

SEEC FORM 30

HAND DELIVERY

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

Rev. 5/08

101447
Do Not Mark in This Space For Official Use Only

SUMMARY PAGE

1. NAME OF COMMITTEE: Jepsen 2010
2. TYPE OF COMMITTEE (Check Box): [X] Exploratory Committee

3. TREASURER NAME: Title, First (Kathleen), MI (J.), Last (Kowalyshyn), Suffix

4. TREASURER ADDRESS: Street Address (28 Forster Street), City (Hartford), State (CT), Zip Code (06106)

5. ELECTION DATE: 11/02/2010
6. OFFICE SOUGHT (if applicable): Exploratory Committee
7. DISTRICT NUMBER (if applicable)

8. CANDIDATE NAME: Title, First (George), MI (C.), Last (Jepsen), Suffix

9. TYPE OF REPORT (Check One Box): [X] Termination, [] Deficit, [] Amendment to Type of Report

10. PERIOD COVERED: Beginning Date (04/01/2010) thru Ending Date (07/01/2010)

11. CERTIFICATION

I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete.

TREASURER OR DEPUTY TREASURER (SIGNATURE)

PRINT NAME OF SIGNER: Kathleen J. Kowalyshyn

DATE (mm/dd/yyyy): 6/21/10

PENALTY FOR FALSE STATEMENT IS PUNISHABLE BY FINE NOT TO EXCEED \$1,000 OR IMPRISONMENT FOR NOT MORE THAN ONE YEAR, OR BOTH.

SEEC FORM 30

Itemized Campaign Finance Disclosure Statement

Candidates for Statewide Offices and General Assembly

CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION

Rev. 5/08

Page 1 of 2

SUMMARY PAGE TOTALS

NAME OF COMMITTEE	FILING DUE DATE	
Jepsen 2010	07/12/2010	
	COLUMN A This Period	COLUMN B Aggregate
12. Balance on hand from day Committee was formed		\$0.00
13. Balance on hand at the beginning of Reporting Period	\$41,047.87	
14. Contributions received from Individuals (Section A and B)	\$25,265.00	\$67,361.00
15. Receipts from Other Committees (Sections C1 + C2)	\$5,447.29	\$5,447.29
16. Other Monetary Receipts (Sections D-1)	\$1,287.71	\$1,287.71
17. Total Proceeds from Tag Sales, Auctions or Other Sales (Section J2)	\$0.00	\$0.00
18. Total Monetary Receipts (add totals for lines 14-17)	\$32,000.00	\$74,096.00
19. Subtotals (add totals in line 13 + line 18 in Column A; and in line 12 + 18 in Column B)	\$73,047.87	\$74,096.00
20. Expenses Paid by Committee (Section N)	\$59,244.06	\$63,582.31
21. Balance on hand at close of Reporting Period (Subtract line 20 from line 19 in both Columns)	\$13,803.81	\$10,513.69
22. In-Kind Donations not Considered Contributions Received (Section J3)	\$650.00	\$850.00
23. In-kind Contributions Received (Section K)	\$0.00	\$0.00
24. Refundable Advances of Deposits to Telephone Company (Section L)	\$0.00	\$0.00
25. Receipt of Organization Expenditures (Section M)	\$0.00	\$0.00
26. Beginning Loan Balance	\$0.00	\$0.00
26a. + Loans received (Section D)	\$0.00	\$0.00
26b. + Interest and Penalties on Loan(s)	\$0.00	\$0.00
26c. - Payments on Loan(s)	\$0.00	\$0.00
26d. Total Outstanding Loan Amount	\$0.00	\$0.00
27. Campaign Expenses Paid by Candidate (Section O)	\$0.00	\$0.00
28. Expenses Incurred on Committee Credit Card (Section P)	\$0.00	\$0.00
29. Expenses Incurred by Committee During this Period but Not Paid (Section Q)	\$0.00	
29a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section Q)	\$0.00	

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Residential Street Address		City	State	Zip Code	Date Received	
Hull	Steve		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		\$200.00
3109 Brooklawn Ter		Chevy Chase	MD	20815-3937	04/01/2010	
Principal Occupation Publisher		Name of Employer Kohanza Media Ventures		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$200.00		
If yes, list Event # _____						
Brandon	John		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		\$250.00
1617 Boulevard		West Hartford	CT	06107	04/05/2010	
Court Reporter		Brandon Smith Reporting & Video		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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		
If yes, list Event # _____						
Geragosian	John		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		\$40.00
39 Pendleton Road		New Britain	CT	06053-2105	04/05/2010	
Realtor		Self		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$40.00		
If yes, list Event # _____						
Almodovar	Mariluz		<input checked="" type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		\$20.00
20 Division Street, 1st Floor		New Britain	CT	06051	04/06/2010	
None		None		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$20.00		
If yes, list Event # 04/05/2010a						

Subtotal Section B - This Page:	\$510.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last Bareiss		First Conrad		M.I.	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 #	Amount of Contribution \$375.00
Residential Street Address 113 Old North Stamford Rd			City Stamford		State CT	Zip Code 06905-3964	Date Received 04/06/2010	
Principal Occupation Attorney		Name of Employer Conard W. Bareiss Attorney at Law			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$375.00				
Last Black		First Shirley		M.I.	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 #	Amount of Contribution \$20.00
Residential Street Address 301 Tremont Street, Apt. 3			City New Britain		State CT	Zip Code 06051-1120	Date Received 04/06/2010	
Principal Occupation Retired		Name of Employer None			Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 04/05/2010a			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$20.00				
Last Centeno		First Rolando		M.I.	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 #	Amount of Contribution \$25.00
Residential Street Address 289 Slater Road			City New Britain		State CT	Zip Code 06053-3444	Date Received 04/06/2010	
Principal Occupation Paraprofessional -- Autism Class		Name of Employer Consolidated School District of New Britain			Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 04/05/2010a			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$25.00				
Last Cruz		First Sylvia		M.I.	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 #	Amount of Contribution \$20.00
Residential Street Address 74 Talcott St, Apt. D			City New Britain		State CT	Zip Code 06051	Date Received 04/06/2010	
Principal Occupation realitor		Name of Employer unique reality			Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 04/05/2010a			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$20.00				

Subtotal Section B - This Page:	\$440.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
			<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		
			<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit/Debit Card		
Gerratana	Gregory					\$50.00
Residential Street Address		City	State	Zip Code	Date Received	
674 Lincoln Street		New Britain	CT	06052	04/06/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			
Policy Analyst	State of Connecticut		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event #</i> 04/05/2010a			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		<input type="checkbox"/> Yes <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
<input type="checkbox"/> Executive		<input type="checkbox"/> Legislative		\$50.00		
Heftman	Jacquelin					\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
97 Acre View Drive		Stamford	CT	06903	04/06/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			
Retired	Information Requested		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		<input type="checkbox"/> Yes <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
<input type="checkbox"/> Executive		<input type="checkbox"/> Legislative		\$100.00		
Horowitz	Steven					\$20.00
Residential Street Address		City	State	Zip Code	Date Received	
288 Steele Street		New Britain	CT	06052	04/06/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			
Professor	Central Connecticut State University		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		<input type="checkbox"/> Yes <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
<input type="checkbox"/> Executive		<input type="checkbox"/> Legislative		\$20.00		
Johnson	Elizabeth	P.				\$200.00
Residential Street Address		City	State	Zip Code	Date Received	
81 Howard Road		Greenwich	CT	06831	04/06/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			
Information Requested	housewife		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		<input type="checkbox"/> Yes <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
<input type="checkbox"/> Executive		<input type="checkbox"/> Legislative		\$200.00		

Subtotal Section B - This Page:	\$370.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
			<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		
			<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit/Debit Card		
Rosenthal	Elizabeth	S.				\$25.00
Residential Street Address		City	State	Zip Code	Date Received	
1893 Asylum Avenue		West Hartford	CT	06117	04/06/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Education Specialist	CREC		If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$25.00		
Sullivan	Michael					\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
22 Hartwell Road		West Hartford	CT	06117	04/06/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Lawyer	State of Connecticut		If yes, list Event # 04/05/2010a			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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		
Trueworthy	Lorraine					\$40.00
Residential Street Address		City	State	Zip Code	Date Received	
8901 English Saddle Lane		Charlotte	NC	28273	04/06/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Sales	QED, Inc.		If yes, list Event # 04/05/2010a			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$40.00		
Valengavich	John					\$20.00
Residential Street Address		City	State	Zip Code	Date Received	
15 Parkmore Street		New Britain	CT	06051-3357	04/06/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Retired	None		If yes, list Event # 04/05/2010a			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$20.00		

Subtotal Section B - This Page:	\$185.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Residential Street Address		City	State	Zip Code	Date Received	
Aspell	James		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		\$25.00
53 Harvest Ln		West Hartford	CT	06117-2328	04/07/2010	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Attorney		Law Offices of James F. Aspell, P.C.	If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$25.00
Black	Ethel	C.	<input checked="" type="checkbox"/> Money Order	<input type="checkbox"/> Personal Check		\$10.00
301 Tremont Street, Apt. 3		New Britain	CT	06051	04/07/2010	
Information Requested		McKesson Corporation	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	
Bonney	Leigh	A.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$100.00
10 Lighthouse Lane		Old Saybrook	CT	06475	04/07/2010	
Executive		Pfizer	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	
Casper	Stewart M.		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$375.00
72 Seir Hill Road		Wilton	CT	06897	04/07/2010	
Attorney		Casper & de Toledo LLC	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	

Subtotal Section B - This Page:	\$510.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		FILING DUE DATE
Jepsen 2010		7/12/2010
A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>		Subtotal Section A \$0.00

B. Itemized Contributions from Individuals

Last	First	M.I.	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 #	Amount of Contribution
Cooney	David					
Residential Street Address 27 Carnoustie Circle		City Bloomfield	State CT	Zip Code 06002	Date Received 04/07/2010	
Principal Occupation Trial Lawyer		Name of Employer RisCassi & Davis		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 04/07/2010a		\$250.00
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	First	M.I.	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 #	Amount of Contribution
Davis	William					
Residential Street Address 2 Biltmore Park		City Bloomfield	State CT	Zip Code 06002	Date Received 04/07/2010	
Principal Occupation Attorney		Name of Employer RisCassi & Davis		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, list Event # _____		\$375.00
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 \$375.00	
Last	First	M.I.	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 #	Amount of Contribution
Dembo	Steven	R.				
Residential Street Address 66 Hartwell Road		City West Hartford	State CT	Zip Code 06117	Date Received 04/07/2010	
Principal Occupation Attorney		Name of Employer RBAD		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 04/07/2010a		\$250.00
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	First	M.I.	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 #	Amount of Contribution
Gale	John					
Residential Street Address 6 Cone St		City Hartford	State CT	Zip Code 06105	Date Received 04/07/2010	
Principal Occupation Attorney		Name of Employer Gale & Kowalshyn		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 04/07/2010a		\$250.00
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	

Subtotal Section B - This Page:		\$1,125.00
Total of Section B Pages		\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)		\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last Harris	First Victoria	M.I. F.	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 #	Amount of Contribution \$250.00	
Residential Street Address 22 Locust St		City Greenwich	State CT	Zip Code 06830-6317		Date Received 04/07/2010
Principal Occupation realtor		Name of Employer self employed		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <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 Kennelly	First John B.	M.I.	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 #	Amount of Contribution \$100.00	
Residential Street Address 95 Scarborough Street		City Hartford	State CT	Zip Code 06105-1106		Date Received 04/07/2010
Principal Occupation Lawyer		Name of Employer Kennelly & Associates		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 04/07/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <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 Laramie	First Ellen	M.I.	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 #	Amount of Contribution \$100.00	
Residential Street Address 60 Volpi Road		City Bolton	State CT	Zip Code 06043		Date Received 04/07/2010
Principal Occupation Lawyer		Name of Employer CATIC		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 04/07/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <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 McElaney	First Stephen	M.I. F.	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 #	Amount of Contribution \$100.00	
Residential Street Address 67 Blue Ridge Drive		City South Windsor	State CT	Zip Code 06074		Date Received 04/07/2010
Principal Occupation Attorney		Name of Employer mcelaney and mcgail		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <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:	\$550.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last Szilagyi	First Frank	M.I. J.	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 #	Amount of Contribution \$100.00	
Residential Street Address 48 Pheasant Chase		City West Hartford	State CT	Zip Code 06117		Date Received 04/07/2010
Principal Occupation Attorney		Name of Employer Silvester & Daly		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 04/07/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Ustach	First Lynne	M.I. A.	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 #	Amount of Contribution \$250.00	
Residential Street Address 25 Ashford Drive		City Avon	State CT	Zip Code 06001		Date Received 04/07/2010
Principal Occupation Information Requested		Name of Employer Information Requested		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 04/07/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Benjamin	First Adrienne	M.I.	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 #	Amount of Contribution \$25.00	
Residential Street Address 288 Steele Street		City New Britain	State CT	Zip Code 06052		Date Received 04/08/2010
Principal Occupation Clinical Social Worker		Name of Employer Self		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$25.00		
Last Campbell	First Christopher	M.I.	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 #	Amount of Contribution \$50.00	
Residential Street Address 5 Hundley Ct, Apt 1B		City Stamford	State CT	Zip Code 06902-3923		Date Received 04/08/2010
Principal Occupation Director of Network Development		Name of Employer Juju, Inc		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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:	\$425.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010
A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	
Subtotal Section A	\$0.00

B. Itemized Contributions from Individuals

Last Carlson	First Peter	M.I.	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 #	Amount of Contribution \$250.00	
Residential Street Address 9 Pilot Rock Ln		City Riverside	State CT	Zip Code 06878-2615		Date Received 04/09/2010
Principal Occupation Insurance Agent		Name of Employer Carlson & Carlson, Inc.		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <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 Friedlander	First Barbara	M.I. T.	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 #	Amount of Contribution \$375.00	
Residential Street Address 434 Hunting Ridge Road		City Stamford	State CT	Zip Code 06903		Date Received 04/09/2010
Principal Occupation Information Requested		Name of Employer retired		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <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 \$375.00		
Last Gray	First Charles	M.I.	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 #	Amount of Contribution \$100.00	
Residential Street Address 23 Pierce Pl		City Stamford	State CT	Zip Code 06906-2525		Date Received 04/09/2010
Principal Occupation Sales		Name of Employer Radiant Systems		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <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 Hirschhorn	First Madeleine	M.I.	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 #	Amount of Contribution \$375.00	
Residential Street Address 107 Via Palacio		City Palm Beach	State FL	Zip Code 33418		Date Received 04/09/2010
Principal Occupation Attorney		Name of Employer Self		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <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 \$375.00		

Subtotal Section B - This Page:	\$1,100.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	
	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
		<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card				
Hirschhorn	Ralph		FL	33418	04/09/2010	\$375.00
Residential Street Address		City	State	Zip Code	Date Received	
107 Via Palacio		Palm Beach	FL	33418	04/09/2010	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section L1?			
Retired Orthopedic Surgeon		Gardens	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		Information Requested	Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$375.00	
Kowalshyn	Kathleen	J.	CT	06106	04/09/2010	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
28 Forster Street		Hartford	CT	06106	04/09/2010	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section L1?			
Information Requested		Information Requested	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		Information Requested	Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	
McDonald	Andrew		CT	06906-2525	04/09/2010	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
23 Pierce Pl		Stamford	CT	06906-2525	04/09/2010	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section L1?			
Attorney		Pullman Comley	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		Information Requested	Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	
McKeen	Ryan		CT	06026	04/09/2010	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
19 Pine Wood Road		East Granby	CT	06026	04/09/2010	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section L1?			
Attorney		Leone, Throwe, Teller & Nagle	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		Information Requested	Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00	

Subtotal Section B - This Page:	\$675.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last Muszynski		First Julie		M.I.	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 #	Amount of Contribution \$10.00
Residential Street Address 128 Winchell Dr			City Berlin		State CT	Zip Code 06037-1956	Date Received 04/09/2010	
Principal Occupation Financial Analyst		Name of Employer Travelers Insurance			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 \$10.00		
Last Pollak		First David		M.I.	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 #	Amount of Contribution \$375.00
Residential Street Address 115 4th Ave, Apt 8J			City New York		State NY	Zip Code 10003-4909	Date Received 04/09/2010	
Principal Occupation finance		Name of Employer pegasus capital			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 \$375.00		
Last Sherman		First Mark		M.I.	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 #	Amount of Contribution \$150.00
Residential Street Address 29 5th St			City Stamford		State CT	Zip Code 06905-5013	Date Received 04/09/2010	
Principal Occupation Attorney		Name of Employer Self-employed			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 \$150.00		
Last Vogel		First Pam		M.I.	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 #	Amount of Contribution \$375.00
Residential Street Address 110 Davenport Farm Lane West			City Stamford		State CT	Zip Code 06903	Date Received 04/09/2010	
Principal Occupation Designer		Name of Employer Self			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 \$375.00		

Subtotal Section B - This Page:	\$910.00
--	----------

Total of Section B Pages	\$25,265.00
---------------------------------	-------------

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00
--	-------------

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE: Jepsen 2010 FILING DUE DATE: 7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY
 (See instructions for definition of Small Contributor) Subtotal Section A: \$0.00

B. Itemized Contributions from Individuals

Last Vogel	First Richard	M.I.	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 #	Amount of Contribution \$375.00	
Residential Street Address 110 Davenport Farm Lane West		City Stamford	State CT	Zip Code 06903		Date Received 04/09/2010
Principal Occupation Marketing		Name of Employer Loeb Enterprises		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$375.00		

Last Krumeich	First Edward	M.I.	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 #	Amount of Contribution \$100.00	
Residential Street Address 16 Perryridge Road		City Greenwich	State CT	Zip Code 06830-4608		Date Received 04/12/2010
Principal Occupation Attorney		Name of Employer Ivey, Brnum & O'mara		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Meehan	First James	M.I.	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 #	Amount of Contribution \$375.00	
Residential Street Address 80 Highridge Rd		City West Simsbury	State CT	Zip Code 06092-2004		Date Received 04/13/2010
Principal Occupation Attorney		Name of Employer Arrowood Indemnity		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$375.00		

Last Cocozza	First Louis	M.I.	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 #	Amount of Contribution \$30.00	
Residential Street Address 37 Tori Lane		City Brookfield	State CT	Zip Code 06804		Date Received 04/15/2010
Principal Occupation Business Representative		Name of Employer New England Regional Council of Carpenters		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$30.00		

Subtotal Section B - This Page:	\$880.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	
	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Residential Street Address		City	State	Zip Code	Date Received	
Conway	Michael	T.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$100.00
60 Brenway Drive		West Hartford	CT	06117	04/15/2010	
Principal Occupation Owner/Painter		Name of Employer Mike's Home Painting, LLC		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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		
Cunningham	John		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$50.00
26 Honey Lane		Sandy Hook	CT	06482	04/15/2010	
Principal Occupation Business Representative		Name of Employer New England Regional Council of Carpenters		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$50.00		
Dowling, Jr.	Vincent J.		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		\$375.00
54 Ledyard Rd		West Hartford	CT	06117-1708	04/15/2010	
Principal Occupation Macro Analyst		Name of Employer Dowling Corporation		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$375.00		
Kenyon	Bruce		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$200.00
16 Sandpiper Point Rd.		Old Lyme	CT	06371	04/15/2010	
Principal Occupation Retired		Name of Employer None		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$200.00		

Subtotal Section B - This Page:	\$725.00
--	----------

Total of Section B Pages	\$25,265.00
---------------------------------	-------------

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00
--	-------------

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last Miller		First Len		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 8 Kings Ln			City Essex		State CT	Zip Code 06426-1012	Date Received 04/16/2010	
Principal Occupation retired		Name of Employer n/a		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 Curran		First Kenneth		M.I. J.	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 #	Amount of Contribution \$25.00
Residential Street Address 1 Carriage Place, 2nd Floor			City Waterbury		State CT	Zip Code 06702	Date Received 04/17/2010	
Principal Occupation Director of Outreach		Name of Employer US House of Reps		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 \$25.00		
Last Daniels		First Jeffrey		M.I.	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 #	Amount of Contribution \$25.00
Residential Street Address 102 Arundel Avenue			City West Hartford		State CT	Zip Code 06107	Date Received 04/17/2010	
Principal Occupation consultant		Name of Employer Jeff Daniels Consulting		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 \$25.00		
Last Epstein		First Charles		M.I.	Method of contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card		Contribution ID #	Amount of Contribution \$20.00
Residential Street Address 19 Crest Drive			City Cromwell		State	Zip Code 06416-2046	Date Received 04/17/2010	
Principal Occupation Judicial Marshal		Name of Employer State of Connecticut		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 \$20.00		

Subtotal Section B - This Page:	\$170.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE: Jepsen 2010 FILING DUE DATE: 7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY
 (See instructions for definition of Small Contributor) Subtotal Section A \$0.00

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Kaplan	Daniel		<input checked="" type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		
Residential Street Address		City	State	Zip Code	Date Received	
28 Forster Street		Hartford	CT	06106	04/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Paralegal	Law Offices of Kim Duell		If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$20.00
Liska	James		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$15.00
Residential Street Address		City	State	Zip Code	Date Received	
138 Hubbard Stret		Glastonbury	CT	06033	04/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Banker	Bank of America, N.A.		If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$15.00
Martone	Michael	A.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$50.00
Residential Street Address		City	State	Zip Code	Date Received	
32 Buttermilk Lane		Branford	CT	06405	04/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Attorney	None		If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$50.00
Rinaldi-Sabia	Beatrice		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
137 Skymeadow Drive		Stamford	CT	06903-3414	04/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Retired	Retired		If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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:	\$135.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A
	\$0.00

B. Itemized Contributions from Individuals

Last	First	M.I.	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 #	Amount of Contribution	
Sweeney	Liam					
Residential Street Address		City	State	Zip Code		Date Received
151 Beacan Street		Hartford	CT	06105		04/17/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
assistant to dodd		us senate		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	
				\$25.00		
Last	First	M.I.	Method of contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card	Contribution ID #	Amount of Contribution	
Tyszka	Marilyn					
Residential Street Address		City	State	Zip Code		Date Received
12 Briarwood Drive		Simsbury	CT	06070-1104		04/17/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Retired		None		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	
				\$20.00		
Last	First	M.I.	Method of contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card	Contribution ID #	Amount of Contribution	
Tyszka	William					
Residential Street Address		City	State	Zip Code		Date Received
12 Briarwood Drive		Simsbury	CT	06070-1104		04/17/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Retired		None		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	
				\$20.00		
Last	First	M.I.	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 #	Amount of Contribution	
Kindall	Clare					
Residential Street Address		City	State	Zip Code		Date Received
46 Bishop Rd		West Hartford	CT	06119-1535		04/18/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Attorney		None		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	
				\$300.00		

Subtotal Section B - This Page:	\$365.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010
A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A \$0.00

B. Itemized Contributions from Individuals

Last	First	M.I.	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 #	Amount of Contribution	
Kindall	Mark				\$375.00	
Residential Street Address		City	State	Zip Code		Date Received
46 Bishop Road		West Hartford	CT	06119		04/18/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
attorney		Izard Nobel				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	
				\$375.00		
Last	First	M.I.	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 #	Amount of Contribution	
Weinberg	Margaret	Kurth			\$25.00	
Residential Street Address		City	State	Zip Code		Date Received
11 Big Oak Circle		Stamford	CT	06903		04/18/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Information Requested		retired				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	
				\$25.00		
Last	First	M.I.	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 #	Amount of Contribution	
Kavounas	Margaret				\$375.00	
Residential Street Address		City	State	Zip Code		Date Received
565 Marina Blvd		San Francisco	CA	94123		04/19/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Retired		Retired				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	
				\$375.00		
Last	First	M.I.	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 #	Amount of Contribution	
Patton	Maureen				\$25.00	
Residential Street Address		City	State	Zip Code		Date Received
21 Blue Ridge Lane		West Hartford	CT	06117		04/19/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
None		None				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	
				\$25.00		

Subtotal Section B - This Page:	\$800.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE: Jepsen 2010 FILING DUE DATE: 7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY
 (See instructions for definition of Small Contributor) Subtotal Section A \$0.00

B. Itemized Contributions from Individuals

Last Vollmer		First Edward		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 377 Main Street, Unit 13, Unit 13			City New Canaan		State CT	Zip Code 06840	Date Received 04/19/2010	
Principal Occupation None		Name of Employer None		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Marshall		First Ellyn		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 2 Berkshire Rd			City Bloomfield		State CT	Zip Code 06002-2102	Date Received 04/21/2010	
Principal Occupation Realtor		Name of Employer william raveis		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Holzman		First Michael		M.I.	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 #	Amount of Contribution \$50.00
Residential Street Address 57 Mountain View Dr			City West Hartford		State CT	Zip Code 06117-3028	Date Received 04/22/2010	
Principal Occupation environmental engineer/consultant		Name of Employer self - M.I. Holzman & Assoc., LLC		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$50.00				
Last Jansen		First Cheryl		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address PO Box 2443			City Huntington		State CT	Zip Code 06484-1443	Date Received 04/24/2010	
Principal Occupation Attorney		Name of Employer Lawyers for Children America, Inc.		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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: \$350.00

Total of Section B Pages: \$25,265.00

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page) \$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE: Jepsen 2010 FILING DUE DATE: 7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY
 (See instructions for definition of Small Contributor) Subtotal Section A: \$0.00

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Residential Street Address			State	Zip Code	Date Received	
McCoy	Mark		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		\$50.00
48 Mountain View Dr			CT	06117-3029	04/26/2010	
Principal Occupation: father/stay at home dad		Name of Employer: none		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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: \$50.00		
Boehm	Lincoln A.		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		\$100.00
17 Wallacks Ln			CT	06902-7126	04/30/2010	
Principal Occupation: Retired		Name of Employer: Retired		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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		
newberg	cecile		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		\$25.00
1A Punch Bowl Dr			CT	06880-2126	04/30/2010	
Principal Occupation: volunteer		Name of Employer: none		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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: \$25.00		
Flynn	Kevin		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		\$50.00
67 Sachem Rd			CT	06825-1830	05/02/2010	
Principal Occupation: CSR		Name of Employer: State of Ct Labor depart		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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:	\$225.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE: Jepsen 2010 FILING DUE DATE: 7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY
 (See instructions for definition of Small Contributor) Subtotal Section A: \$0.00

B. Itemized Contributions from Individuals

Last Ellenthal		First Jonathan		M.I.	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 #	Amount of Contribution \$375.00
Residential Street Address 18 Highview Dr			City Wilton		State CT	Zip Code 06897-2426	Date Received 05/03/2010	
Principal Occupation Business Executive		Name of Employer Walker Digital Management, LLC		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$375.00				
Last Ellenthal		First Suzanne		M.I.	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 #	Amount of Contribution \$375.00
Residential Street Address 18 Highview Dr			City Wilton		State CT	Zip Code 06897-2426	Date Received 05/03/2010	
Principal Occupation N/A - Homemaker		Name of Employer N/A - Homemaker		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$375.00				
Last Clements		First Bob and Marilyn		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 104 Wallacks Dr			City Stamford		State CT	Zip Code 06902-7100	Date Received 05/04/2010	
Principal Occupation insurance broker		Name of Employer Integro Ltd.		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Enright		First Denise		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 207 Ocean Dr W			City Stamford		State CT	Zip Code 06902-8005	Date Received 05/05/2010	
Principal Occupation interior design		Name of Employer Self-employed		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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:		\$950.00
Total of Section B Pages		\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)		\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Green	Michelle		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		
Residential Street Address		City	State	Zip Code	Date Received	
70 Roton Avenue		Norwalk	CT	06853	05/05/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Chief Marketing Officer	Life Care, Inc.		If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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
Hauser	Debra		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$375.00
Residential Street Address		City	State	Zip Code	Date Received	
396 Livingston St		New Haven	CT	06511-1336	05/05/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Clinical Psychologist	None		If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$375.00
Hinch	Karen		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		\$50.00
Residential Street Address		City	State	Zip Code	Date Received	
21 Middlebrook Dr		Fairfield	CT	06824-3008	05/05/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Bookkeeper	Vogel & Co.		If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$50.00
Kavounas	Edmond		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$375.00
Residential Street Address		City	State	Zip Code	Date Received	
99 Birch Lane		Greenwich	CT	06830	05/05/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
CEO	Rockwood Capital		If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$375.00

Subtotal Section B - This Page:	\$1,000.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Residential Street Address			State	Zip Code	Date Received	
Mark	Julian		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$25.00
181 Turn of River Road, Apt 13			CT	06905	05/05/2010	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Retired Dentist		None	If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$25.00
Reilly	Susan	D.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$25.00
100 Meadowbrook Place			CT	06410	05/05/2010	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Producer		ESPN	If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$25.00
Rinaldi-Sabia	Beatrice		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$50.00
137 Skymeadow Drive			CT	06903-3414	05/05/2010	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Retired		Retired	If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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
Rourke	Mary Ellen		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$50.00
326 Central Avenue			CT	06716	05/05/2010	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Teacher		ACES	If yes, list Event # _____			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$50.00

Subtotal Section B - This Page:	\$150.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
		<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card				
Rourke	Timothy	W.	CT	06716	05/05/2010	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
326 Central Avenue		Wolcott	CT	06716	05/05/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Business Owner		BCI Financial		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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		
Smith	Earl	J.	CT	06482-1630	05/05/2010	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
5 Serenity Lane		Sandy Hook	CT	06482-1630	05/05/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Retired		None		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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		
Campbell	Christopher		CT	06902-3923	05/08/2010	\$50.00
Residential Street Address		City	State	Zip Code	Date Received	
5 Hundley Ct, Apt 1B		Stamford	CT	06902-3923	05/08/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Director of Network Development		Juju, Inc		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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		
Cassidy	Rita		CT	06117	05/08/2010	\$25.00
Residential Street Address		City	State	Zip Code	Date Received	
64 Brenway Drive		West Hartford	CT	06117	05/08/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Insurance Broker		Colemont Insurance Brokers		If yes, list Event # 05/08/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	
				\$25.00		

Subtotal Section B - This Page:	\$275.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Residential Street Address		City	State	Zip Code	Date Received	
Ezovski	Laurie	R.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$100.00
66 Mountain View Drive		West Hartford	CT	06117	05/08/2010	
Principal Occupation Claims		Name of Employer Travelers Insurance		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, list Event # 05/08/2010a		Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Aggregate contributions \$100.00		
Fox	Lawrence		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$50.00
60 Mountain View Drive		West Hartford	CT	06117	05/08/2010	
Principal Occupation Consultant		Name of Employer Self		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, list Event # 05/08/2010a		Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Aggregate contributions \$50.00		
Horgan	Denis	E.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$50.00
45 Riggs Avenue		West Hartford	CT	06107	05/08/2010	
Principal Occupation None		Name of Employer Self		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, list Event # 05/08/2010a		Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Aggregate contributions \$50.00		
Kaplan-Cho	Robyn		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$50.00
4 Shady Lake		West Hartford	CT	06117	05/08/2010	
Principal Occupation Attorney		Name of Employer Connecticut Education Association		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, list Event # 05/08/2010a		Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		Aggregate contributions \$50.00		

Subtotal Section B - This Page:	\$250.00
--	----------

Total of Section B Pages	\$25,265.00
---------------------------------	-------------

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00
--	-------------

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010
A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A \$0.00

B. Itemized Contributions from Individuals

Last Mirabello	First Peter	M.I.	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 #	Amount of Contribution
Residential Street Address 29 Cliffmore Road		City West Hartford	State CT	Zip Code 06107	Date Received 05/08/2010
Principal Occupation Executive		Name of Employer Self		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event # 05/08/2010a</i>	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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"/> No		Aggregate contributions \$50.00	
Last Mogel	First Greg	M.I.	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 #	Amount of Contribution
Residential Street Address 91 Pioneer Drive		City West Hartford	State CT	Zip Code 06117-3033	Date Received 05/08/2010
Principal Occupation Attorney		Name of Employer Louden Legal Group		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event # 05/08/2010a</i>	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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"/> No		Aggregate contributions \$25.00	
Last O'Leary	First Kathleen	M.I.	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 #	Amount of Contribution
Residential Street Address 9 Mountain View Drive		City West Hartford	State CT	Zip Code 06117	Date Received 05/08/2010
Principal Occupation Director of Membership		Name of Employer Leadership Greater Hartford		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event # 05/08/2010a</i>	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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"/> No		Aggregate contributions \$25.00	
Last Schmitt	First Terry	M.I. A.	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 #	Amount of Contribution
Residential Street Address 65 Walbridge Road		City West Hartford	State CT	Zip Code 06119	Date Received 05/08/2010
Principal Occupation Minister		Name of Employer Center Congregational Church		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event # 05/08/2010a</i>	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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"/> No		Aggregate contributions \$50.00	

Subtotal Section B - This Page:	\$150.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010
A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A \$0.00

B. Itemized Contributions from Individuals

Last Schwartz	First Jeffrey	M.I.	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 #	Amount of Contribution	
Residential Street Address 43 Mountain View Drive		City West Hartford	State CT	Zip Code 06117		Date Received 05/08/2010
Principal Occupation Attorney		Name of Employer Travelers		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event # 05/08/2010a</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$90.00		
Last Sullivan	First Paul	M.I.	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 #	Amount of Contribution	
Residential Street Address 22 Harvest Lane		City West Hartford	State CT	Zip Code 06117		Date Received 05/08/2010
Principal Occupation Blood Banking		Name of Employer American Red Cross		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, list Event # 05/08/2010a</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Vide	First John	M.I.	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 #	Amount of Contribution	
Residential Street Address 37 Harvest Ln		City West Hartford	State CT	Zip Code 06117-3025		Date Received 05/08/2010
Principal Occupation Management Consultant		Name of Employer EMC Corporation		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Alswanger	First Herman	M.I.	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 #	Amount of Contribution	
Residential Street Address 87 Idlewood Drive		City Stamford	State CT	Zip Code 06905		Date Received 05/10/2010
Principal Occupation Retired Educator		Name of Employer None		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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:	\$540.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last Bridge		First Josiah		M.I.	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 #	Amount of Contribution \$50.00
Residential Street Address 444 Bedford St, Apt 2s			City Stamford		State CT	Zip Code 06901	Date Received 05/10/2010	
Principal Occupation Retired Teacher		Name of Employer None			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 Freedman		First Joel		M.I.	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 #	Amount of Contribution \$375.00
Residential Street Address 26 Brookside Drive			City Stamford		State CT	Zip Code 06903	Date Received 05/10/2010	
Principal Occupation Real Estate Manager		Name of Employer Garden Homes Mgt. Corp.			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 \$375.00		
Last Gross		First Abby		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 20 Hill Road			City Greenwich		State CT	Zip Code 06830	Date Received 05/10/2010	
Principal Occupation None		Name of Employer None			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 Horan		First Eileen		M.I.	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 #	Amount of Contribution \$50.00
Residential Street Address 22 Westmoreland Dr			City West Hartford		State CT	Zip Code 06117-2656	Date Received 05/10/2010	
Principal Occupation Retired		Name of Employer None			Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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:	\$575.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010
A. Total Contributions from Small Contributors - Received this Period ONLY	
<i>(See instructions for definition of Small Contributor)</i>	
Subtotal Section A	\$0.00

B. Itemized Contributions from Individuals

Last NOBEL	First JEFFREY	M.I.	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 #	Amount of Contribution	
Residential Street Address 586 Deercliff Rd		City Avon	State CT	Zip Code 06001-2859		Date Received 05/11/2010
Principal Occupation LAWYER		Name of Employer IZARD NOBEL LLP		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Smith		First Michael		M.I.		
Residential Street Address 303 Greenwich St		City New York	State NY	Zip Code 10013-3962	Date Received 05/11/2010	
Principal Occupation Media		Name of Employer StreetEasy		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Weinraub		First David		M.I.		
Residential Street Address 26 Woodmont Dr		City Delmar	State NY	Zip Code 12054-3811	Date Received 05/11/2010	
Principal Occupation Attorney		Name of Employer Brown & Weinraub, PLLC		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$100.00		
Last Herring		First Timothy		M.I.		
Residential Street Address 22 Main St, Apt 24		City Danbury	State CT	Zip Code 06810-8090	Date Received 05/12/2010	
Principal Occupation Lawyer		Name of Employer Cummings & Lockwood LLC		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Is contributor a lobbyist, spouse, or dependent child of a lobbyist? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Aggregate contributions \$50.00		

Subtotal Section B - This Page:	\$350.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	
	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution	
		<input type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Credit/Debit Card					
Miranda	Luis		NY	10034-2763	05/12/2010	\$100.00	
Residential Street Address		City		State	Zip Code		Date Received
105 Payson Ave		New York		NY	10034-2763		05/12/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Partner		MirRam Group		If yes, list Event #			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?			<input type="checkbox"/> Yes <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	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative					Aggregate contributions	\$100.00	
Ratte	Pierre		CT	06883-1041	05/12/2010	\$100.00	
Residential Street Address		City		State	Zip Code		Date Received
79 Old Farm Rd		Weston		CT	06883-1041		05/12/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Real Estate		Self		If yes, list Event #			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?			<input type="checkbox"/> Yes <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	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative					Aggregate contributions	\$100.00	
Sutherland	Paul		CT	06877-2508	05/12/2010	\$25.00	
Residential Street Address		City		State	Zip Code		Date Received
66 Mimosa Ct		Ridgefield		CT	06877-2508		05/12/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Financial Consultant		Self		If yes, list Event #			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?			<input type="checkbox"/> Yes <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	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative					Aggregate contributions	\$25.00	
Abbatiello	Leslie		CT	06517	05/13/2010	\$50.00	
Residential Street Address		City		State	Zip Code		Date Received
17 Beverly Road		Hamden		CT	06517		05/13/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Education Specialist		ACES		If yes, list Event #			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?			<input type="checkbox"/> Yes <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	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative					Aggregate contributions	\$50.00	

Subtotal Section B - This Page:	\$275.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010
A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A \$0.00

B. Itemized Contributions from Individuals							
Last Achenbaum	First Barbara	M.I.	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 #			Amount of Contribution \$50.00
Residential Street Address 855 Weed St		City New Canaan	State CT	Zip Code 06840-4023	Date Received 05/13/2010		
Principal Occupation Free lance writer		Name of Employer Self		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$50.00			
Last Alschuler	First John	M.I.	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 #			Amount of Contribution \$100.00
Residential Street Address 99 Hudson St, Fl 3		City New York	State NY	Zip Code 10013-2815	Date Received 05/13/2010		
Principal Occupation Chairman		Name of Employer HR&A Advisors, Inc.		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Ballard	First Barbara	M.I. Earle	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 #			Amount of Contribution \$375.00
Residential Street Address P.O. Box 529		City Old Lyme	State CT	Zip Code 06371	Date Received 05/13/2010		
Principal Occupation Executive		Name of Employer Odyssey Enterprises, Inc.		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$375.00			
Last Fisher	First Dina	M.I.	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 #			Amount of Contribution \$100.00
Residential Street Address 1111 Farmington Ave		City West Hartford	State CT	Zip Code 06107-2117	Date Received 05/13/2010		
Principal Occupation Attorney		Name of Employer Robinson & Cole		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last Katz	First Elin	M.I.	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 #	Amount of Contribution \$50.00	
Residential Street Address 12 Forest Hills Lane		City West Hartford	State CT	Zip Code 06117		Date Received 05/13/2010
Principal Occupation Teacher		Name of Employer Retired		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <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 \$50.00		
Last Leighton		First Carol	M.I.	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 #
Residential Street Address 132 Sturges Rd		City Fairfield	State CT	Zip Code 06824-4937	Date Received 05/13/2010	
Principal Occupation None		Name of Employer None		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <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 \$25.00		
Last Paris	First Lissa	M.I.	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 #	Amount of Contribution \$375.00	
Residential Street Address 114 Tamara Cir		City Avon	State CT	Zip Code 06001-2233		Date Received 05/13/2010
Principal Occupation Attorney		Name of Employer Murtha Cullina, LLP		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <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 \$375.00		
Last Sarram	First Shiva	M.I.	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 #		Amount of Contribution \$100.00
Residential Street Address 33 Soundview Ln		City New Canaan	State CT	Zip Code 06840-2732	Date Received 05/13/2010	
Principal Occupation mother / activist		Name of Employer n/a		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event # _____</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> Yes <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:	\$550.00
--	----------

Total of Section B Pages	\$25,265.00
---------------------------------	-------------

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00
--	-------------

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Residential Street Address			State	Zip Code	Date Received	
Sexton	Rachel		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$50.00
			<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit/Debit Card		
Residential Street Address			State	Zip Code	Date Received	
Hamden			CT	6517	05/13/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?		
Information Requested		Information Requested		<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 that has or is seeking a contract with the branch of state government that the candidate is seeking office?			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	\$50.00
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Taborsak	Lynn		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$100.00
			<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit/Debit Card		
Residential Street Address			State	Zip Code	Date Received	
110 Hayestown Rd			CT	06811	05/13/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?		
Retired		None		<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 that has or is seeking a contract with the branch of state government that the candidate is seeking office?			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	\$100.00
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Tyszka	Marilyn		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$75.00
			<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit/Debit Card		
Residential Street Address			State	Zip Code	Date Received	
12 Briarwood Drive			CT	06070-1104	05/13/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?		
Retired		None		<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 that has or is seeking a contract with the branch of state government that the candidate is seeking office?			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	\$95.00
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Comas	Steven	M.	<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		\$100.00
			<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit/Debit Card		
Residential Street Address			State	Zip Code	Date Received	
33 Barnum Place			CT	06877	05/15/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?		
Insurance		M. J. Comas Company, Inc.		<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 that has or is seeking a contract with the branch of state government that the candidate is seeking office?			Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions	\$200.00
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

Subtotal Section B - This Page:	\$325.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
--------------------------	------------------------

Jepsen 2010	7/12/2010
-------------	-----------

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A \$0.00
--	----------------------------------

B. Itemized Contributions from Individuals

Last Comas	First Steven	M.I. M.	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 #	Amount of Contribution
---------------	-----------------	------------	--	-------------------	-------------------------------

Residential Street Address 33 Barnum Place	City Ridgefield	State CT	Zip Code 06877	Date Received 05/15/2010	
---	--------------------	-------------	-------------------	-----------------------------	--

Principal Occupation Insurance	Name of Employer M. J. Comas Company, Inc.	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>	Amount of Contribution \$100.00
-----------------------------------	---	--	---

Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <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 Goldblum	First Risa	M.I.	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 #	Amount of Contribution
------------------	---------------	------	--	-------------------	-------------------------------

Residential Street Address 20 Miller Road	City Pound Ridge	State NY	Zip Code 10576	Date Received 05/15/2010	
--	---------------------	-------------	-------------------	-----------------------------	--

Principal Occupation Information Requested	Name of Employer Information Requested	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>	Amount of Contribution \$375.00
---	---	--	---

Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <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 \$375.00
---	---	-------------------------------------

Last KALAMARIDES	First JOHN	M.I.	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 #	Amount of Contribution
---------------------	---------------	------	--	-------------------	-------------------------------

Residential Street Address 180 Westport Rd	City Wilton	State CT	Zip Code 06897-4637	Date Received 05/15/2010	
---	----------------	-------------	------------------------	-----------------------------	--

Principal Occupation FINANCIAL ADVISOR	Name of Employer SOURCE CAPITAL GROUP, INC	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>	Amount of Contribution \$100.00
---	---	--	---

Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <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 Laurie	First Mary	M.I.	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 #	Amount of Contribution
----------------	---------------	------	--	-------------------	-------------------------------

Residential Street Address 62 Home Ct	City Stamford	State CT	Zip Code 06902-4446	Date Received 05/15/2010	
--	------------------	-------------	------------------------	-----------------------------	--

Principal Occupation Director Business Systems	Name of Employer FitLinxx	Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>	Amount of Contribution \$75.00
---	------------------------------	--	--

Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input type="checkbox"/> Yes <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:	\$650.00
--	----------

Total of Section B Pages	\$25,265.00
---------------------------------	-------------

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00
--	-------------

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		FILING DUE DATE	
Jepsen 2010		7/12/2010	
A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>			Subtotal Section A
			\$0.00

B. Itemized Contributions from Individuals

Last	First	M.I.	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 #	Amount of Contribution
Loeb	Michael					
Residential Street Address		City	State	Zip Code	Date Received	
41 East 72nd Street		New York	NY	10022	05/15/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$375.00
President & CEO		Loeb Enterprises		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$375.00
Last	First	M.I.	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 #	Amount of Contribution
Wiederlight	Ronnie					
Residential Street Address		City	State	Zip Code	Date Received	
94 Berrian Road		Stamford	CT	06905	05/15/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00
Bus. Owner		The Insurance Exchange, Inc.		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	First	M.I.	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 #	Amount of Contribution
Argenio	Eileen					
Residential Street Address		City	State	Zip Code	Date Received	
76 Palmer Street		Springdale	CT	06907	05/17/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$25.00
Retired		None		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	First	M.I.	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 #	Amount of Contribution
Bayne	Carolyn					
Residential Street Address		City	State	Zip Code	Date Received	
5 Windsor Rd		Darien	CT	06820-3228	05/17/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$50.00
Stay at home mom		None		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$50.00

Subtotal Section B - This Page:		\$550.00
Total of Section B Pages		\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)		\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE: Jepsen 2010 FILING DUE DATE: 7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY
 (See instructions for definition of Small Contributor) Subtotal Section A \$0.00

B. Itemized Contributions from Individuals

Last Bayne		First David		M.I.	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 #	Amount of Contribution \$50.00
Residential Street Address 5 Windsor Road			City Darien	State CT	Zip Code 06820-3228	Date Received 05/17/2010		
Principal Occupation Attorney		Name of Employer Kavanaugh Maloney		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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"/> No		Aggregate contributions \$50.00			
Last Brookman		First Kevin		M.I.	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 #	Amount of Contribution \$25.00
Residential Street Address 120 Sigourney Street			City Hartford	State CT	Zip Code 06105	Date Received 05/17/2010		
Principal Occupation None		Name of Employer Self		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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"/> No		Aggregate contributions \$25.00			
Last Brown		First Marilyn		M.I.	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 #	Amount of Contribution \$50.00
Residential Street Address 43 Harbor Drive, #200			City Stamford	State CT	Zip Code 06902	Date Received 05/17/2010		
Principal Occupation Retired		Name of Employer None		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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"/> No		Aggregate contributions \$50.00			
Last Burns		First Kelly		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 962 South Main Street #5			City Plantsville	State CT	Zip Code 06479	Date Received 05/17/2010		
Principal Occupation Attorney		Name of Employer Anxinn, Veltrop & Harkrider		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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"/> No		Aggregate contributions \$100.00			

Subtotal Section B - This Page: \$225.00

Total of Section B Pages: \$25,265.00

TOTAL OF ALL CONTRIBUTIONS FROM INDIVUALS (Sections A & B) (Enter total on Line 14 of Summary page) \$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010
A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A \$0.00

B. Itemized Contributions from Individuals

Last	First	M.I.	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 #	Amount of Contribution
Cavaliero	Robert				
Residential Street Address		City	State	Zip Code	
92 Barmore Dr W		Stamford	CT	06905-2007	05/17/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Professor/Coach		Self		If yes, list Event # _____	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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	
				\$50.00	
Last	First	M.I.	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 #	Amount of Contribution
Darling	Alan				
Residential Street Address		City	State	Zip Code	
27 Cherryfield Drive		West Hartford	CT	06107-3363	05/17/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Instructor/Tutor		Capital Community College		If yes, list Event # _____	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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	
				\$40.00	
Last	First	M.I.	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 #	Amount of Contribution
DiNardo	Peter				
Residential Street Address		City	State	Zip Code	
1883 Fairfield Beach Road		Fairfield	CT	06824	05/17/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Partner		Peter DiNardo Enterprises		If yes, list Event # _____	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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	First	M.I.	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 #	Amount of Contribution
DiNardo	Salvatore				
Residential Street Address		City	State	Zip Code	
323 North Avenue		Bridgeport	CT	06606	05/17/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Partner		Peter DiNardo Enterprises		If yes, list Event # _____	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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	

Subtotal Section B - This Page:	\$590.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	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 #	Amount of Contribution
Eisenberg	Judith					
Residential Street Address		City	State	Zip Code	Date Received	
251 Penn Drive		West Hartford	CT	06119	05/17/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$100.00
Librarian		Town of West Hartford		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	First	M.I.	Method of contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card		Contribution ID #	Amount of Contribution
Fife	Lynne	C.				
Residential Street Address		City	State	Zip Code	Date Received	
102 Strawberry Hill Avenue, #3		Stamford	CT	06902	05/17/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$25.00
Real Estate		Self		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$25.00
Last	First	M.I.	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 #	Amount of Contribution
Fishman	Claire					
Residential Street Address		City	State	Zip Code	Date Received	
1 Clover Hill Drive		Stamford	CT	06902-1601	05/17/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$25.00
Retired		None		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	First	M.I.	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 #	Amount of Contribution
Fountain	James					
Residential Street Address		City	State	Zip Code	Date Received	
35 Oakdale Road		Stamford	CT	06906	05/17/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		\$100.00
Information Requested		Information Requested		If yes, list Event # 05/15/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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:	\$250.00
--	----------

Total of Section B Pages	\$25,265.00
---------------------------------	-------------

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00
--	-------------

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	--------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Friedman	Stanley		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		
Residential Street Address		City	State	Zip Code	Date Received	\$50.00
432 Rockrimmon Road		Stamford	CT	06903	05/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			\$50.00
Consultant	None		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list Event # 05/15/2010a	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		<input type="checkbox"/> Yes <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
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative						\$50.00

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Gallagher	Shaun		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		
Residential Street Address		City	State	Zip Code	Date Received	\$100.00
962 S Main St, Apt 5		Plantsville	CT	06479-1699	05/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			\$100.00
Project Manager	Hewlett Packard		<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 that has or is seeking a contract with the branch of state government that the candidate is seeking office?		<input type="checkbox"/> Yes <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
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative						\$100.00

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Gasparini	Joseph		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		
Residential Street Address		City	State	Zip Code	Date Received	\$75.00
20 Brinckerhoff Avenue		Stamford	CT	06905	05/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			\$75.00
Lawyer/Teacher	Self/Stamford Board of Education		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list Event # 05/15/2010a	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		<input type="checkbox"/> Yes <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
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative						\$75.00

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Greene	Gary		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		
Residential Street Address		City	State	Zip Code	Date Received	\$100.00
161 Holmes Avenue		Darien	CT	06820	05/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?			\$100.00
Attorney	Time, Inc.		<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 that has or is seeking a contract with the branch of state government that the candidate is seeking office?		<input type="checkbox"/> Yes <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
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative						\$100.00

Subtotal Section B - This Page:	\$325.00
--	----------

Total of Section B Pages	\$25,265.00
---------------------------------	-------------

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00
--	-------------

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Gross			<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		
Residential Street Address		City	State	Zip Code	Date Received	
Principal Occupation		Name of Employer	Is this contribution associated with a fundraising event listed in Section L1?			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?	Aggregate contributions			
	Abby	M.	<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit/Debit Card		\$100.00
34 Forge Road		Wilton	CT	06897	05/17/2010	
Part-Time Teacher		KEYS	If yes, list Event # 05/15/2010a		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No		\$100.00	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?				
	George		<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit/Debit Card		\$50.00
1912 Shippan Avenue		Stamford	CT	06902	05/17/2010	
Social Worker		State of Connecticut	If yes, list Event # 05/15/2010a		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No		\$50.00	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?				
	Mary		<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit/Debit Card		\$30.00
23 Skyline Lane		Stamford	CT	06903	05/17/2010	
Illustrator/Cartoonist		Comicana	If yes, list Event # 05/15/2010a		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No		\$30.00	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?				
	Renee		<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit/Debit Card		\$50.00
78 Webb's Hill Road		Stamford	CT	06903	05/17/2010	
Artist		None	If yes, list Event # 05/15/2010a		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No		\$50.00	
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?				

Subtotal Section B - This Page:	\$230.00
--	----------

Total of Section B Pages	\$25,265.00
---------------------------------	-------------

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00
--	-------------

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
			<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		
			<input type="checkbox"/> Money Order	<input type="checkbox"/> Credit/Debit Card		
Malloy	Daniel		CT	06902	05/17/2010	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
277 Ocean Drive East		Stamford	CT	06902	05/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Gubernatorial Candidate	Self		If yes, list Event # 05/15/2010a			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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
Malloy	Evon		CT	06902	05/17/2010	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
119 Ralsey Road		Stamford	CT	06902	05/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
RN	City of Stamford		If yes, list Event # 05/15/2010a			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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
Malloy	Johnnie		CT	06902	05/17/2010	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
55 Westcott Road		Stamford	CT	06902	05/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Non-Profit Management	Liberation Programs		If yes, list Event # 05/15/2010a			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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
Malloy	Shaun		CT	06902	05/17/2010	\$100.00
Residential Street Address		City	State	Zip Code	Date Received	
55 Westcott Road		Stamford	CT	06902	05/17/2010	
Principal Occupation	Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Mortgage Broker	Mortgage Master		If yes, list Event # 05/15/2010a			
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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:	\$400.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE: Jepsen 2010 FILING DUE DATE: 7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY
 (See instructions for definition of Small Contributor) Subtotal Section A \$0.00

B. Itemized Contributions from Individuals

Last Nakian		First Paul		M.I.	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 #	Amount of Contribution \$50.00
Residential Street Address 90 Campbell Drive			City Stamford		State CT	Zip Code 06903	Date Received 05/17/2010	
Principal Occupation Attorney		Name of Employer Self		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 05/15/2010a				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$50.00				
Last Nesin		First Merritt		M.I.	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 #	Amount of Contribution \$50.00
Residential Street Address 118 Gary Road			City Stamford		State CT	Zip Code 06903	Date Received 05/17/2010	
Principal Occupation None		Name of Employer None		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 05/15/2010a				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$50.00				
Last Nesin		First Roslyn		M.I.	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 #	Amount of Contribution \$50.00
Residential Street Address 118 Gary Road			City Stamford		State CT	Zip Code 06903	Date Received 05/17/2010	
Principal Occupation None		Name of Employer None		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 05/15/2010a				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$50.00				
Last Norum		First Roger		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 86 Ralsey Road			City Stamford		State CT	Zip Code 06902	Date Received 05/17/2010	
Principal Occupation Real Estate		Name of Employer Higgins Group		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 05/15/2010a				
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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: \$250.00

Total of Section B Pages: \$25,265.00

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page) \$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE **FILING DUE DATE**

Jepsen 2010 7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY
 (See instructions for definition of Small Contributor) **Subtotal Section A** \$0.00

B. Itemized Contributions from Individuals

Last Rubenstein	First Hannah	M.I.	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 #	Amount of Contribution \$100.00	
Residential Street Address 251 Penn Drive		City West Hartford	State CT	Zip Code 06119		Date Received 05/17/2010
Principal Occupation None		Name of Employer None		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Rubenstein	First William	M.I.	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 #	Amount of Contribution \$100.00	
Residential Street Address 251 Penn Drive		City West Hartford	State CT	Zip Code 06119		Date Received 05/17/2010
Principal Occupation Attorney		Name of Employer Anxinn, Veltrop & Harkrider		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Runde	First Robert	M.I.	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 #	Amount of Contribution \$100.00	
Residential Street Address 178 Idlewood Dr		City Stamford	State CT	Zip Code 06905-2409		Date Received 05/17/2010
Principal Occupation Financial Advisor		Name of Employer American Planning Group		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 Shumate	First Cynthia	M.I. P.	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 #	Amount of Contribution \$50.00	
Residential Street Address 166 Rowayton Woods Drive		City Norwalk	State CT	Zip Code 06854		Date Received 05/17/2010
Principal Occupation Travel Director		Name of Employer Estee Lauder Companies		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, list Event # 05/15/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$50.00		

Subtotal Section B - This Page: \$350.00

Total of Section B Pages: \$25,265.00

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page) \$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	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 #	Amount of Contribution
Stewart	Robert					
Residential Street Address		City	State	Zip Code	Date Received	
6 Ocean Rise Drive		Westerly	RI	02891	05/17/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		\$300.00
Policy Communications		Private Equity Council		If yes, list Event # _____		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$300.00
Last	First	M.I.	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 #	Amount of Contribution
Tepper	Jay					
Residential Street Address		City	State	Zip Code	Date Received	
38 Dads Lane		Stamford	CT	06903	05/17/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		\$50.00
Expert		Self		If yes, list Event # 05/15/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	\$50.00
Last	First	M.I.	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 #	Amount of Contribution
Tremblay	Brian					
Residential Street Address		City	State	Zip Code	Date Received	
17 Brightside Drive		Stamford	CT	06902	05/17/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		\$100.00
Finance		NBC Universal		If yes, list Event # 05/15/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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	First	M.I.	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 #	Amount of Contribution
Truglia	Anthony					
Residential Street Address		City	State	Zip Code	Date Received	
1494 Shippan Avenue		Stamford	CT	06902	05/17/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		\$100.00
Attorney		Self		If yes, list Event # 05/15/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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:	\$550.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010
A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	
Subtotal Section A	\$0.00

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:	Contribution ID #		
Truglia	Christel		<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card		Amount of Contribution \$100.00	
Residential Street Address		City	State	Zip Code		Date Received
7 Gypsy Moth Landing		Stamford	CT	06902-7725		05/17/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Retired		None		If yes, list Event # 05/15/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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		
Wade	Donald		<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card		Amount of Contribution \$100.00	
Residential Street Address		City	State	Zip Code		Date Received
15 Old Long Ridge Road		Stamford	CT	06903		05/17/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Writer/Editor		Self		If yes, list Event # 05/15/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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		
Walker	Brian		<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card		Amount of Contribution \$100.00	
Residential Street Address		City	State	Zip Code		Date Received
34 Forge Road		Wilton	CT	06897		05/17/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Cartoonist		None		If yes, list Event # 05/15/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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		
Warrick	William		<input type="checkbox"/> Cash <input checked="" type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card		Amount of Contribution \$50.00	
Residential Street Address		City	State	Zip Code		Date Received
242 Ocean Drive East		Stamford	CT	06902		05/17/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
None		None		If yes, list Event # 05/15/2010a		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 \$50.00		

Subtotal Section B - This Page:	\$350.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	
	\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last Weinstein	First Brian	M.I.	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 #	Amount of Contribution \$100.00	
Residential Street Address 180 River Rd		City Briarcliff Manor	State NY	Zip Code 10510-2414		Date Received 05/17/2010
Principal Occupation Lawyer		Name of Employer Davis Polk		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Last Zamore	First Denise	M.I.	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 #	Amount of Contribution \$75.00	
Residential Street Address 12 Nolan Cir		City Manchester	State CT	Zip Code 06042-1777		Date Received 05/17/2010
Principal Occupation Attorney		Name of Employer Axinn, Veltrop & Harkrider		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Last Coombs	First Jeffrey	M.I.	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 #	Amount of Contribution \$200.00	
Residential Street Address 39 Mitzi Road		City Stamford	State CT	Zip Code 06905		Date Received 05/18/2010
Principal Occupation CFO		Name of Employer Rainmaker Thinking, Inc.		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$200.00		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Last Cutter	First Christopher	M.I.	Method of contribution: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Personal Check <input type="checkbox"/> Money Order <input type="checkbox"/> Credit/Debit Card	Contribution ID #	Amount of Contribution \$20.00	
Residential Street Address 47 Fordyce Road		City New Milford	State CT	Zip Code 06776-3629		Date Received 05/18/2010
Principal Occupation Retired		Name of Employer None		Is this contribution associated with a fundraising event listed in Section L1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If yes, list Event #</i>		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office? <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 \$20.00		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				

Subtotal Section B - This Page:	\$395.00
--	----------

Total of Section B Pages	\$25,265.00
---------------------------------	-------------

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00
--	-------------

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE: Jepsen 2010 FILING DUE DATE: 7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY
 (See instructions for definition of Small Contributor) Subtotal Section A \$0.00

B. Itemized Contributions from Individuals

Last Friedman		First Melissa		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 77 Fox Glen Dr			City Stamford		State CT	Zip Code 06903-2200	Date Received 05/18/2010	
Principal Occupation Full time mom		Name of Employer Not available		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 Meehan		First Gavan		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 873 West Blvd, Apt. 414			City Hartford		State CT	Zip Code 06105	Date Received 05/18/2010	
Principal Occupation Attorney		Name of Employer COWDERY, ECKER & MURPHY, L.L.C.		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 Mital		First Manish		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 60 Fawn Ln			City New Canaan		State CT	Zip Code 06840-3301	Date Received 05/18/2010	
Principal Occupation General Counsel		Name of Employer Halcyon Asset Management LLC		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 Pakulis		First Bettye Jo		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 146 Virginia Ln			City Tolland		State CT	Zip Code 06084-4006	Date Received 05/18/2010	
Principal Occupation EA		Name of Employer State of CT		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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:		\$400.00
Total of Section B Pages		\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)		\$25,265.00

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last Ryan		First E Rose		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 390 Park Rd			City West Hartford		State CT	Zip Code 06119-1919	Date Received 05/18/2010	
Principal Occupation Communications Coordinator/House Dems		Name of Employer State of CT		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 Weinstein		First Elizabeth		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 180 River Rd			City Briarcliff Manor		State NY	Zip Code 10510-2414	Date Received 05/18/2010	
Principal Occupation n/a- homemaker		Name of Employer n/a- homemaker		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 Brown		First Edward		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 59 Milton Street			City West Hartford		State CT	Zip Code 06119	Date Received 05/19/2010	
Principal Occupation Mechanical Engineer		Name of Employer Quest Global Services		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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 Brown		First Jerome		M.I.	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 #	Amount of Contribution \$100.00
Residential Street Address 61 Milton Street			City West Hartford		State CT	Zip Code 06119	Date Received 05/19/2010	
Principal Occupation Retired		Name of Employer None		Is this contribution associated with a fundraising event listed in Section L1? <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 that has or is seeking a contract with the branch of state government that the candidate is seeking office? <input type="checkbox"/> Executive <input type="checkbox"/> Legislative		<input type="checkbox"/> Yes <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:	\$400.00
--	----------

Total of Section B Pages	\$25,265.00
---------------------------------	-------------

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00
--	-------------

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Fuller	David		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		
Residential Street Address			City	State	Zip Code	Date Received
3320 Main St			Stratford	CT	06614-4871	05/19/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?		\$35.00
Data Analyst		UNited Way of Central & Northeastern Connecticut		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions		\$35.00
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Gianquinto	Emily		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		
Residential Street Address			City	State	Zip Code	Date Received
316 White Street			Hartford	CT	06106	05/19/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?		\$100.00
Attorney		Reid & Riege, PC		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		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	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
McCarthy	M. J.		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		
Residential Street Address			City	State	Zip Code	Date Received
33 Midway Dr			Cromwell	CT	06416-2556	05/19/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?		\$50.00
Attorney		mcberc@yahoo.com		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions		\$50.00
<input type="checkbox"/> Executive <input type="checkbox"/> Legislative <input checked="" type="checkbox"/> No		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Seagull	Michelle		<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Personal Check		
Residential Street Address			City	State	Zip Code	Date Received
370 Thompson Street			South Glastonbury	CT	06073	05/19/2010
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L1?		\$100.00
Attorney		Axinn, Veltrop & Harkrider		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		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:	\$285.00
--	----------

Total of Section B Pages	\$25,265.00
---------------------------------	-------------

TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00
--	-------------

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

A. Total Contributions from Small Contributors - Received this Period ONLY <i>(See instructions for definition of Small Contributor)</i>	Subtotal Section A	\$0.00
--	---------------------------	--------

B. Itemized Contributions from Individuals

Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Sheinman	Laurence		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		
Residential Street Address			<input type="checkbox"/> Money Order	<input checked="" type="checkbox"/> Credit/Debit Card		
10 Woodway Ln		Wilton	State	Zip Code	Date Received	
Marketing		HomeESP.com	CT	06897-4730	05/19/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L.1?		
Marketing		HomeESP.com		<input type="checkbox"/> Yes		
				<input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		<input type="checkbox"/> Yes		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
<input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Executive		<input type="checkbox"/> Legislative				\$100.00
Last	First	M.I.	Method of contribution:		Contribution ID #	Amount of Contribution
Alschuler	John		<input type="checkbox"/> Cash	<input type="checkbox"/> Personal Check		
Residential Street Address			<input type="checkbox"/> Money Order	<input checked="" type="checkbox"/> Credit/Debit Card		
99 Hudson St		New York	State	Zip Code	Date Received	
Consultant		HR&A Advisors	NY	10013-2815	05/20/2010	
Principal Occupation		Name of Employer		Is this contribution associated with a fundraising event listed in Section L.1?		
Consultant		HR&A Advisors		<input type="checkbox"/> Yes		
				<input checked="" type="checkbox"/> No		
Is contributor a principal of a state contractor or prospective state contractor that has or is seeking a contract with the branch of state government that the candidate is seeking office?		<input type="checkbox"/> Yes		Is contributor a lobbyist, spouse, or dependent child of a lobbyist?		Aggregate contributions
<input checked="" type="checkbox"/> No		<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Executive		<input type="checkbox"/> Legislative				\$100.00

Subtotal Section B - This Page:	\$200.00
Total of Section B Pages	\$25,265.00
TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Enter total on Line 14 of Summary page)	\$25,265.00

I. MONETARY RECEIPTS (Sections A-1)

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

C2. Reimbursements or Payments from other Committees

Name of Committee Jepsen 2010 Candidate Committee			Name of Treasurer	
Address P.O. Box 230161		Date Received 06/14/2010		Amount of Receipt
City Hartford	State CT	Zip Code 06123	<input checked="" type="checkbox"/> Reimbursement for shared expense <input type="checkbox"/> Payment for goods and services	\$5,447.29

Subtotal Section C2 - This Page:	\$5,447.29
Total of Section C2 Pages	\$5,447.29
TOTAL OF ALL COMMITTEE CONTRIBUTIONS AND RECEIPTS (Enter total on Line 15 of Summary page)	\$5,447.29

I. MONETARY RECEIPTS (Sections A-I)

NAME OF COMMITTEE		FILING DUE DATE	
Jepsen 2010		7/12/2010	

I. Miscellaneous Monetary Receipts not Considered Contributions

Name	Date of Transaction			Amount Received
SVM, LP	04/16/2010			\$1,041.95
Street Address	City	State	Zip Code	
200 East Howard Avenue, Suite 220	Des Plaines	IL	60018	
Description				
Return of Funds				
Name	Date of Transaction			Amount Received
Premiere Political Communications	05/13/2010			\$245.76
Street Address	City	State	Zip Code	
4616 Fessenden Street NW	Washington	DC	20016	
Description				
<i>Refund - bill paid twice</i>				

Total Section I

\$1,287.71

I. MONETARY RECEIPTS (Sections A-I)

Page 1 of 1

NAME OF COMMITTEE		FILING DUE DATE
Jepsen 2010		7/12/2010
Summary of Other Monetary Receipts (Sections D-I)		
Total Loans Received this Period (Section D)		\$0.00
Total Amount of Personal Funds of the Candidate Received this Period (Section E)	+	\$0.00
Total Amount of Anonymous Contributions (Section F)	+	\$0.00
Total Amount of Interest from Deposits in Authorized Accounts (Section G)	+	\$0.00
Total Public Grant Funds Received from the Citizens' Election Fund (Section H)	+	\$0.00
Total Miscellaneous Monetary Receipts not Considered Contributions (Section I)	+	\$1,287.71

Total of Other Monetary Receipts not Considered Contributions (Enter total on Line 16 of Summary page)	\$1,287.71
--	------------

II. FUNDRAISING EVENT ACTIVITY

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

J1. Fundraiser Event Information

Fundraising Event # Date of Fundraiser	Letter	Description	Location: Street Address	City	State	Zip Code
04/05/2010	a	Cocktail Event	Roma Restaurant 382 Allen Street	New Britain	CT	06051

Was this Fundraising event hosted at a personal residence? Yes (*If yes, go to Section J3 In-Kind Donations not Considered Contributions and complete required information for purchases*) No made by host(s) for food, beverage and invitations.)

Did this fundraiser include items donated by a business entity of up to \$100 or items donated by an individual of up to \$50? Yes (*If yes, go to Section J3 In-Kind Donations not Considered Contributions and complete required information.*) No

Was this fundraiser a tag sale, auction, or other sale of donated items? Yes J2(*If yes, go to Section J2 Proceeds from Tag Sale, Auction, or Other Sale of Donated Items.*) No

Fundraising Event # Date of Fundraiser	Letter	Description	Location: Street Address	City	State	Zip Code
04/07/2010	a	Home Fundraiser	Hurwit Residence 1076 Prospect Aven	Hartford	CT	06105

Was this Fundraising event hosted at a personal residence? Yes (*If yes, go to Section J3 In-Kind Donations not Considered Contributions and complete required information for purchases*) No made by host(s) for food, beverage and invitations.)

Did this fundraiser include items donated by a business entity of up to \$100 or items donated by an individual of up to \$50? Yes (*If yes, go to Section J3 In-Kind Donations not Considered Contributions and complete required information.*) No

Was this fundraiser a tag sale, auction, or other sale of donated items? Yes J2(*If yes, go to Section J2 Proceeds from Tag Sale, Auction, or Other Sale of Donated Items.*) No

Fundraising Event # Date of Fundraiser	Letter	Description	Location: Street Address	City	State	Zip Code
05/08/2010	a	Home Fundraiser	Tuli Twigg Home 53 Mountain View Dr	West Hartford	CT	06117

Was this Fundraising event hosted at a personal residence? Yes (*If yes, go to Section J3 In-Kind Donations not Considered Contributions and complete required information for purchases*) No made by host(s) for food, beverage and invitations.)

Did this fundraiser include items donated by a business entity of up to \$100 or items donated by an individual of up to \$50? Yes (*If yes, go to Section J3 In-Kind Donations not Considered Contributions and complete required information.*) No

Was this fundraiser a tag sale, auction, or other sale of donated items? Yes J2(*If yes, go to Section J2 Proceeds from Tag Sale, Auction, or Other Sale of Donated Items.*) No

Fundraising Event # Date of Fundraiser	Letter	Description	Location: Street Address	City	State	Zip Code
05/15/2010	a	Home Fundraiser	The Jepsen Residence 252 Ocean Driv	Stamford	CT	06902

Was this Fundraising event hosted at a personal residence? Yes (*If yes, go to Section J3 In-Kind Donations not Considered Contributions and complete required information for purchases*) No made by host(s) for food, beverage and invitations.)

Did this fundraiser include items donated by a business entity of up to \$100 or items donated by an individual of up to \$50? Yes (*If yes, go to Section J3 In-Kind Donations not Considered Contributions and complete required information.*) No

Was this fundraiser a tag sale, auction, or other sale of donated items? Yes J2(*If yes, go to Section J2 Proceeds from Tag Sale, Auction, or Other Sale of Donated Items.*) No

II. FUNDRAISING EVENT ACTIVITY

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

J3. In-Kind Donations Not Considered Contributions

Name of Donor Tulikangas, Paul				Donation given by: <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$100.00
Street Address 53 Mountain View Dr	City West Hartford	State CT	Zip Code 06117-3028	Aggregate value for this event \$300.00	
Description of Donation			Date Received 05/08/2010	Event # 05/08/2010a	
Name of Donor Twigg, Michele				Donation given by: <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$200.00
Street Address 53 Mountain View Dr	City West Hartford	State CT	Zip Code 06117-3028	Aggregate value for this event \$300.00	
Description of Donation			Date Received 05/08/2010	Event # 05/08/2010a	
Name of Donor Jepsen, Charles				Donation given by: <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$200.00
Street Address 252 Ocean Drive East	City Stamford	State CT	Zip Code 06902	Aggregate value for this event \$350.00	
Description of Donation			Date Received 05/15/2010	Event # 05/15/2010a	
Name of Donor Jepsen, Claudia				Donation given by: <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Business Entity	Fair Market Value of Donation \$150.00
Street Address 252 Ocean Drive East	City Stamford	State CT	Zip Code 06902	Aggregate value for this event \$350.00	
Description of Donation			Date Received 05/15/2010	Event # 05/15/2010a	

SUBTOTAL Section J3 - This Page \$650.00

Total of Section J3 Pages \$650.00

TOTAL OF ALL IN_KIND DONATIONS NOT CONSIDERED CONTRIBUTIONS (Enter total on Line 22 of Summary page) \$650.00

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Paychex, Inc.	04/01/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$1,419.39
Street Address: 55 Capitol Blvd, Suite 302 City: Rocky Hill, State: CT, Zip Code: 06067	Purpose of Expenditure (by code): WAGE	Event #	
Description: Wages			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Paychex, Inc.	04/02/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$1,356.02
Street Address: 55 Capitol Blvd, Suite 302 City: Rocky Hill, State: CT, Zip Code: 06067	Purpose of Expenditure (by code): WAGE	Event #	
Description: Payroll Taxes			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Merchant Card Processing	04/05/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$131.80
Street Address: P.O. Box 407066 City: Fort Lauderdale, State: FL, Zip Code: 33340	Purpose of Expenditure (by code): MISC	Event #	
Description: Merchant Bnkcd Discount (Online Contribution Processing)			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Merchant Card Processing	04/05/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$14.88
Street Address: P.O. Box 407066 City: Fort Lauderdale, State: FL, Zip Code: 33340	Purpose of Expenditure (by code): MISC	Event #	
Description: Merchant Bnkcd Interchng (Online Contribution Processing)			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			

Subtotal Section N - This Page:	\$2,922.09
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jeppen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Merchant Card Processing	04/05/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$11.30
Street Address: P.O. Box 407066 City: Fort Lauderdale, State: FL, Zip Code: 33340	Purpose of Expenditure (by code): MISC	Event #	
Description: Merchant Bnkcd Fee (Online Contribution Processing)			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
TrueServe, LLC	04/05/2010	<input checked="" type="checkbox"/> Check # 112 <input type="checkbox"/> Debit Card	\$1,040.49
Street Address: 31 Pratt Street City: Hartford, State: CT, Zip Code: 06103	Purpose of Expenditure (by code): CNSLT	Event #	
Description: Consulting Fee + Reimbursement			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Zeman, Mary	04/05/2010	<input checked="" type="checkbox"/> Check # 111 <input type="checkbox"/> Debit Card	\$225.00
Street Address: 43 Iroquois Rd City: West Hartford, State: CT, Zip Code: 06117-2112	Purpose of Expenditure (by code): FOOD	Event #	
Description: Reimbursement for Catering for Fundraiser			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Total Graphic Solutions	04/08/2010	<input checked="" type="checkbox"/> Check # 144 <input type="checkbox"/> Debit Card	\$4,261.20
Street Address: 111 Brookside Road City: New Britain, State: CT, Zip Code: 06052	Purpose of Expenditure (by code): PRNT	Event #	
Description: Printing			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			

Subtotal Section N - This Page:	\$5,537.99
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount	
Verizon Wireless	04/08/2010	<input checked="" type="checkbox"/> Check # 113	\$96.63	
Street Address P.O. Box 4003	City Acworth	State GA		Zip Code 30101
Purpose of Expenditure (by code) WAGE				<input type="checkbox"/> Debit Card
Description Staff Cell Phone Bill (PS)				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				
2Dog Media	04/10/2010	<input checked="" type="checkbox"/> Check # 114	\$1,011.90	
Street Address 260 France Street	City Rocky Hill	State CT		Zip Code 06067
Purpose of Expenditure (by code) website design				<input type="checkbox"/> Debit Card
Description website design				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				
Community Politics, LLC	04/10/2010	<input checked="" type="checkbox"/> Check # 117	\$750.00	
Street Address 31 Pratt Street, 3rd Floor	City Hartford	State CT		Zip Code 06103
Purpose of Expenditure (by code) OVHD				<input type="checkbox"/> Debit Card
Description Rent				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				
Jepsen, George	04/10/2010	<input checked="" type="checkbox"/> Check # 118	\$3,020.00	
Street Address 31 Barnum Place	City Ridgefield	State CT		Zip Code 06877
Purpose of Expenditure (by code) OVHD				<input type="checkbox"/> Debit Card
Description Reimbursement for NGP Software				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				

Subtotal Section N - This Page:	\$4,878.53
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Jepsen, George	04/10/2010	<input checked="" type="checkbox"/> Check # 116 <input type="checkbox"/> Debit Card	\$300.00
Street Address: 31 Barnum Place City: Ridgefield State: CT Zip Code: 06877	Purpose of Expenditure (by code): OVHD		
Description: Reimbursement for Graphic Design by NGP Software		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
National Center for Constitutional Studies (NCCS)	04/10/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$450.00
Street Address: 37777 W Juniper Road City: Malta State: ID Zip Code: 83342	Purpose of Expenditure (by code): MISC		
Description: Pocket Constitutions		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Arch Street Tavern	04/12/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$101.29
Street Address: 85 Arch Street City: Hartford State: CT Zip Code: 06103	Purpose of Expenditure (by code): FOOD		
Description: JJB After Party		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Arch Street Tavern	04/12/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$214.14
Street Address: 85 Arch Street City: Hartford State: CT Zip Code: 06103	Purpose of Expenditure (by code): FOOD		
Description: JJB After Party		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			

Subtotal Section N - This Page:	\$1,065.43
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE					FILING DUE DATE	
Jepsen 2010					7/12/2010	
N. Expenses Paid by Committee						
Name of Payee Paychex, Inc.				Date of Payment 04/12/2010	Method of Payment	
Street Address 55 Capitol Blvd, Suite 302		City Rocky Hill	State CT	Zip Code 06067	Purpose of Expenditure (by code) MISC	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card
Description Paychex Fee					Event #	
\$163.01						
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No						
Other Candidate(s) Name				Office Sought		
Name of Payee Arch Street Tavern				Date of Payment 04/13/2010	Method of Payment	
Street Address 85 Arch Street		City Hartford	State CT	Zip Code 06103	Purpose of Expenditure (by code) FOOD	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card
Description Young Dems Meet & Greet					Event #	
\$248.00						
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No						
Other Candidate(s) Name				Office Sought		
Name of Payee Kennelly, John B.				Date of Payment 04/14/2010	Method of Payment	
Street Address 95 Scarborough Street		City Hartford	State CT	Zip Code 06105-1106	Purpose of Expenditure (by code) REF	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card
Description Check Returned					Event #	
\$100.00						
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No						
Other Candidate(s) Name				Office Sought		
Name of Payee TD Bank				Date of Payment 04/14/2010	Method of Payment	
Street Address		City	State	Zip Code	Purpose of Expenditure (by code) BNK	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card
Description Returned Check Fee					Event #	
\$15.00						
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No						
Other Candidate(s) Name				Office Sought		

Subtotal Section N - This Page:	\$526.01
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount								
Paychex, Inc.	04/15/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$2,539.71								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:10%;">City</td> <td style="width:10%;">State</td> <td style="width:10%;">Zip Code</td> <td style="width:35%;">Purpose of Expenditure (by code)</td> </tr> <tr> <td>55 Capitol Blvd, Suite 302</td> <td>Rocky Hill</td> <td>CT</td> <td>06067</td> <td>WAGE</td> </tr> </table>	Street Address			City	State	Zip Code	Purpose of Expenditure (by code)	55 Capitol Blvd, Suite 302	Rocky Hill	CT	06067
Street Address	City	State		Zip Code	Purpose of Expenditure (by code)						
55 Capitol Blvd, Suite 302	Rocky Hill	CT		06067	WAGE						
Description Wages		Event #									
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No											
Paychex, Inc.	04/15/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$1,419.39								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:10%;">City</td> <td style="width:10%;">State</td> <td style="width:10%;">Zip Code</td> <td style="width:35%;">Purpose of Expenditure (by code)</td> </tr> <tr> <td>55 Capitol Blvd, Suite 302</td> <td>Rocky Hill</td> <td>CT</td> <td>06067</td> <td>WAGE</td> </tr> </table>	Street Address			City	State	Zip Code	Purpose of Expenditure (by code)	55 Capitol Blvd, Suite 302	Rocky Hill	CT	06067
Street Address	City	State		Zip Code	Purpose of Expenditure (by code)						
55 Capitol Blvd, Suite 302	Rocky Hill	CT		06067	WAGE						
Description Wages		Event #									
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No											
Paychex, Inc.	04/15/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$636.30								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:10%;">City</td> <td style="width:10%;">State</td> <td style="width:10%;">Zip Code</td> <td style="width:35%;">Purpose of Expenditure (by code)</td> </tr> <tr> <td>55 Capitol Blvd, Suite 302</td> <td>Rocky Hill</td> <td>CT</td> <td>06067</td> <td>WAGE</td> </tr> </table>	Street Address			City	State	Zip Code	Purpose of Expenditure (by code)	55 Capitol Blvd, Suite 302	Rocky Hill	CT	06067
Street Address	City	State		Zip Code	Purpose of Expenditure (by code)						
55 Capitol Blvd, Suite 302	Rocky Hill	CT		06067	WAGE						
Description Payroll Taxes		Event #									
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No											
Paychex, Inc.	04/15/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$929.28								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:10%;">City</td> <td style="width:10%;">State</td> <td style="width:10%;">Zip Code</td> <td style="width:35%;">Purpose of Expenditure (by code)</td> </tr> <tr> <td>55 Capitol Blvd, Suite 302</td> <td>Rocky Hill</td> <td>CT</td> <td>06067</td> <td>WAGE</td> </tr> </table>	Street Address			City	State	Zip Code	Purpose of Expenditure (by code)	55 Capitol Blvd, Suite 302	Rocky Hill	CT	06067
Street Address	City	State		Zip Code	Purpose of Expenditure (by code)						
55 Capitol Blvd, Suite 302	Rocky Hill	CT		06067	WAGE						
Description Payroll Taxes		Event #									
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No											

Subtotal Section N - This Page:	\$5,524.68
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount	
SVM, LP	04/15/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$1,041.95	
Street Address 200 East Howard Avenue, Suite 220	City Des Plaines	State IL		Zip Code 60018
Purpose of Expenditure (by code) WAGE				
Description Gas Cards				
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				
Other Candidate(s) Name _____ Office Sought _____				
Total Graphic Solutions	04/15/2010	<input checked="" type="checkbox"/> Check # 119 <input type="checkbox"/> Debit Card	\$7,942.58	
Street Address 111 Brookside Road	City New Britain	State CT		Zip Code 06052
Purpose of Expenditure (by code) PRNT				
Description Signs, shirts, letterhead, envelopes, stickers				
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				
Other Candidate(s) Name _____ Office Sought _____				
TrueServe, LLC	04/16/2010	<input checked="" type="checkbox"/> Check # 120 <input type="checkbox"/> Debit Card	\$889.19	
Street Address 31 Pratt Street	City Hartford	State CT		Zip Code 06103
Purpose of Expenditure (by code) CNSLT				
Description Consulting Fee + Reimbursement				
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				
Other Candidate(s) Name _____ Office Sought _____				
US Post Office	04/16/2010	<input checked="" type="checkbox"/> Check # 121 <input type="checkbox"/> Debit Card	\$272.00	
Street Address 135 CHESTNUT ST	City New Britain	State CT		Zip Code 06050
Purpose of Expenditure (by code) POST				
Description Postage				
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				
Other Candidate(s) Name _____ Office Sought _____				

Subtotal Section N - This Page:	\$10,145.72
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount
SVM, LP	04/19/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$1,041.95
Street Address 200 East Howard Avenue, Suite 220 City: Des Plaines, State: IL, Zip Code: 60018	Purpose of Expenditure (by code) MISC		
Description Gas Cards (charged twice by credit card, see Apr 12)		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Total Graphic Solutions	04/20/2010	<input checked="" type="checkbox"/> Check # 124 <input type="checkbox"/> Debit Card	\$795.00
Street Address 111 Brookside Road City: New Britain, State: CT, Zip Code: 06052	Purpose of Expenditure (by code) PRNT		
Description Printing		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
US Post Office	04/20/2010	<input checked="" type="checkbox"/> Check # 123 <input type="checkbox"/> Debit Card	\$196.00
Street Address State House Square City: Hartford, State: CT, Zip Code: 06103	Purpose of Expenditure (by code) POST		
Description Postage		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Premiere Political Communications	04/21/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$245.76
Street Address 4616 Fessenden Street NW City: Washington, State: DC, Zip Code: 20016	Purpose of Expenditure (by code) MISC		
Description Robocall		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			

Subtotal Section N - This Page:	\$2,278.71
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Premiere Political Communications	04/23/2010	<input checked="" type="checkbox"/> Check # 126	\$245.76
Street Address: 4616 Fessenden Street NW City: Washington State: DC Zip Code: 20016	Purpose of Expenditure (by code): MISC	<input type="checkbox"/> Debit Card	
Description: Robocall (also charged by credit card on 4/21)		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
TrueServe, LLC	04/23/2010	<input checked="" type="checkbox"/> Check # 125	\$498.99
Street Address: 31 Pratt Street City: Hartford State: CT Zip Code: 06103	Purpose of Expenditure (by code): CNSLT	<input type="checkbox"/> Debit Card	
Description: Consulting Fee (less \$1.01 over-reimbursed in check 120)		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Sherwood, Philip	04/28/2010	<input checked="" type="checkbox"/> Check # 127	\$1,500.00
Street Address: 420 Commonwealth Ave City: New Britain State: CT Zip Code: 06053	Purpose of Expenditure (by code): CNSLT	<input type="checkbox"/> Debit Card	
Description: Consulting Fee		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Paychex, Inc.	04/29/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$2,265.96
Street Address: 55 Capitol Blvd, Suite 302 City: Rocky Hill State: CT Zip Code: 06067	Purpose of Expenditure (by code): WAGE		
Description: Wages		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			

Subtotal Section N - This Page:	\$4,510.71
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE					FILING DUE DATE	
Jepsen 2010					7/12/2010	
N. Expenses Paid by Committee						
Name of Payee Best Buy			Date of Payment 04/30/2010		Method of Payment	
Street Address 1501 New Britain Avenue			City West Hartford	State CT	Zip Code 06110	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card
Description Office Equipment			Purpose of Expenditure (by code) EFV		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			Other Candidate(s) Name		Office Sought	
\$1,232.70						
Name of Payee NGP Software			Date of Payment 04/30/2010		Method of Payment	
Street Address 1225 Eye Street NW, Suite 1225			City Washington	State DC	Zip Code 20005	<input checked="" type="checkbox"/> Check # 129 <input type="checkbox"/> Debit Card
Description NGP Software			Purpose of Expenditure (by code) MISC		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			Other Candidate(s) Name		Office Sought	
\$1,260.00						
Name of Payee Paychex, Inc.			Date of Payment 04/30/2010		Method of Payment	
Street Address 55 Capitol Blvd, Suite 302			City Rocky Hill	State CT	Zip Code 06067	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card
Description Payroll Taxes			Purpose of Expenditure (by code) WAGE		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			Other Candidate(s) Name		Office Sought	
\$942.98						
Name of Payee Prospect Ventures, LLC			Date of Payment 04/30/2010		Method of Payment	
Street Address 33 Girard Avenue			City Hartford	State CT	Zip Code 06105	<input checked="" type="checkbox"/> Check # 128 <input type="checkbox"/> Debit Card
Description Security Deposit & May's Rent			Purpose of Expenditure (by code) OVHD		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			Other Candidate(s) Name		Office Sought	
\$3,600.00						

Subtotal Section N - This Page:	\$7,035.68
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount									
Merchant Card Processing	05/03/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$269.68									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State</td> <td style="width:10%;">Zip Code</td> <td style="width:40%;">Purpose of Expenditure (by code)</td> </tr> <tr> <td>P.O. Box 407066</td> <td>Fort Lauderdale</td> <td>FL</td> <td>33340</td> <td>MISC</td> </tr> </table>	Street Address			City	State	Zip Code	Purpose of Expenditure (by code)	P.O. Box 407066	Fort Lauderdale	FL	33340	MISC
Street Address	City	State		Zip Code	Purpose of Expenditure (by code)							
P.O. Box 407066	Fort Lauderdale	FL		33340	MISC							
Description Merchant Bnkcd Interchg (Online Contribution Processing)												
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No												
Merchant Card Processing	05/03/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$61.50									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State</td> <td style="width:10%;">Zip Code</td> <td style="width:40%;">Purpose of Expenditure (by code)</td> </tr> <tr> <td>P.O. Box 407066</td> <td>Fort Lauderdale</td> <td>FL</td> <td>33340</td> <td>MISC</td> </tr> </table>	Street Address			City	State	Zip Code	Purpose of Expenditure (by code)	P.O. Box 407066	Fort Lauderdale	FL	33340	MISC
Street Address	City	State		Zip Code	Purpose of Expenditure (by code)							
P.O. Box 407066	Fort Lauderdale	FL		33340	MISC							
Description Merchant Bnkcd Discount (Online Contribution Processing)												
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No												
Merchant Card Processing	05/03/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$8.60									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State</td> <td style="width:10%;">Zip Code</td> <td style="width:40%;">Purpose of Expenditure (by code)</td> </tr> <tr> <td>P.O. Box 407066</td> <td>Fort Lauderdale</td> <td>FL</td> <td>33340</td> <td>MISC</td> </tr> </table>	Street Address			City	State	Zip Code	Purpose of Expenditure (by code)	P.O. Box 407066	Fort Lauderdale	FL	33340	MISC
Street Address	City	State		Zip Code	Purpose of Expenditure (by code)							
P.O. Box 407066	Fort Lauderdale	FL		33340	MISC							
Description Merchant Bnkcd Fee (Online Contribution Processing)												
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No												
Total Graphic Solutions	05/03/2010	<input checked="" type="checkbox"/> Check # 129 <input type="checkbox"/> Debit Card	\$2,477.43									
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Street Address</td> <td style="width:15%;">City</td> <td style="width:10%;">State</td> <td style="width:10%;">Zip Code</td> <td style="width:40%;">Purpose of Expenditure (by code)</td> </tr> <tr> <td>111 Brookside Road</td> <td>New Britain</td> <td>CT</td> <td>06052</td> <td>PRNT</td> </tr> </table>	Street Address			City	State	Zip Code	Purpose of Expenditure (by code)	111 Brookside Road	New Britain	CT	06052	PRNT
Street Address	City	State		Zip Code	Purpose of Expenditure (by code)							
111 Brookside Road	New Britain	CT		06052	PRNT							
Description Printing												
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No												

Subtotal Section N - This Page:	\$2,817.21
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Family Communications	05/04/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$207.76
Street Address: 3327 Drayton Manor Run City: Lawrenceville State: GA Zip Code: 30046	Purpose of Expenditure (by code): EFV	Event #	
Description: Office Equipment			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
US Post Office	05/06/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$132.00
Street Address: 433 WOODLAND ST City: Hartford State: CT Zip Code: 06112	Purpose of Expenditure (by code): POST	Event #	
Description: Postage			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
TrueServe, LLC	05/07/2010	<input checked="" type="checkbox"/> Check # 130 <input type="checkbox"/> Debit Card	\$1,000.00
Street Address: 31 Pratt Street City: Hartford State: CT Zip Code: 06103	Purpose of Expenditure (by code): CNSLT	Event #	
Description: Consulting Services			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Verizon Wireless	05/07/2010	<input checked="" type="checkbox"/> Check # 131 <input type="checkbox"/> Debit Card	\$217.42
Street Address: P.O. Box 4003 City: Acworth State: GA Zip Code: 30101	Purpose of Expenditure (by code): WAGE	Event #	
Description: Staff Cell Phone Bill (PS)			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			

Subtotal Section N - This Page:	\$1,557.18
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE					FILING DUE DATE	
Jepsen 2010					7/12/2010	
N. Expenses Paid by Committee						
Name of Payee Paychex, Inc.				Date of Payment 05/10/2010	Method of Payment	
Street Address		City	State	Zip Code	Purpose of Expenditure (by code)	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card
55 Capitol Blvd, Suite 302		Rocky Hill	CT	06067	MISC	
Description Paychex Fee					Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No					Other Candidate(s) Name _____ Office Sought _____	
Amount						
\$197.48						
Name of Payee Fedex Kinko's				Date of Payment 05/11/2010	Method of Payment	
Street Address		City	State	Zip Code	Purpose of Expenditure (by code)	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card
544 Farmington Ave		Hartford	CT	06105	PRNT	
Description Printing					Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No					Other Candidate(s) Name _____ Office Sought _____	
Amount						
\$148.93						
Name of Payee Paychex, Inc.				Date of Payment 05/13/2010	Method of Payment	
Street Address		City	State	Zip Code	Purpose of Expenditure (by code)	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card
55 Capitol Blvd, Suite 302		Rocky Hill	CT	06067	WAGE	
Description Wages					Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No					Other Candidate(s) Name _____ Office Sought _____	
Amount						
\$2,265.96						
Name of Payee Paychex, Inc.				Date of Payment 05/14/2010	Method of Payment	
Street Address		City	State	Zip Code	Purpose of Expenditure (by code)	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card
55 Capitol Blvd, Suite 302		Rocky Hill	CT	06067	WAGE	
Description Payroll Taxes					Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No					Other Candidate(s) Name _____ Office Sought _____	
Amount						
\$931.29						

Subtotal Section N - This Page:		\$3,543.66
Total of Section N Pages		\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)		\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount
Pond House Cafe	05/14/2010	<input checked="" type="checkbox"/> Check # <u>132</u>	\$313.23
Street Address: 1555 Asylum Avenue City: West Hartford State: CT Zip Code: 06117	Purpose of Expenditure (by code): FOOD	<input type="checkbox"/> Debit Card	
Description: [Blank]		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
TrueServe, LLC	05/14/2010	<input checked="" type="checkbox"/> Check # <u>133</u>	\$533.91
Street Address: 31 Pratt Street City: Hartford State: CT Zip Code: 06103	Purpose of Expenditure (by code): CNSLT	<input type="checkbox"/> Debit Card	
Description: Consulting Services (Bank account reads as Check #999999999) + Reimbursement		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
2Dog Media	05/17/2010	<input checked="" type="checkbox"/> Check # <u>134</u>	\$250.00
Street Address: 260 France Street City: Rocky Hill State: CT Zip Code: 06067	Purpose of Expenditure (by code): WEB	<input type="checkbox"/> Debit Card	
Description: Website		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Kindall, Clare	05/17/2010	<input checked="" type="checkbox"/> Check # <u>136</u>	\$353.96
Street Address: 46 Bishop Rd City: West Hartford State: CT Zip Code: 06119-1535	Purpose of Expenditure (by code): OFFICE	<input type="checkbox"/> Debit Card	
Description: Reimbursement for Office Supplies & Postage		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			

Subtotal Section N - This Page:	\$1,451.10
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount
NGP Software	05/17/2010	<input checked="" type="checkbox"/> Check # 137 <input type="checkbox"/> Debit Card	\$1,260.00
Street Address: 1225 Eye Street NW, Suite 1225 City: Washington State: DC Zip Code: 20005	Purpose of Expenditure (by code): MISC	Event #	
Description: NGP Software			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Prospect Ventures, LLC	05/17/2010	<input checked="" type="checkbox"/> Check # 142 <input type="checkbox"/> Debit Card	\$22.24
Street Address: 33 Girard Avenue City: Hartford State: CT Zip Code: 06105	Purpose of Expenditure (by code): OVHD	Event #	
Description: Reimbursement for Electric Utility Bill			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Sherwood, Philip	05/17/2010	<input checked="" type="checkbox"/> Check # 135 <input type="checkbox"/> Debit Card	\$93.25
Street Address: 420 Commonwealth Ave City: New Britain State: CT Zip Code: 06053	Purpose of Expenditure (by code): OFFICE	Event #	
Description: Reimbursement for Office Supplies			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Page, Thompson	05/18/2010	<input checked="" type="checkbox"/> Check # 140 <input type="checkbox"/> Debit Card	\$293.22
Street Address: 226 Kenyon Street City: Hartford State: CT Zip Code: 06105-2240	Purpose of Expenditure (by code): FOOD	Event #	
Description: Reimbursement for Food and Beverages			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			

Subtotal Section N - This Page:	\$1,668.71
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

N. Expenses Paid by Committee

Name of Payee	Date of Payment	Method of Payment	Amount
US Post Office	05/18/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$84.00
Street Address: 12 Crossroads Plaza City: West Hartford State: CT Zip Code: 06117	Purpose of Expenditure (by code): POST	Event #	
Description: Postage			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Kindall, Clare	05/19/2010	<input checked="" type="checkbox"/> Check # 141 <input type="checkbox"/> Debit Card	\$56.00
Street Address: 46 Bishop Rd City: West Hartford State: CT Zip Code: 06119-1535	Purpose of Expenditure (by code): POST	Event #	
Description: Reimbursement for Stamps			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Prospect Ventures, LLC	05/19/2010	<input checked="" type="checkbox"/> Check # 143 <input type="checkbox"/> Debit Card	\$55.99
Street Address: 33 Girard Avenue City: Hartford State: CT Zip Code: 06105	Purpose of Expenditure (by code): OVHD	Event #	
Description: Reimbursement for Gas Utility Bill			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
TrueServe, LLC	05/19/2010	<input checked="" type="checkbox"/> Check # 139 <input type="checkbox"/> Debit Card	\$1,199.53
Street Address: 31 Pratt Street City: Hartford State: CT Zip Code: 06103	Purpose of Expenditure (by code): CNSLT	Event #	
Description: Consulting Fee + Reimbursement			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			

Subtotal Section N - This Page:	\$1,395.52
Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)	\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE					FILING DUE DATE	
Jepsen 2010					7/12/2010	
N. Expenses Paid by Committee						
Name of Payee Sherwood, Philip				Date of Payment 05/20/2010	Method of Payment	
Street Address 420 Commonwealth Ave		City New Britain	State CT	Zip Code 06053	Purpose of Expenditure (by code) CNSLT	<input checked="" type="checkbox"/> Check # 138 <input type="checkbox"/> Debit Card
Description Consulting Fee					Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No					Other Candidate(s) Name Office Sought	
Amount						
\$2,000.00						
Name of Payee Comcast				Date of Payment 06/14/2010	Method of Payment	
Street Address P.O. Box 1577		City Newark	State NJ	Zip Code 07101	Purpose of Expenditure (by code) OVHD	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card
Description Installation of services + May bill					Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No					Other Candidate(s) Name Office Sought	
Amount						
\$385.13						

	Subtotal Section N - This Page:	\$2,385.13
	Total of Section N Pages	\$59,244.06
TOTAL OF ALL EXPENSES PAID BY COMMITTEE (Enter total on Line 20 of Summary page)		\$59,244.06

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

R. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant	Date of Payment	Method of Payment	Amount	
Paychex, Inc.	04/01/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$1,419.39	
Secondary Payee Clemency, Kevin	Purpose of Expenditure (by code) WAGE			
Street Address 231 Dogwood Ln	City Manhasset	State NY		Zip Code 11030-1642
Description Wages				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name _____ Office Sought _____
TrueServe, LLC	04/01/2010	<input checked="" type="checkbox"/> Check # 112 <input type="checkbox"/> Debit Card	\$3.16	
Secondary Payee Fedex Kinko's	Purpose of Expenditure (by code) PRNT			
Street Address 196 Trumbull Street	City Hartford	State CT		Zip Code 06103
Description Paper Cutting				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name _____ Office Sought _____
TrueServe, LLC	04/05/2010	<input checked="" type="checkbox"/> Check # 120 <input type="checkbox"/> Debit Card	\$140.00	
Secondary Payee Roma Restaurant	Purpose of Expenditure (by code) FNDR			
Street Address 382 Allen Street	City New Britain	State CT		Zip Code 06053
Description Catering for Fundraiser				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name _____ Office Sought _____

Subtotal Section R- This Page:	\$1,562.55
Total of Section R Pages	\$15,029.81
TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE WORKERS AND CONSULTANTS	\$15,029.81

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

R. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant	Date of Payment	Method of Payment	Amount
TrueServe, LLC	04/05/2010	<input checked="" type="checkbox"/> Check # 112	\$28.00
Secondary Payee United States Postal Service	Purpose of Expenditure (by code) POST	<input type="checkbox"/> Debit Card	
Street Address www.usps.com	City	State	
Description Postage		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Jepsen, George	04/10/2010	<input checked="" type="checkbox"/> Check # 118	\$3,020.00
Secondary Payee NGP Software	Purpose of Expenditure (by code) MISC	<input type="checkbox"/> Debit Card	
Street Address 1225 Eye Street NW, Suite 1225	City Washington	State DC	
Description		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Jepsen, George	04/10/2010	<input checked="" type="checkbox"/> Check # 116	\$300.00
Secondary Payee NGP Software	Purpose of Expenditure (by code) MISC	<input type="checkbox"/> Debit Card	
Street Address 1225 Eye Street NW, Suite 1225	City Washington	State DC	
Description		Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			

Subtotal Section R- This Page:	\$3,348.00
Total of Section R Pages	\$15,029.81
TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE WORKERS AND CONSULTANTS	\$15,029.81

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

R. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant	Date of Payment	Method of Payment	Amount
TrueServe, LLC	04/12/2010	<input checked="" type="checkbox"/> Check # 120	\$3.16
Secondary Payee Fedex Kinko's	Purpose of Expenditure (by code) MISC	<input type="checkbox"/> Debit Card	
Street Address 196 Trumbull Street	City Hartford	State CT	
Description Paper Cutting		Zip Code 06103	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
TrueServe, LLC	04/12/2010	<input checked="" type="checkbox"/> Check # 120	\$10.59
Secondary Payee Fedex Kinko's	Purpose of Expenditure (by code) OFFICE	<input type="checkbox"/> Debit Card	
Street Address 196 Trumbull Street	City Hartford	State CT	
Description Office Supplies		Zip Code 06103	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Paychex, Inc.	04/15/2010	<input type="checkbox"/> Check # _____	\$1,419.39
Secondary Payee Clemency, Kevin	Purpose of Expenditure (by code) WAGE	<input checked="" type="checkbox"/> Debit Card	
Street Address 231 Dogwood Ln	City Manhasset	State NY	
Description Wages		Zip Code 11030-1642	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			

Subtotal Section R- This Page:	\$1,433.14
Total of Section R Pages	\$15,029.81
TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE WORKERS AND CONSULTANTS	\$15,029.81

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

R. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant	Date of Payment	Method of Payment	Amount	
Paychex, Inc.	04/15/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$2,539.71	
Secondary Payee Shortell, Patrick	Purpose of Expenditure (by code) WAGE			
Street Address 17 Foxcroft Road	City West Hartford	State CT		Zip Code 06119
Description Wages				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name _____ Office Sought _____
TrueServe, LLC	04/16/2010	<input checked="" type="checkbox"/> Check # 120 <input type="checkbox"/> Debit Card	\$134.62	
Secondary Payee	Purpose of Expenditure (by code) OFFICE			
Street Address P.O. Box 111	City Brockton	State MA		Zip Code 02303
Description Office Supplies				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name _____ Office Sought _____
TrueServe, LLC	04/30/2010	<input checked="" type="checkbox"/> Check # 133 <input type="checkbox"/> Debit Card	\$33.91	
Secondary Payee	Purpose of Expenditure (by code) OFFICE			
Street Address P.O. Box 111	City Brockton	State MA		Zip Code 02303
Description Office Supplies				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name _____ Office Sought _____

Subtotal Section R- This Page:	\$2,708.24
Total of Section R Pages	\$15,029.81
TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE WORKERS AND CONSULTANTS	\$15,029.81

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

R. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant	Date of Payment	Method of Payment	Amount	
Paychex, Inc.	04/30/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$1,419.39	
Secondary Payee Clemency, Kevin	Purpose of Expenditure (by code) WAGE			
Street Address 231 Dogwood Ln	City Manhasset	State NY		Zip Code 11030-1642
Description Wages				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name _____ Office Sought _____
Paychex, Inc.	04/30/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$846.57	
Secondary Payee Shortell, Patrick	Purpose of Expenditure (by code) WAGE			
Street Address 17 Foxcroft Road	City West Hartford	State CT		Zip Code 06119
Description Wages				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name _____ Office Sought _____
Kindall, Clare	04/30/2010	<input checked="" type="checkbox"/> Check # 136 <input type="checkbox"/> Debit Card	\$28.00	
Secondary Payee US Post Office	Purpose of Expenditure (by code) POST			
Street Address 102 LaSalle Road	City West Hartford	State CT		Zip Code 06107
Description Postage				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name _____ Office Sought _____

Subtotal Section R- This Page:	\$2,293.96
Total of Section R Pages	\$15,029.81
TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE WORKERS AND CONSULTANTS	\$15,029.81

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

R. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant	Date of Payment	Method of Payment	Amount	
Kindall, Clare	05/06/2010	<input checked="" type="checkbox"/> Check # <u>136</u> <input type="checkbox"/> Debit Card	\$105.96	
Secondary Payee Walmart	Purpose of Expenditure (by code) OFFICE			
Street Address 495 Flatbush Ave	City Hartford	State CT		Zip Code 06106
Description Office Supplies				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name Office Sought
Sherwood, Philip	05/07/2010	<input checked="" type="checkbox"/> Check # <u>135</u> <input type="checkbox"/> Debit Card	\$93.25	
Secondary Payee Office Depot	Purpose of Expenditure (by code) OFFICE			
Street Address 1451 New Britain Avenue	City West Hartford	State CT		Zip Code 06110
Description Office Supplies				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name Office Sought
Kindall, Clare	05/07/2010	<input checked="" type="checkbox"/> Check # <u>136</u> <input type="checkbox"/> Debit Card	\$220.00	
Secondary Payee US Post Office	Purpose of Expenditure (by code) POST			
Street Address 12 Crossroads Plaza	City West Hartford	State CT		Zip Code 06117
Description Postage				Event #
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No				Other Candidate(s) Name Office Sought

Subtotal Section R- This Page:	\$419.21
Total of Section R Pages	\$15,029.81
TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE WORKERS AND CONSULTANTS	\$15,029.81

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

R. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant	Date of Payment	Method of Payment	Amount
TrueServe, LLC	05/11/2010	<input checked="" type="checkbox"/> Check # 139	\$46.60
Secondary Payee Office Depot	Purpose of Expenditure (by code) OFFICE	<input type="checkbox"/> Debit Card	
Street Address 1451 New Britain Avenue	City West Hartford	State CT	
Zip Code 06110		Event #	
Description Office Supplies			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Other Candidate(s) Name Office Sought			
Kindall, Clare	05/13/2010	<input checked="" type="checkbox"/> Check # 141	\$56.00
Secondary Payee US Post Office	Purpose of Expenditure (by code) POST	<input type="checkbox"/> Debit Card	
Street Address 12 Crossroads Plaza	City West Hartford	State CT	
Zip Code 06117		Event #	
Description Postage			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Other Candidate(s) Name Office Sought			
Paychex, Inc.	05/14/2010	<input type="checkbox"/> Check # _____	\$1,419.39
Secondary Payee Clemency, Kevin	Purpose of Expenditure (by code) WAGE	<input checked="" type="checkbox"/> Debit Card	
Street Address 231 Dogwood Ln	City Manhasset	State NY	
Zip Code 11030-1642		Event #	
Description Wages			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Other Candidate(s) Name Office Sought			

Subtotal Section R- This Page:	\$1,521.99
Total of Section R Pages	\$15,029.81
TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE WORKERS AND CONSULTANTS	\$15,029.81

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

R. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant	Date of Payment	Method of Payment	Amount
Paychex, Inc.	05/14/2010	<input type="checkbox"/> Check # _____ <input checked="" type="checkbox"/> Debit Card	\$846.57
Secondary Payee Shortell, Patrick	Purpose of Expenditure (by code) WAGE		
Street Address 17 Foxcroft Road	City West Hartford	State CT	
Zip Code 06119		Event #	
Description Wages			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Other Candidate(s) Name _____ Office Sought _____			
Page, Thompson	05/18/2010	<input checked="" type="checkbox"/> Check # 140 <input type="checkbox"/> Debit Card	\$195.48
Secondary Payee BJ's	Purpose of Expenditure (by code) FOOD		
Street Address 507 New Park Avenue	City West Hartford	State CT	
Zip Code 06110		Event #	
Description Food and Beverages			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Other Candidate(s) Name _____ Office Sought _____			
Page, Thompson	05/18/2010	<input checked="" type="checkbox"/> Check # 140 <input type="checkbox"/> Debit Card	\$53.00
Secondary Payee Subway	Purpose of Expenditure (by code) FOOD		
Street Address 1022 Boulevard	City West Hartford	State CT	
Zip Code 06119		Event #	
Description Food			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Other Candidate(s) Name _____ Office Sought _____			

Subtotal Section R- This Page:	\$1,095.05
Total of Section R Pages	\$15,029.81
TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE WORKERS AND CONSULTANTS	\$15,029.81

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

R. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant	Date of Payment	Method of Payment	Amount
Page, Thompson	05/18/2010	<input checked="" type="checkbox"/> Check # 140	\$44.74
Secondary Payee Welcome Package Store	Purpose of Expenditure (by code) FOOD	<input type="checkbox"/> Debit Card	
Street Address 1032 Capitol Avenue	City Hartford	State CT	
Zip Code 06106		Event #	
Description Beverages			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Other Candidate(s) Name Office Sought			
Homicki, Anthony	05/19/2010	<input type="checkbox"/> Check # _____	\$450.00
Secondary Payee Lucky Lou's Bar & Grill	Purpose of Expenditure (by code) FNDR	<input checked="" type="checkbox"/> Debit Card	
Street Address 222 Main Street	City Wethersfield	State CT	
Zip Code 06109		Event #	
Description Bill for Fundraiser			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Other Candidate(s) Name Office Sought			
TrueServe, LLC	05/20/2010	<input checked="" type="checkbox"/> Check # 139	\$11.95
Secondary Payee Fedex Kinko's	Purpose of Expenditure (by code) OFFICE	<input type="checkbox"/> Debit Card	
Street Address 544 Farmington Ave	City Hartford	State CT	
Zip Code 06105		Event #	
Description Office Supplies			
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			
Other Candidate(s) Name Office Sought			

Subtotal Section R- This Page:	\$506.69
Total of Section R Pages	\$15,029.81
TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE WORKERS AND CONSULTANTS	\$15,029.81

IV. EXPENDITURES

NAME OF COMMITTEE	FILING DUE DATE
Jepsen 2010	7/12/2010

R. Itemization of Reimbursements to Committee Workers and Consultants

Name of Worker/Consultant	Date of Payment	Method of Payment	Amount	
TrueServe, LLC	06/19/2010	<input checked="" type="checkbox"/> Check # 139		\$140.98
Secondary Payee	Purpose of Expenditure (by code) OFFICE	<input type="checkbox"/> Debit Card		
Street Address P.O. Box 111	City Brockton	State MA	Zip Code 02303	
Description Office Supplies			Event #	
Is this expenditure coordinated with another candidate for which reimbursement is sought? <input type="checkbox"/> Yes <i>If yes, complete candidate name and office sought</i> <input checked="" type="checkbox"/> No			Other Candidate(s) Name Office Sought	

Subtotal Section R- This Page:	\$140.98
Total of Section R Pages	\$15,029.81
TOTAL OF ALL REIMBURSEMENTS TO COMMITTEE WORKERS AND CONSULTANTS	\$15,029.81