		
Norwalk Democratic Town Committee October 10 Filing - Original					al	
	B. Itemized Contributions from I	ndividuals	•			
Last Name		First Na	me			MI
Kowalski II		Ro	nald			E
Residential Street Address		City			State	Zip Code
40 Ferndale Dr		Easton	(E 1		СТ	06612
Principal Occupation		INA	me of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Am	nount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contr				
Method of Contribution	ebit Card Depayroll Deduction	Money Order	Date Received	Aggregate Contributions		
			09/21/2013	\$25.00		\$25.00
Last Name		First Na	me			MI
Zimmerman			nce			E
Residential Street Address		City			State	Zip Code
14 Cliffview Dr Principal Occupation		Norwalk	me of Employer		СТ	06850
		INA	ne of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate c officer of a municipality does contributor or busine a contract with said municipality valued at more the	ess he/she associate		Yes No	Am	nount of Contribution
Is this contribution associated with a fundamental sector L12 X Yes	Is contributor a principal of state contractor or pros	spective state contr	actor?	Yes X No		
fundraising event listed in Section L1?       X       Yes         If yes, list Event #       09212013A       No	If yes, indicate which branch or branches of government the contract is with:	Execu				
Method of Contribution			Date Received	Aggregate Contributions		
Cash X Personal Check Credit/De	ebit Card Depayroll Deduction	Money Order	09/21/2013	\$50.00		\$50.00
Last Name		First Na	ma			МІ
Mosby			irley			IVII
Residential Street Address		City			State	Zip Code
6 Brookville Ln		Norwalk	[		СТ	06851
Principal Occupation		Na	me of Employer			1
Is contributor a lobbyist, spouse,	If contribution is in excess of \$400 to a candidate c			Yes No	Am	nount of Contribution
or dependent child of a lobbyist?	officer of a municipality does contributor or busine a contract with said municipality valued at more the		ed with have			
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contr		Yes X No		
Method of Contribution	I		Date Received	Aggregate Contributions	$\neg$	
Cash X Personal Check Credit/De	ebit Card Payroll Deduction	Money Order	09/21/2013	\$25.00		\$25.00
1			, ,	1	1	

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	I. MONETARY RECEIPT	S (Sectio	on A-K)		
NAME OF COMMITTEE		×.		TYPE OF REPORT	
Norwalk Democratic Town Committee				October 10 Filing - Original	
	B. Itemized Contributions from I	ndividua	ls	•	
Last Name		Fir	st Name		MI
Hauter		1.113	John		A
Residential Street Address		City			State Zip Code
3 Betts Pl		Norv	walk		CT 06855
Principal Occupation			Name of Employer	•	•
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate officer of a municipality does contributor or busin a contract with said municipality valued at more th	ess he/she ass		Yes No	Amount of Contribution
	Is contributor a principal of state contractor or pro-	spaativa stata	contractor?		_
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	If yes, indicate which branch or branches of government the contract is with:	·	Executive Legislat	Yes X No	
Method of Contribution	government the contract is with.		Date Received	Aggregate Contributions	-
Cash X Personal Check Credit/De	bit Card Payroll Deduction	Money Order	r 09/21/2013	\$25.00	\$25.00
		•		\$23.00	\$25.00
Last Name		Fir	st Name		MI
Christopherson Residential Street Address		City	Rebecca		State Zip Code
208 Flax Hill Rd # 26		Norv	walk		CT 06854
Principal Occupation			Name of Employer		
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busing a contract with said municipality valued at more th	ess he/she ass		Yes No	Amount of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pro- If yes, indicate which branch or branches of government the contract is with:	·	contractor? Executive Legislat	Yes X No	-
Method of Contribution			Date Received	Aggregate Contributions	-
Cash X Personal Check Credit/De					
Cash X Personal Check Credit/De	bit Card Payroll Deduction	Money Order	r 09/21/2013	\$50.00	\$50.00
Last Name		Fir	st Name		MI
Bysiewicz			Susan		
Residential Street Address		City			State Zip Code
125 Clove St		Mido	dletown		CT 06457
Principal Occupation			Name of Employer		
Attorney			Pastore & Daile	ey .	
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busing a contract with said municipality valued at more th	ess he/she ass		Yes No	Amount of Contribution
Is this contribution associated with a	Is contributor a principal of state contractor or pro-	spective state	contractor?		-
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # <u>09212013A</u> No	If yes, indicate which branch or branches of government the contract is with:		Executive Legislat	Yes X No	
Method of Contribution	<u>l</u>		Date Received	Aggregate Contributions	1
Cash X Personal Check Credit/De	ebit Card Deduction	Money Order	r 09/21/2013	\$25.00	\$25.00

-	I. MONETARY RECEIPT	S (Section A	A-K)			
NAME OF COMMITTEE		,	, i i i i i i i i i i i i i i i i i i i	YPE OF REPORT		
Norwalk Democratic Town Committee October 10 Filing - Original						
	B. Itemized Contributions from I	ndividuals	•			
Last Name		First Na	me			MI
Levin		Jol	hn			
Residential Street Address		City			State	Zip Code
249 Chestnut Hill Rd Principal Occupation		Norwalk	me of Employer		СТ	06851
		1141	me of Employer			
INvestor			Untamed Capital			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busing a contract with said municipality valued at more th	ess he/she associate		Yes No	Amo	unt of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contr		Yes X No		
Method of Contribution			Date Received	Aggregate Contributions		
Cash X Personal Check Credit/De	bit Card Payroll Deduction	Money Order	09/21/2013	\$200.00		\$200.00
Last Name		First Na	me		•	MI
Hamilton III			ber			
Residential Street Address		City			State	Zip Code
1 Saint John St		Norwalk			СТ	06855
Principal Occupation		Na	me of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate		Yes No	Amo	unt of Contribution
Is this contribution associated with a fundraising event listed in Section L1? Yes If yes, list Event # <u>09212013A</u> No	Is contributor a principal of state contractor or pros If yes, indicate which branch or branches of government the contract is with:	spective state contr		Yes X No		
Method of Contribution			Date Received	Aggregate Contributions		
Cash X Personal Check Credit/De	bit Card Dayroll Deduction	Money Order	09/21/2013	\$30.00		\$30.00
L act Name		First Na		· · ·		
Last Name Richmond			nette			MI
Residential Street Address		City			State	Zip Code
314 Rowayton Ave		Norwalk			СТ	06853
Principal Occupation		Na	me of Employer			
Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Yes X No	If contribution is in excess of \$400 to a candidate of officer of a municipality does contributor or busine a contract with said municipality valued at more th	ess he/she associate nan \$5000?	ed with have	Yes No	Amo	unt of Contribution
Is this contribution associated with a fundraising event listed in Section L1? If yes, list Event # 09212013A No If yes, indicate which branch or branches of government the contract is with:						
Method of Contribution			Date Received	Aggregate Contributions		
Cash X Personal Check Credit/De	bit Card Payroll Deduction	Money Order	09/21/2013	\$25.00		\$25.00

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I. MONETARY RECEIPTS (Section A-K)							
NAME OF COMMITTEE	TYPE OF REPORT						
Norwalk Democratic Town Committee	October 10 Filing - Original						
B. Itemized Contributions from Individuals							

Last Name		First Name				MI
Wall		Gail				G
Residential Street Address	City			State	Zip Cod	ie
119 Partrick Ave	1	lorwalk		СТ	06851	
Principal Occupation		Name of Employer				
or dependent child of a lobbyist?	If contribution is in excess of \$400 to a candidate committee for a chief executive officer of a municipality does contributor or business he/she associated with have a contract with said municipality valued at more than \$5000?				ount of Con	tribution
fundraising grant listed in Section 1.12 X Yes	If yes, indicate which branch or branches of					
Method of Contribution		Date Received	Aggregate Contributions			
Cash X Personal Check Credit/Debit Card Payroll Deduction	Money Money	Order 09/21/2013	\$500.00		\$500.0	
			Total of Section	В	\$9,	073.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS	(Sections A &	B) (Total on Line 14 o	f Summary Page)		\$9,0	073.00

I. MONETARY RECEIPTS (Section A-K)							
NAME OF COMMITTEE					TYPE OF REPORT	,	
Norwalk Democratic Town Committee					October 10 Filing - Orig	jinal	
C1. Contril							
Name of Committee				Name of Treasurer			
Address		Is this contribution as fundraising event list		Yes	No	Amount of Contribution	
	_	If yes, list Eve	ent #				
City	State	Zip Code Date Received Aggregate		e Contributions			
Total of Section C1							

I. MONETARY RECEIPTS (Section A-K)								
NAME OF COMMITTEE	NAME OF COMMITTEE TYPE OF REPORT							
Norwalk Democratic Town Committee				October 10 Filing - Origina	l			
C2. Reimbursements. Payments. or Surplus Distributions from other Committees								
Name of Committee			Name of Treasurer					
Address			Date Received		Amount of Receipt			
City	State	Zip Code	Reimbursement for shared expense					
			Payment for goods and service	es				
	Surplus Distribution							
Total of Section C2								

I. MONETARY RECEIPTS (Section A-K)							
NAME OF COMMITTEE		TYPE O	F REPORT				
Norwalk Democratic Town Committee		October 10	) Filing - Original				
D. Loans Received this Period							
Name of Lender	Source of Loan: Bank Candidate	Individual	Other	Date of Receipt			
Street Address	City	State	Zip Code	Is there a cosigner or Guarantor of this loan? Yes No			
Name of Cosigner/Guarantor (if applicable)				Amount Received			
Street Address	City	State	Zip Code				
Total of Section D							

I. MONETARY RECEIPTS (Section A-K)							
NAME OF COMMITTEE				TYPE OF REPORT			
Norwalk Democratic Town Committee				October 10 Filing - Original			
E. Receipts from Entities other than Individuals or Other Committees (Referendum Committees ONLY)							
Name of Entity							
Street Address	reet Address		Date Received		Amount Received		
City	State	Zip Code	Aggreg	ate Contributions			
Total of Section E							

I. MONETARY RECEIPTS (Section A-I)							
NAME OF COMMITTEE						EPORT	
Norwalk Democratic Town Committee				October 10 Filing	- Original		
	F. Amount Transferred from Affiliated Business Treasury (Business Entity Committees ON						
Date of Receipt	Is this transaction associated with a fundraising event listed in Section L1?	Yes	No	If yes, list Event #		Amount	
					Total of Section F		

I. MONETARY RECEIPTS (Section A-I)						
NAME OF COMMITTEE		TYPE OF REPORT				
Norwalk Democratic Town Committe	October 10 Filing - Original					
G. Amount Transferred from Affiliated Labor Union or Other Organization Treasury (Organization Committees ONLY)						
Date of Receipt	Amount					
Total of Section G						

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I. MONETARY RECEIPTS (Section A-K)								
NAME OF COMMITTEE	TYPE C	F REPORT						
Norwalk Democratic Town	October 10	Filing - Original						
H. Personal	Funds of the Candidate R	Received this Period (Candida	te Committees ONLY)					
Date of Receipt	Method of Payment			ĺ	Amount			
	Cash	Personal Check	Credit/Debit Card					
Total of Section E								

I. Monetary Receipts (Section A-K)									
NAME OF COMMITTEE				TYPE OF REPORT					
Norwalk Democratic Town Committee					1				
J. Interest from Deposits in Authorized Accounts									
Name of Institution			Date Rec	eived	Amount				
				_					
Street Address	City	Stat	e	Zip Code					
Total of Section J									

I. MONETARY RECEIPTS (Section A-K)								
NAME OF COMMITTEE	TYPE OF RE	EPORT						
Norwalk Democratic Town Committee				Driginal				
K. Miscellan	K. Miscellaneous Monetary Receipts not Considered Contributions							
Name			tion	Amount Received				
Street Address	Citv	State	Zip Code					
Description								
			Total of Section K					

II. FUNDRAISING EVENT ACTIVITY (Sections L1 - L4)								
NAME OF COMMITTEE				TYPE OF RE	PORT			
Norwalk Democratic Town Co	ommittee			October 10 Filin	g - Original			
	L1. Fundra	uiser Event Infor	mation					
Fundraising Event # Date of Fundraiser Letter 09/21/2013 A	Description Party Event							
Location: Street Address			City		State	Zip Code		
50 Elmwood Dr			Norwalk		СТ	06854		
Subpart 1: (All Committees)       X       Yes       (If yes, go to Section L4 In-Kind Donations not Considered Contributions and complete required information for puchases host(s) for food, beverage and invitations.)					ade by			
Did this fundraiser include items donated by items donated by an individual of up to \$100		Yes X No	(If yes, go to Section L4 In- Contributions and complete rec					
Was this fundraiser a tag sale, auction, or ot puchases from an individual of up to \$100?	her sale of donated items with	Yes X No	(If yes, enter Total Receipts	s here.)		\$0.00		
Subpart 2: (Town Committees and Municipal Were there purchases of advertising space in with this fundraiser?	Yes X No	<i>(If yes</i> , go to Section L3 Pu Book or on a Sign and complet			Program			
Subpart 3: (Town Committees ONLY) Did your committee sell food or beverage at within the state with this fundraiser?	a fair or similar mass gathering held	Yes X No	(If yes, enter Total Receipts	here.)		\$0.00		
			To	tal of Section L1	L	\$0.00		

	II. FUNDR	AISING EVENT ACTIVIT	Y (S	Sections L1 - L4)				
NAME OF COMMITTEE					TY	PE OF REPO	RT	
Norwalk Democratic To	own Committee				October 10	) Filing - Origina	I	
L3. Purchases of	Advertising in a Program B	Book or on a Sign <i>(Municipal Ca</i>	andid	ate and Town Com	mittees O	NLY)		
Name of Purchaser						ade By: ness Entity Proprietorship		Individual
Street Address				City			State	Zip Code
Date Received	Event #	Aggregate Purchases for All Events	Amo	uunt of Program Ad Purchase		Amount of S	Sign Purc	hase
					Total o	of Section L3		

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II. FUNDRAISING EVENT ACTIVITY (Sections L1 - L4)								
NAME OF COMMITTEE					TYPE OF REP	ORT		
Norwalk Democratic Town Con	nmittee			October 10 Filing - Original				
	L4. In-Kind Donations Not Considered Contributions							
Name of the Donor								
Street Address			City			State	Zip Code	
Donation Given by: Business Entity	Description of Donation Fair				Market Value of Donation			
Individual Sole Proprietorship	Date Received	Event #		Aggregate value for t	his event			
	1							

Total of Section L4

III. NONMONETARY RECEIPTS (Sections M - O)									
NAME OF COMMITTEE				TYPI	E OF REPC	ORT			
Norwalk Democratic Town Committee				October 10 F	Filing - Origina	al			
	M. In-Ki	nd Contributions							
Name									
Street Address		City		State		Zip Code			
Type of Contributor: Committee Individual / Sole Proprietorship Other	Date Received	Aggregate contributions	Description of In-Kind Contribu	tion					
Is Contributor a lobbyist, spouse, or dependent child of a lobbyist? You have a contract with said municipality valued at more have spontation with a spontation of the sponta									
Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event#					-				
			Total of S	Section M					

III. Non Monetary Receipts (Sections M - O)						
NAME OF COMMITTEE	TYPE OF REPORT					
Norwalk Democratic Town Committee	October 10 Filing - Original					
N. Refundable Deposit to Telephone Company						

Last Name of Individual		First Name		First Name		First Name		MI	Date I	Deposit Made
Residential Street Address	Ci	ty	State	Zip Code		Amount of Deposit				
Name of Telephone company										
Street Address	City		State	Zip Code						
				Total of Se	ection N					

III. NONMONETARY RECEIPTS (Sections M - O)								
NAME OF COMMITTEE			TYPE OF REPFORT					
Norwalk Democratic Town Committee			October 10 Filing - Original					
O. Non-Monetary Receipts of Organization Expenditures Made By Legislative Leadership, Legislative Caucus, and Party Committee - OPTIONAL See Public Act 11-48								
Name of Committee (Legislative Leadership, Legislative Caucus, and Party Committees ONLY)	Name of Treasurer							
Street Address			Date Notice Received	Fair Market Value of Donation				
City	State	Zip Code	Aggregate Donations					
Description of Donation	Purpose of Expenditure A B	C D E						
Total of Section O								

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IV. EXPENDITURES (Sections P - T)							
NAME OF COMMITTEE			TYPE OF RE	EPORT			
Norwalk Democratic Town Committee			October 10 Filing	- Original			
P. Expenses	Paid By Committee						
Name of Payee DSCC Federal		Date of Payment 09/19/2013		Method of Payment           X         Check           Debit 0			
Street Address 330 Main St	City Hartford			State CT	Zip Code 06106		
Purpose of Expenditure Description (by code)CNTRB Jefferson, Jackson Bailey Dinner		Event #		Α	Amount		
Expenditure # (if applicable) Type of Expenditure ( <i>if applicable</i> ) Itemization in Addendum P Required Coordinated without reimbursement sough Independent	Coordinated	with reimbursement	sought D E		\$175.00		
Name of Payee Bank of America		Date of Payment 09/21/2013		Method of Payment Check X Debit O			
Street Address 7 Sedgewick Ave	<sup>City</sup> Darien			State	Zip Code 06820		
Purpose of Expenditure Description (by code) BNK Monthly Fees		Event #		Α	Amount		
Expenditure # (if applicable) Type of Expenditure ( <i>if applicable</i> ) Itemization in Addendum P Required Coordinated without reimbursement sough Independent	Coordinated	with reimbursement	sought		\$18.00		
		Т	otal of Section P		\$193.00		

IV. EXPENDITURES (Sections P - T)									
NAME OF COMMITTEE TYPE C						OF REPORT			
October					ber 10 Filing - Original				
Q. Campaign Expenses Paid By Candidate									
Name of Payee (Name of vendor	Date of Payment		Is Reimbursement Claimed?						
				Yes	No				
Street Address		City		State	Zip Code				
Purpose of Expenditure (by code)	enditure Description			Event #		Amount			
			Total	of Section Q					

IV. EXPENDITURES										
NAME OF COM	IMITTEE						TYPE OF	REP	ORT	
Norwalk Democratic Town Committee				October 10 Filing - Original						
R. Expenses Incurred on Committee Credit Card										
Name of Issuing Instit	ution		T	ype of Credit Car	d:					
				Visa	Maste	r Card	Discover		American Express	
Other										
Name of Vendor								1	Date of Transaction	l
				<u>.</u>						
Street Address				City State Zip Code					Zip Code	
Purpose of Expenditu	re	Description				Event	#		Amo	ount
(by code)										
								_		
Expenditure #	Type of Expendi	ture (if applicable) Itemization in Addendum R Required		Coordinated	l with rein	nbursement	sought			
(if applicable)	Coordinated	without reimbursement sough Independent		Organization	А	В	C D	Е		
							Total of Section	R		

IV. EXPENDITURES									
NAME OF COMMITTEE TYPE OF R						REPORT			
Norwalk Democ	ratic Town Committee			October 10 F	iling - Original				
S. Expenses Incurred By Committee but Not Paid During this Period									
Name of Creditor						Date Incurred			
Street Address		City			State	Zip Code			
Purpose of Expenditure (by code)	Description		Event #	Amount Incurred (Estimate or Actual)					
Expenditure#	Type of Expenditure (if applicable) Itemization in Addendum S Required	Coordinated	with reimbursement s	ought					
(if applicable)	Coordinated without reimbursement sough Independent	Organization : A	B C	D E					

Total of Section S

IV. EXPENDITURES										
NAME OF COMMITTEE					TYPE OF REPORT					
Norwalk Democrati	Norwalk Democratic Town Committee					October 10 Filing - Original				
	T. Itemization	of Reimbursements to Com	mittee Workers	s and Consultan	ts					
Last Name of Worker/Consultant		First	МІ	Date of Payment		Method of Payment Check # Debit Card				
Secondary Payee										
Street Address	City				State	Zip Code				
Purpose of Expenditure Description (by code)				Event #				Amount		
Expenditure #       Type of Expenditure (if applicable) Itemization in Addendem T Required       Coordinated with reimbursement sough         Coordinated without reimbursement sough       Independent       Organization:       A       B       C       D       E										
Total of Section T										