## **SEEC FORM 30**

Itemized Campaign Finance Disclosure Statement
Candidates for Statewide Offices and General Assembly
CONNECTICUT STATE ELECTIONS ENFORCEMENT COMMISSION
Rev. 1/08



Electronic Filing

Page 1 of 347

## **SUMMARY PAGE**

1.NAME OF COMMITTEE							2. TYPI	E OF COMMITTEE		
Jepsen 2010							. =	Candidate Committee Exploratory Committee		
3. TREASURER NAME							•			
Title	First <b>Kathleen</b>			MI J	Last <b>Kowalyshyn</b>			Suffix		
4. TREASURER ADDRESS										
Street Address  28 Forster St			City <b>Hartfo</b>	ord		State CT		Cip Code 0 <b>6106</b>		
5. ELECTION DATE			6. O	FFICE SOUG		7. DISTRI	CT CODE (if applicable)			
11/02/2010		Attorney General								
8. CANDIDATE NAME						•				
Title	First <b>George</b>			мі <b>с.</b>	Last Jepsen			Suffix		
9. TYPE OF REPORT										
Itemized Statement accompanying application for Public Grant - Amendment										
10. PERIOD COVERED										
		Beginning Date			Ending Date					
		05/10/2010	thru	1	07/11/2010					
			11 CER	TIFICATION						
on this <b>Itemiz</b>	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.									
Electronic Filing SIGNATURE		<b>Kathleen Kowalys</b> PRINT NAME OF THE		ER	·	5/2010 CERTIFIED				
	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. 1/08

## **SUMMARY PAGE TOTALS**

NAME OF COMMITTEE	FILING DUE DATE						
Jepsen 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	\$0.00						
14. Contributions received from Individuals (Section A and B)	\$76,871.00	\$76,871.00					
15. Receipts from Other Committees (Sections C1 + C2)	\$7,550.00	\$7,550.00					
16. Other Monetary Receipts (Section D-I)	\$100.00	\$100.00					
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)	\$84,521.00	\$84,521.00					
19. Subtotals (add totals in line 13 + line 18 in Column A and in lines 12 + 18 in Column B)	\$84,521.00	\$84,521.00					
20. Expenses Paid by Committee (Section N)	\$49,278.93	\$49,278.93					
21. Balance on hand at close of Reporting Period (Subtract line 20 from line 19)	\$35,242.07	\$35,242.07					
22. In-Kind Donations not Considered Contributions Received (Section J3)	\$3,750.00	\$3,750.00					
23. In-Kind Contributions Received (Section K)	\$0.00	\$0.00					
24. Refundable Deposit to Telephone Company (Section L)	\$0.00	\$0.00					
25. Receipts of Organization Expenditures (Section M)	\$313.19	\$313.19					
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)	\$315.86	\$315.86					
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 (Section A-I)									
NAME OF COMMITTEE						1	FILING	DUE DATE	
Jepsen 2010									
A. Total Contributions from Small	Contributors-Received th	is Period (	ONLY	,		<u>'</u>			
(See instructions for definition of Small Contributor)			Subt	total Section A	\$0.00				
	B. Itemized Contribution	ons from Ir	ndividu	als					
Last Name First Name		MI N	_	contribution:		Contribution	ID#	Amount of	
Blum Irving			Cash Money	Order X Personal Credit/De	Check ebit Card	0136		Contribution	
Residential Street Address	City	s	State	Zip Code	D	ate Received			
54 W North St Apt 416	Stamford	C	СТ	06902	0	5/18/2010			
Principal Occupation	Name of Employer			Is this contribution associated fundraising event listed			Yes		
Retired	None			If yes, list Event #	iii section s	<b>x</b> 1	No		
Is contributor a principal of a state contractor or prospective	Yes X No	Is contributor	r a lobbyist	, spouse, or	Aggre	gate Contributio	ons		
state contractor? Is yes, indicate which branch or branches of government the contract is with:	Executive Legislative	dependent chi		•		\$2	25.00	\$25.00	
Last Name First Name		MI N	_	contribution:		Contribution	ID#	Amount of	
Coombs Joseph F.			Cash Money	Order Resonal Credit/De	Check ebit Card	0138		Contribution	
Residential Street Address	City	s	State	Zip Code	D	ate Received			
8 Cedar St	Wethersfield	C	СТ	06109-1406	0	5/19/2010			
Principal Occupation	Name of Employer	·		Is this contribution assoc		டி	Yes		
Retired	None			fundraising event listed if yes, list Event # 05		11,	No		
Is contributor a principal of a state contractor or prospective	Yes X No	Is contributor	-	-	Aggre	gate Contributio	ons		
state contractor? Is yes, indicate which branch or branches of government the contract is with:	Executive Legislative	dependent chi		-		\$50	50.00	\$50.00	
Last Name First Name		MI N	Method of c	contribution:		Contribution	ID#	Amount of	
Zagaja Matthew			Cash Money	Personal Order Credit/De	Check ebit Card	0140		Contribution	
Residential Street Address	City	s	State	Zip Code	D	ate Received			
12 Cornish Rd	Wethersfield	C	СТ	06109-1415	0	5/19/2010			
Principal Occupation	Name of Employer			Is this contribution associated in fundraising event listed in		டி	Yes		
Student	UCONN Law School				5192010	11,	No		
Is contributor a principal of a state contractor or prospective	Yes X No	Is contributor	-	-	Aggre	gate Contributio	ons		
state contractor? Is yes, indicate which branch or branches of government the contract is with:	Executive Legislative	dependent chi		-		\$10	.0.00	\$10.00	
Last Name First Name		MI N		contribution:		Contribution	ID#	Amount of	
Adil Andrew			Cash Money	V Personal Credit/De	Check ebit Card	0148		Contribution	
Residential Street Address	City	S	State	Zip Code	D	ate Received			
944 Ridge Rd	Wethersfield	C	СТ	06109	0	5/19/2010			
Principal Occupation	Name of Employer			Is this contribution association fundraising event listed		டி	Yes		
Investment Advisor	CM Smith			If yes, list Event # 05		11.	No		
Is contributor a principal of a state contractor or prospective	Yes X No	Is contributor	-	-	Aggre	gate Contributio	ons		
state contractor?  Is yes, indicate which branch or branches of government the contract is with:	Executive Legislative	dependent chi		-		\$50	50.00	\$50.00	

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Rodriguez	First Name Raul		MI	Cash	contribution:    X   Personal C	heck 0151	ution ID#	Amount of Contribution
Residential Street Address 175 Beverly Rd		City Wethersfield		State CT	Zip Code 06109	Date Receiv 05/19/20		
Principal Occupation Attorney		Name of Employer Attorney General's Office			Is this contribution associa fundraising event listed in If yes, list Event # 051		X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	\$100.00	\$100.00
Last Name Grady	First Name Susan		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 0139	ution ID#	Amount of Contribution
Residential Street Address 25 Westlook Rd		City Wethersfield		State CT	Zip Code 06109	Date Receiv 05/19/20		
Principal Occupation Name of Employer Retired None					Is this contribution associa fundraising event listed in If yes, list Event # 051	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	sparage sparag	\$20.00
Last Name Mclean	First Name Gloria		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0143	ution ID#	Amount of Contribution
Residential Street Address 38 Midwell Rd		City Wethersfield		State CT	Zip Code 06109	Date Receiv		
Principal Occupation Teacher		Name of Employer Retired			Is this contribution associa fundraising event listed in If yes, list Event # 051	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	\$25.00	\$25.00
Last Name Roberts	First Name Geraldine		MI	Cash	contribution:  X Personal City Order Credit/Deb	heck 0146	ution ID#	Amount of Contribution
Residential Street Address 64 Old Post Rd		City Wethersfield		State CT	Zip Code 06109	Date Receiv 05/19/20		
Principal Occupation Attorney		Name of Employer Retired			Is this contribution associa fundraising event listed in If yes, list Event # 051	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	sparage sparag	\$25.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	G DUE DATE	
Jepsen 2010									
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Klett	First Name Maureen		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 014	ibution ID #	Amount of Contribution	
Residential Street Address 104 Harold Dr		City Newington		State CT	Zip Code 06111-4220	Date Rece 05/19/2			
Principal Occupation Supervising Nurse Consultant		Name of Employer State of Connecticut			Is this contribution associal fundraising event listed in If yes, list Event # 051		X Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cor	\$100.00	\$100.00	
Last Name Shields	First Name Thomas		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0150	ibution ID #	Amount of Contribution	
Residential Street Address 56 Wilson Ave		City Newington		State CT	Zip Code 06111	Date Rece 05/19/2			
Principal Occupation Name of Employer Senate Clerks Office State of Connecticut					Is this contribution associa fundraising event listed in If yes, list Event # 051	Section J1?	X Yes		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cor	stributions \$35.00	\$35.00	
Last Name Forrest	First Name Matthew		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 014	ibution ID#	Amount of Contribution	
Residential Street Address 25 Spring St		City Wethersfield		State CT	Zip Code 06109-3422	Date Rece 05/19/2			
Principal Occupation Attorney		Name of Employer Forrest Law		•	Is this contribution associa fundraising event listed in If yes, list Event # 051	Section J1?	X Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cor	\$25.00	\$25.00	
Last Name Brown	First Name Thomas		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 013	ibution ID #	Amount of Contribution	
Residential Street Address 9 Ellsworth Rd		City West Hartford		State CT	Zip Code 06107	Date Rece 05/19/2			
Principal Occupation Physician		Name of Employer Hospital Central CT		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cor	stributions \$50.00	\$50.00	

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE					FILING	G DUE DATE		
Jepsen 2010								
	B. Itemized Contribut	ions from Individu	ıals					
Last Name First Nam	ne	· · · · · · · · · · · · · · · · · · ·	contribution:	Contributi	on ID#	Amount of		
LeBel Lawrer	ce	X Cash	Personal Cl y Order Credit/Debi	0144		Contribution		
2 1 110 111		<u> </u>		- I				
Residential Street Address 40 Woodsedge Dr	City Newington	State CT	Zip Code 06111	Date Received 05/19/201				
	<del>-</del>	"	Is this contribution associa	<u></u>		1		
Principal Occupation Assistant Assessor	Name of Employer Town of Manchester		fundraising event listed in	Section J1?	Yes			
, issistant , issessor			If yes, list Event # 051	<u>92010a</u> L	No			
Is contributor a principal of a state contractor or prospect	ive Yes X No	Is contributor a lobbyis	-	Aggregate Contrib	utions			
state contractor? Is yes, indicate which branch or branches of	Executive Legislative	dependent child of a lob	•		\$5.00	\$5.00		
government the contract is with:		1 1		<u> </u>				
Last Name First Nam Homicki Charles	•	MI Method of Cash	contribution:	Contributi	on ID#	Amount of Contribution		
Tromer	,		y Order Credit/Debi	0145		Contribution		
Residential Street Address	City	State	Zip Code	Date Received	ļ			
111 Filley Rd	Haddam	СТ	06438	05/19/201	0			
Principal Occupation	Name of Employer		Is this contribution associa	1.7	Yes			
Insurance Self fundraising event listed in Section J1?  If yes, list Event # 05192010a No								
Is contributor a principal of a state contractor or prospect	ive Yes X No	Is contributor a lobbyis	t spouse or	At- Ct-il-				
state contractor?	Yes Mino	dependent child of a lob	-	Aggregate Contrib	100.00	\$100.00		
Is yes, indicate which branch or branches of government the contract is with:	Executive Legislative	Yes X	No	Ψ.		<b>4100.00</b>		
Last Name First Nam	ne	MI Method of	contribution:	Contributi	on ID#	Amount of		
McKenna Michae		Cash Money	y Order X Personal Cl Credit/Debi	0149		Contribution		
Residential Street Address	City	State	Zip Code	Date Received				
100 Grist Mill Rd	Wethersfield	СТ	06109-3649	05/19/201	0			
Principal Occupation	Name of Employer		Is this contribution associa	ted with a	Yes			
Assistant Attorney General	State of Connecticut		fundraising event listed in If yes, list Event # 051	I	No			
Is contributor a principal of a state contractor or prospect	ive Yes X No	Is contributor a lobbyis	t spouse or	Aggregate Contrib	utions			
state contractor? Is yes, indicate which branch or branches of	Tes Ino	dependent child of a lob	byist?		100.00	\$100.00		
government the contract is with:	Executive Legislative	Yes X	No					
Last Name First Nam	ne	MI Method of	contribution:	Contributi	on ID#	Amount of		
Oblak Darlen	2	Cash Money	y Order X Personal Cl Credit/Deb	0141		Contribution		
Residential Street Address	City	State	Zip Code	Date Received				
60 Farms Village Rd	Wethersfield	СТ	06109-1422	05/19/201	0			
Principal Occupation	Name of Employer	•	Is this contribution associa	1.7	Yes			
Retired	None		fundraising event listed in If yes, list Event # 051	I .	No			
Leadily to a principal of						-		
Is contributor a principal of a state contractor or prospect state contractor?	Yes X No	Is contributor a lobbyis dependent child of a lob	-	Aggregate Contrib	utions \$75.00	\$75.00		
Is yes, indicate which branch or branches of government the contract is with:	Executive Legislative	Yes X	No	· 	φ/J.00	\$73.00		

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE								FILING	G DUE DATE
Jepsen 2010									
		B. Itemized Contribut	ions fron	Individu	ıals				
Last Name Ciotto	First Name Biagio		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution	n ID#	Amount of Contribution
Residential Street Address 68 Harris Hill Rd		City Wethersfield		State CT	Zip Code 06109-3337	- 1	te Received 5/20/2010	l	
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 051			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contribut	50.00	\$50.00
Last Name Olsen	First Name Amy		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution	n ID#	Amount of Contribution
Residential Street Address 4 Putnam HI Apt 4K		City Greenwich		State CT	Zip Code 06830-5715	- 1	te Received 5/20/2010	l	
Principal Occupation Accountant	l				Is this contribution associa fundraising event listed in If yes, list Event #		ı? <u></u>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	gate Contribut	tions 50.00	\$50.00
Last Name Paulmeno	First Name Stephanie	2	MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution	n ID#	Amount of Contribution
Residential Street Address 9 Rockland Pl		City Old Greenwich		State CT	Zip Code 06870-1508		ite Received 5/20/2010	ı	
Principal Occupation Community Health Planner		Name of Employer Sterling Care, LLC			Is this contribution associa fundraising event listed in If yes, list Event #		1? L	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob 'es X	byist?	Aggreg	gate Contribut \$1	tions 00.00	\$100.00
Last Name Ecker	First Name Steven		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution	n ID#	Amount of Contribution
Residential Street Address 225 Lawrence St		City New Haven		State CT	Zip Code 06511		ite Received 5/20/2010	ı	
Principal Occupation Attorney		Name of Employer COWDERY, ECKER & MURPH	Y, L.L.C.		Is this contribution associa fundraising event listed in If yes, list Event # 052	Section J1		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribut \$1	tions 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE								FILING	G DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ons from	ı Individu	ıals		•		
Last Name Tamm	First Name Samarpar	na	MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contributio	on ID#	Amount of Contribution
Residential Street Address 5 Chinmoy Ave		City Greenwich		State CT	Zip Code 06830-6809		te Received 5/20/2010	)	
Principal Occupation Librarian		Name of Employer Darian Library			Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	gate Contribu \$1	tions .00.00	\$100.00
Last Name Krevolin	First Name Andrew		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contributio	on ID #	Amount of Contribution
Residential Street Address 53 Ferncliff Dr		City West Hartford		State CT	Zip Code 06117		nte Received 5/20/2010	)	
Principal Occupation Name of Employer Attorney Krevolin & Roth					Is this contribution associa fundraising event listed in If yes, list Event # 052		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggreg	gate Contribu	tions .00.00	\$100.00
Last Name Krumeich	First Name Elizabeth		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contributio	on ID#	Amount of Contribution
Residential Street Address 16 Perryridge Rd		City Greenwich		State CT	Zip Code 06830-4608		nte Received	)	
Principal Occupation Attorney		Name of Employer GlobeOp Financial Services			Is this contribution associa fundraising event listed in If yes, list Event #		12	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	gate Contribu \$1	tions .00.00	\$100.00
Last Name Vecchiolla	First Name Sharon		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contributio	on ID #	Amount of Contribution
Residential Street Address 193 Byram Rd		City Greenwich		State CT	Zip Code 06830		nte Received 5/20/2010	)	
Principal Occupation  Democratic Registrar of Voters		Name of Employer Town of Greenwich		•	Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggreg	gate Contribu	tions 325.00	\$25.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemized Con	tribution	s from	Individu	ıals				
Last Name Klett	First Name Joseph		N	MI	Method of o	contribution:  X Personal  Order Credit/De	Check ebit Card	Contributi 0161	on ID#	Amount of Contribution
Residential Street Address 44 Stoddard Ave		City Newington	•		State CT	Zip Code 06111		Date Received		
Principal Occupation State Marshal		Name of Employer Retired				Is this contribution assoc fundraising event listed If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X	d		ntor a lobbyist child of a lob es	byist?	Aggre	egate Contribi	utions 100.00	\$100.00
Last Name Adil	First Name Spencer		N	MI	x Cash	contribution: Personal Order Credit/Do	Check ebit Card	Contributi 0152	on ID#	Amount of Contribution
Residential Street Address 944 Ridge Rd		City Wethersfield			State CT	Zip Code 06109		Date Received		
Principal Occupation Name of Employer Student None						Is this contribution association fundraising event listed in If yes, list Event # 05	in Section .	<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X	ď		ntor a lobbyist child of a lob es	byist?	Aggre	egate Contrib	utions \$5.00	\$5.00
Last Name Malec	First Name Janis		N	MI	Cash	contribution:  X Personal  Order Credit/De	Check ebit Card	Contributi 0153	on ID#	Amount of Contribution
Residential Street Address 84 Liberty HI E		City Wethersfield			State CT	Zip Code 06109		Date Received		
Principal Occupation Attorney		Name of Employer  Law Offices of Eugen	e DeFronzo	0		Is this contribution associated fundraising event listed if yes, list Event # 05	in Section .	<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive Legislativ	d		ntor a lobbyist child of a lob es	byist?	Aggre	egate Contrib	utions \$20.00	\$20.00
Last Name Knecht	First Name Philip		N	MI	Cash	contribution:  X Personal  Order Credit/Do	Check ebit Card	Contributi	on ID#	Amount of Contribution
Residential Street Address 100 Executive Sq Apt 1208		City Wethersfield			State CT	Zip Code 06109		Date Received		
Principal Occupation Sales		Name of Employer Self				Is this contribution association fundraising event listed in If yes, list Event # 05	in Section .	<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X	ď		ntor a lobbyist child of a lob es	byist?	Aggre	egate Contrib	utions \$25.00	\$25.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE										FILING	G DUE DATE
Jepsen 2010											
		B. It	emized Contributi	ions from	ı Individu	ıals					
Last Name	First Name			MI	Method of	contribution:			Contribution	on ID #	Amount of
Louden	Bruce				Cash Money	y Order	Personal Che Credit/Debit		0163		Contribution
Residential Street Address	-	City			State	Zip Code		Da	ate Received		
37 Gin Still Ln		West Har	tford		СТ	06107		0	5/20/2010	)	
Principal Occupation		Name of Er	nployer			Is this contribu fundraising eve			1^	Yes	
Lawyer		Louden I	egal Group			If yes, list Ever		02010		No	
Is contributor a principal of a state contractor	or prospective	-	Yes X No		utor a lobbyis			Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	I '─	child of a lob	,			\$1	100.00	\$100.00
government the contract is with:	First Name	Executive	Legislative		1	contribution:			1		<u> </u>
Last Name Cooney	David			MI	Cash		Personal Che	eck	Contribution	on ID #	Amount of Contribution
,					Mone	y Order	Credit/Debit	t Card	0165		
Residential Street Address		City			State	Zip Code			ate Received		
27 Carnoustie Cir		Bloomfiel	d		СТ	06002		0.	5/21/2010	)	
Principal Occupation		Name of Er				Is this contribution fundraising even			1^	Yes	
Trial Lawyer		RisCassi	& Davis			If yes, list Ever				No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or		Aggre	gate Contribu	ıtions	
state contractor? Is yes, indicate which branch or branches of					child of a lob	-			\$1	100.00	\$100.00
government the contract is with:	<u> </u>	Executive	Legislative	+-	res X	No			1		<u> </u>
Last Name Wade	First Name James			MI	Method of Cash	contribution:	Personal Che	eck	Contribution	on ID #	Amount of Contribution
wade	James					y Order	Credit/Debit		0181		Contribution
Residential Street Address		City			State	Zip Code		Da	ate Received		
280 Trumbull St		Hartford			СТ	06103		0.	5/21/2010	)	
Principal Occupation		Name of Er	nployer			Is this contribu			1^	Yes	
Attorney		Robinsor	n & Cole			fundraising eve If yes, list Ever				No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t spouse or		Aggra	gate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of	_		_ iesino		child of a lob	byist?		Aggre	-	100.00	\$100.00
government the contract is with:		Executive	Legislative	L	res X	No					
Last Name	First Name			MI		contribution:			Contribution	on ID #	Amount of
Fish	William				Cash Money	y Order	Personal Che Credit/Debit		0171		Contribution
Residential Street Address		City			State	Zip Code		Da	ate Received		
45 Cheyenne Ct		Marlboro	ugh		СТ	06447		0.	5/21/2010	)	
Principal Occupation		Name of Er				Is this contribution fundraising even			1^	Yes	
Attorney		Hinckley	Allen			If yes, list Ever				No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	t, spouse, or		Aggra	gate Contribu	ntions	†
state contractor?  Is yes, indicate which branch or branches of				dependent	child of a lob	byist?		, 1881C	_	100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative	L 1	res X	No					<u> </u>

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	G DUE DATE	
Jepsen 2010									
		B. Itemized Contribut	ions fron	Individu	ıals				
Last Name Eddy	First Name		MI	Method of Cash	contribution:	heck	tion ID#	Amount of Contribution	
Ludy	i dui	1			Order Credit/Deb	0174		Contribution	
Residential Street Address 43 W Hill Dr		City West Hartford		State CT	Zip Code 06119	Date Receive 05/21/20			
Principal Occupation Attorney		Name of Employer Travelers		<b>!</b>	Is this contribution associa fundraising event listed in If yes, list Event # 052	Section J1?	X Yes		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00	
Last Name Daniels	First Name Eric		MI	Cash	contribution:    X   Personal Cl	heck 0168	tion ID#	Amount of Contribution	
Residential Street Address 112 Quail Run		City Glastonbury		State CT	Zip Code 06033	Date Receive 05/21/20			
Principal Occupation Name of Employer Attorney Robinson & Cole					Is this contribution associa fundraising event listed in If yes, list Event # 052	Section J1?	X Yes		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contri	butions \$100.00	\$100.00	
Last Name Tobin	First Name Rhonda		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 0169	tion ID#	Amount of Contribution	
Residential Street Address 4 Anja Dr		City Simsbury		State CT	Zip Code 06070	Date Receive 05/21/20			
Principal Occupation Attorney		Name of Employer Robinson & Cole		!	Is this contribution associa fundraising event listed in If yes, list Event # 052	Section J1?	X Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$100.00	\$100.00	
Last Name Dailey	First Name Anne		MI	Cash	contribution:    X   Personal Cl	heck 0166	tion ID#	Amount of Contribution	
Residential Street Address 225 Lawrence St		City New Haven		State CT	Zip Code 06511	Date Receive 05/21/20			
Principal Occupation  Law Professor		Name of Employer UCONN Law School			Is this contribution associa fundraising event listed in If yes, list Event # 052	Section J1?	X Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contri	butions \$100.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Klingman	Patrick				Cash Money	y Order X Personal C		0167		Contribution
Residential Street Address	<u> </u>	City			State	Zip Code		ate Received		
141 Westland Ave		West Har	tford		CT	06107		5/21/201		
Principal Occupation		Name of Er	nployer			Is this contribution associ	ated with	a x	Yes	
Attorney		Shepard	, Finkelman, Miller &	Shah		fundraising event listed in  If yes, list Event # 05	Section 3 202010	11?	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Lagislativa	1 <sup>-</sup>	child of a lob	•		9	\$50.00	\$50.00
government the contract is with:	<u></u>	Executive	Legislative	+ -			<u> </u>	1		
Last Name Miller	First Name James			MI	Method of Cash	contribution:  x Personal C	Check	Contribution	on ID #	Amount of Contribution
					Money	y Order Credit/Del	bit Card	0170		
Residential Street Address		City			State	Zip Code		ate Received		
36 E Liberty St		Chester			СТ	06412-1204	0	5/21/201	0	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		1^	Yes	
Attorney Shepard, Finkelman, Miller & Shah  If yes, list Event # 05202010a No										
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	utor a lobbyis	byist?	Aggre	gate Contribu	utions	\$100.00
government the contract is with:		Executive	Legislative	'	res X	No		1		
Last Name Helmrich	First Name Stein			MI	Method of Cash	contribution:	heck	Contributi	on ID#	Amount of Contribution
Heimich	Stelli				_	y Order Credit/Del		0172		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
55 Trumbull St # 1106		Hartford			СТ	06103	0	5/21/201	0	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		a <b>x</b>	Yes	
Clerk		Hartford	Superior Court			If yes, list Event # 05			No	
Is contributor a principal of a state contractor	or prospective	·	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		-	\$50.00	\$50.00
government the contract is with:		Executive	Legislative		res X	No				
Last Name	First Name			MI		contribution:	Thook:	Contributi	on ID#	Amount of
Paulekas	Walter				Cash Money	y Order Credit/Del		0173		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
50 Greendale Dr		Suffield			СТ	06078	0	5/21/201	0	
Principal Occupation		Name of Er	nployer		-	Is this contribution associ		1^	Yes	
Attorney		Ford & P	aulekas, LLP			fundraising event listed in  If yes, list Event # 05			No	
Is contributor a principal of a state contractor	or prospective	I	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of	_			dependent	child of a lob	byist?		-	100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative	<u> </u>	res x	No				

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Dvorin	Lawrence				Cash Money	=	onal Check it/Debit Card	0175		Contribution
Residential Street Address		City		1	State	Zip Code		Date Received		
18 Kingsbridge		Avon			CT	06001		05/21/201		
Principal Occupation		Name of Er	nployer			Is this contribution a	ssociated with	та Б	Yes	İ
Attorney			aulekas, LLP			fundraising event list If yes, list Event #	ted in Section 05202010	J1?	No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggr	egate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of				1 °—	child of a lob	,		\$	100.00	\$100.00
government the contract is with:	<u> </u>	Executive	Legislative	L   1	res X	No		1		<u> </u>
Last Name Ford	First Name Paul			MI	Method of Cash	contribution:	onal Check	Contributi	on ID#	Amount of Contribution
1014	raui					= =	it/Debit Card	0176		Contribution
Residential Street Address		City			State	Zip Code	I	Date Received		
544 Weir St		Glastonb	ury		СТ	06033	(	05/21/201	0	ļ
Principal Occupation		Name of Er	mployer			Is this contribution a		1.2	Yes	
Attorney		Ford & P	aulekas, LLP			fundraising event list If yes, list Event #			No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	-	Aggr	egate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$	100.00	\$100.00
government the contract is with:	<u></u>	Executive	Legislative	+-				1		<u> </u>
Last Name Wyld	First Name Robert			MI	Method of Cash	contribution:	onal Check	Contributi	on ID#	Amount of Contribution
,					_	y Order Credi	it/Debit Card	0177		Commodition
Residential Street Address		City			State	Zip Code	I	Date Received		
8 Westledge Rd		West Sim	nsbury		СТ	06092	(	05/21/201	0	
Principal Occupation		Name of E				Is this contribution a fundraising event list		1.2	Yes	
Attorney		Shipmar	1 & Goodwin, LLP			If yes, list Event #			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggr	egate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of			_		child of a lob	-		-	100.00	\$100.00
government the contract is with:		Executive	Legislative	L   Y	res X	No				
Last Name	First Name			MI		contribution:	onal Check	Contributi	on ID#	Amount of
Murphy	Michelle				Cash Money	= =	it/Debit Card	0178		Contribution
Residential Street Address		City			State	Zip Code	I	Date Received		
179 Steele Rd		West Har	tford		СТ	06119	(	05/21/201	0	
Principal Occupation		Name of Er				Is this contribution a fundraising event list		1.	Yes	
Director of Communications		Northwe	st Catholic High Sch	ool		If yes, list Event #			No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggr	egate Contrib	utions	†
state contractor?  Is yes, indicate which branch or branches of				dependent	child of a lob	byist?	Aggi	-	100.00	\$100.00
government the contract is with:		Executive	Legislative	L  1	res X	No				<u> </u>

		I. MONETA	RY RECI	EIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemized Co	ontribution	s from	Individu	ials				
Last Name Cowdery	First Name James		N	MI	Method of o	contribution:    X   Personal C		Contribution 0179	ı ID#	Amount of Contribution
Residential Street Address 217 N Beacon St		City Hartford			State CT	Zip Code 06105		Pate Received 15/21/2010		
Principal Occupation Attorney		Name of Employer COWDERY, ECKER 8	& MURPHY, I	L.L.C.		Is this contribution association fundraising event listed in If yes, list Event # 052	Section J			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	d		tor a lobbyist child of a lob es	byist?	Aggre	egate Contribution \$10	ions 00.00	\$100.00
Last Name Manning	First Name Stephen		N	MI	Method of o	contribution:  X Personal C  Order Credit/Del		Contribution 0180	ı ID#	Amount of Contribution
Residential Street Address 49 Smallwood Rd		City West Hartford			State CT	Zip Code 06107		Pate Received		
Principal Occupation Attorney		Name of Employer O'Brien, Tanski & Yo	oung			Is this contribution association fundraising event listed in If yes, list Event # 052				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legislar	d		ator a lobbyist child of a lob es	byist?	Aggre	egate Contributi	ions 00.00	\$100.00
Last Name Santos	First Name Hubert		N	MI	Method of o	contribution:  X Personal C  Order Credit/Deb		Contribution 0182	ı ID#	Amount of Contribution
Residential Street Address 51 Russ St		City Hartford	·		State CT	Zip Code 06106		Pate Received 15/21/2010		
Principal Occupation Information Requested		Name of Employer Information Reques	sted			Is this contribution association fundraising event listed in If yes, list Event # 052	Section J			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	d		ator a lobbyist child of a lob es	byist?	Aggre	egate Contribution \$10	ions 00.00	\$100.00
Last Name Pennino Scheib	First Name Jacqueline	3	N	MI	Cash	contribution:  X Personal C  Order Credit/Del		Contribution 0183	ı ID#	Amount of Contribution
Residential Street Address 32 Arundel Ave		City West Hartford			State CT	Zip Code 06107		Pate Received		
Principal Occupation Attorney		Name of Employer Robinson & Cole				Is this contribution association fundraising event listed in If yes, list Event # 052	Section J			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	d	dependent	utor a lobbyist child of a lob es	byist?	Aggre	gate Contributi	ions 00.00	\$100.00

		I. N	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name Seeley	First Name Hope			MI	Cash	contribution: Personal C		Contribution 0234	ID#	Amount of Contribution
Residential Street Address 1909 Asylum Ave		City West Har	tford		State CT	Zip Code 06117-3061		Pate Received 15/21/2010		
Principal Occupation attorney		Name of Er Santos 8	nployer & Seeley, P.C.			Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributio	ons 00.00	\$100.00
Last Name Gallant	First Name Laura			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 0235	ID#	Amount of Contribution
Residential Street Address 182 W Haviland Ln		City Stamford	I		State CT	Zip Code 06903-3334		Pate Received 05/23/2010		
Principal Occupation Human Resource Manager		Name of Er	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribution	ons 00.00	\$100.00
Last Name Ramsey	First Name James			MI	Cash	contribution: Personal C		Contribution 0236	ID#	Amount of Contribution
Residential Street Address 136 Pear Tree Point Rd		City Darien			State CT	Zip Code 06820-5821		Pate Received		
Principal Occupation Finance		Name of Er Xerox Co	nployer orporation			Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributio	ons 00.00	\$100.00
Last Name Murphy	First Name Thomas			MI	Cash	contribution:  X Personal C y Order Credit/De		Contribution 0186	ID#	Amount of Contribution
Residential Street Address 179 Steele Rd		City West Har	tford		State CT	Zip Code 06119		Date Received 05/23/2010		
Principal Occupation Attorney		Name of Er	nployer RY, ECKER & MURPH	Y, L.L.C.		Is this contribution associ fundraising event listed in If yes, list Event # 05				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribution	ons 00.00	\$100.00

		I. MONETAR	Y RECE	EIPTS	(Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemized Con	tributions	s from	Individu	als				
Last Name Kapi	First Name Barbara		М	4I	Method of o	contribution:		Contribution 0185	on ID#	Amount of Contribution
Residential Street Address 6 Deme Rd		City Wallingford			State CT	Zip Code 06492-3029	D	ate Received 5/23/2010		
Principal Occupation None		Name of Employer None				Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislativ	de		tor a lobbyist	byist?	Aggre	gate Contribu	tions \$25.00	\$25.00
Last Name Koskoff	First Name Charlotte		М	4I	Method of o	contribution:    X   Personal Gredit/De		Contribution 0184	on ID #	Amount of Contribution
Residential Street Address 8 River Edge Ct		City Plainville			State CT	Zip Code 06062		ate Received 5/23/2010	0	
Principal Occupation Retired		Name of Employer None				Is this contribution associ fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X	de		tor a lobbyist	byist?	Aggre	gate Contribu \$1	itions	\$100.00
Last Name Dorsen	First Name Harriette		М	1I	Method of o	contribution:    X   Personal C		Contribution 0189	on ID#	Amount of Contribution
Residential Street Address 277 Town St		City West Cornwall			State CT	Zip Code 06796		ate Received 5/24/2010		
Principal Occupation Retired		Name of Employer None		•		Is this contribution associ fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X	de		tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	itions	\$100.00
Last Name Smithers	First Name Ruth		M H		Method of o	contribution:    X   Personal (		Contribution 0192	on ID#	Amount of Contribution
Residential Street Address 25 Kimberly Pl		City New Canaan			State CT	Zip Code 06840		ate Received 5/24/2010		
Principal Occupation Educational Consultant		Name of Employer Self		·		Is this contribution associ fundraising event listed in If yes, list Event #		112	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X	de		tor a lobbyist	byist?	Aggre	gate Contribu	itions	\$100.00

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Ite	emized Contributi	ons fron	Individu	ıals		•		
Last Name Fanwick	First Name Ernest			MI	Cash	contribution:    X   Personal C		Contribution 0196	ID#	Amount of Contribution
Residential Street Address 1403 Newfield Ave		City Stamford			State CT	Zip Code 06905		Pate Received 15/24/2010		
Principal Occupation Retired		Name of En None	nployer			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$2	ons 25.00	\$25.00
Last Name Rinaldi	First Name Mary Lou			MI	Cash	contribution:  X Personal C  Order Credit/Deb		Contribution 0193	ID#	Amount of Contribution
Residential Street Address 56 Mary Violet Rd		City Stamford			State CT	Zip Code 06907-1144		Pate Received 05/24/2010		
Principal Occupation Human Resources Manager		Name of En General			•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$10	ons 00.00	\$100.00
Last Name Thorne	First Name Marc			MI	Cash	contribution:    X   Personal C		Contribution 0194	ID#	Amount of Contribution
Residential Street Address 37 Dickinson Rd		City Darien			State CT	Zip Code 06820-5332		Pate Received 15/24/2010		
Principal Occupation retired		Name of En retired	nployer		•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$10	ons 00.00	\$100.00
Last Name Krumeich	First Name Edward			MI	Cash	contribution:    X   Personal C		Contribution 0195	ID#	Amount of Contribution
Residential Street Address 16 Perryridge Rd		City Greenwic	h		State CT	Zip Code 06830-4608		Pate Received 05/24/2010		
Principal Occupation Attorney		Name of En Ivey, Brr	nployer num & O'mara			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$10	ons 00.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Apter	Ronald				Cash	y Order X Personal C		0188		Contribution
Residential Street Address		City			State			ate Received		1
82 Beacon Hill Dr		City West Har	tford		CT	Zip Code 06117		5/24/201		
Principal Occupation		Name of Er	nplover		-	Is this contribution associ	ated with	a [	Yes	İ
Information Requested		l	ion Requested			fundraising event listed in If yes, list Event #	Section I	J1?	No No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of					child of a lob	•		-	100.00	\$100.00
government the contract is with:		Executive	Legislative		res X			1		
Last Name Perret	First Name Etienne			MI	Method of Cash	contribution:	Theck	Contributi	on ID#	Amount of Contribution
refree	Lucine					y Order X Credit/Del		0238		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
14 Sea St		Camden			ME	04843-1728	0	5/24/201	0	_
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in			Yes	
jeweler		Etienne I	Perret & Company			If yes, list Event #	i Section ,	) 1 : 	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contrib	utions	†
state contractor? Is yes, indicate which branch or branches of				I —	child of a lob	-		\$	100.00	\$100.00
government the contract is with:		Executive	Legislative	+ -				1		<u> </u>
Last Name Moran	First Name Brian			MI	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution
	5				_	y Order Credit/Del	bit Card	0187		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
43 Marvin Ridge Rd		New Cana	aan		СТ	06840	0	5/24/201	0	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in			Yes	
Information Requested		Informat	ion Requested			If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective	·	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contrib	utions	†
state contractor? Is yes, indicate which branch or branches of					child of a lob	•		\$	100.00	\$100.00
government the contract is with:		Executive	Legislative	+ -	res X			1		<u> </u>
Last Name Palley	First Name Jean			MI	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution
runcy	Jean					y Order Credit/Del		0191		Contribution
Residential Street Address	-	City			State	Zip Code	D	ate Received	l	
180 Colonial Rd Apt C2		Stamford			СТ	06906	0	5/24/201	0	_
Principal Occupation		Name of En	nployer			Is this contribution associ			Yes	
Retired		None				fundraising event listed in If yes, list Event #	i pection .	, i :	No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggra	egate Contrib	utions	†
state contractor? Is yes, indicate which branch or branches of				dependent	child of a lob	byist?	118810	-	\$25.00	\$25.00
government the contract is with:	Ц	Executive	Legislative	_ L L	res X	No				

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Ite	emized Contributi	ons from	Individu	ıals				
Last Name Shehadi	First Name Albert			MI	Cash	contribution:  X Personal C  Order Credit/Det		Contribution	n ID#	Amount of Contribution
Residential Street Address 27 Byram Shore Rd		City Greenwic	h		State CT	Zip Code 06830-6905		Pate Received 05/24/2010		
Principal Occupation  Community Development Finance		Name of En Enterpris	nployer se Community Invest	tment		Is this contribution association fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut \$10	ions 00.00	\$100.00
Last Name Zachs	First Name Henry			MI	Cash	contribution:  X Personal C  / Order Credit/Del		Contribution	n ID#	Amount of Contribution
Residential Street Address 337 Old Mountain Rd		City Farmingto	on		State CT	Zip Code 06062		Date Received 05/24/2010		
Principal Occupation  None		Name of En	nployer		•	Is this contribution association fundraising event listed in If yes, list Event #		J1? <b>브</b>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut \$1	ions 00.00	\$100.00
Last Name Greenberg	First Name Rita			MI	Cash	contribution:    X   Personal C		Contribution 0199	n ID#	Amount of Contribution
Residential Street Address  1 Dogwood		City Roslyn Es	states		State NY	Zip Code 11576		Pate Received		
Principal Occupation Retired		Name of En None	nployer			Is this contribution association fundraising event listed in If yes, list Event # 052	Section J	<sub>J1?</sub> 🗀	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut \$1	ions 00.00	\$100.00
Last Name Hartstein	First Name Marvin			MI	Cash	contribution:    X   Personal C		Contribution 0200	n ID#	Amount of Contribution
Residential Street Address 14 Shorecliff Pl		City Great Ne	ck		State NY	Zip Code 11023		ate Received 5/25/2010		
Principal Occupation Retired		Name of En	nployer			Is this contribution association fundraising event listed in If yes, list Event # 052	Section J	<sub>J1?</sub> 🗀	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut \$1	ions 00.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	ıals		•		
Last Name Hamby	First Name Robert			MI	Cash	contribution:    X   Personal C y Order		Contribution 0201	ı ID#	Amount of Contribution
Residential Street Address 35 Knolls Ln		City Manhasse	et		State NY	Zip Code 11030		Date Received 05/25/2010		
Principal Occupation Retired		Name of Er None	mployer			Is this contribution association fundraising event listed in If yes, list Event # 052	Section .		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Selkovits Taylor	First Name Anne			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0202	ı ID#	Amount of Contribution
Residential Street Address 219 Old Long Ridge Rd		City Stamford	I		State CT	Zip Code 06903		Date Received		
Principal Occupation  Compliance Consultant		Name of Er Self	mployer			Is this contribution association fundraising event listed in If yes, list Event # 052			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Rubin	First Name Elizabeth			MI	Cash	contribution:  X Personal C y Order Credit/Det		Contribution 0203	n ID#	Amount of Contribution
Residential Street Address 16 Lantern Cir		City Stamford	I		State CT	Zip Code 06905		Date Received		
Principal Occupation  None		Name of Er None	mployer			Is this contribution association fundraising event listed in If yes, list Event # 052	Section .		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Kriftcher	First Name Jean			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0204	ı ID#	Amount of Contribution
Residential Street Address 51 Deer Meadow Ln		City Stamford	ı		State CT	Zip Code 06903		Date Received		
Principal Occupation Information Requested		Name of Er Informat	mployer tion Requested			Is this contribution association fundraising event listed in If yes, list Event # 05.	Section .		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ito	emized Contributi	ons from	Individu	ıals				
Last Name Fuchs	First Name Jennifer			MI	Cash	contribution:  X Personal C		Contribution	on ID#	Amount of Contribution
Residential Street Address 60 Davenport Farm Ln E		City Stamford		<u> </u>	State CT	Zip Code 06903	Da	ate Received 5/25/2010	)	
Principal Occupation None		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 05		1?	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
Last Name Cortell	First Name Doreen			MI	Cash	contribution:  X Personal C  Order Credit/Del		Contribution	on ID #	Amount of Contribution
Residential Street Address  1 Wellington Dr		City Stamford			State CT	Zip Code 06903		ate Received 5/25/2010	)	
Principal Occupation None		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 05	n Section J	1? 🗠	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob yes	byist?	Aggres	gate Contribu \$1	ons.00.00	\$100.00
Last Name Kirshner	First Name Marc			MI	Cash	contribution:    X   Personal C		Contribution	on ID#	Amount of Contribution
Residential Street Address 723 Rock Rimmon Rd		City Stamford			State CT	Zip Code 06903		ate Received 5/25/2010	)	
Principal Occupation Doctor		Name of En	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event # 05	n Section J	1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
Last Name Bader	First Name Cheryl			MI	Cash	contribution:    X   Personal C		Contribution	on ID#	Amount of Contribution
Residential Street Address 243 Jonathan Dr		City Stamford			State CT	Zip Code 06903		ate Received 5/25/2010	)	
Principal Occupation  Lawyer		Name of En	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event # 05	n Section J	1?	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Yes X No		utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribu \$1	ons.00.00	\$100.00

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name England	First Name Fred			MI	x Cash	contribution:  Personal C y Order Credit/Det		Contribution 0210	n ID#	Amount of Contribution
Residential Street Address 197 Georgetown Rd		City Weston			State CT	Zip Code 06883		Pate Received 15/25/2010		
Principal Occupation Information Requested		Name of E	mployer			Is this contribution association fundraising event listed in If yes, list Event # 05.	Section J	<sub>J1?</sub> 🗀	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribut \$10	ions 00.00	\$100.00
Last Name Kunin	First Name Susan			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0258	n ID#	Amount of Contribution
Residential Street Address 149 Emery Dr E		City Stamford	I		State CT	Zip Code 06902		Date Received 05/25/2010		
Principal Occupation  None		Name of Er None	mployer			Is this contribution association fundraising event listed in If yes, list Event # 052		<sub>J1?</sub> 🗀	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$1	ions 00.00	\$100.00
Last Name Kohler	First Name Mark			MI	Cash	contribution:  Personal C y Order X Credit/Det		Contribution 0239	n ID#	Amount of Contribution
Residential Street Address 3303 Dixwell Ave		City North Ha	ven		State CT	Zip Code 06473-2961		Pate Received		
Principal Occupation Attorney		Name of En	mployer Connecticut		•	Is this contribution association fundraising event listed in If yes, list Event #		<sub>J1?</sub> 브	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribut \$1	ions 00.00	\$100.00
Last Name Drazin	First Name Dorothy			MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0208	n ID#	Amount of Contribution
Residential Street Address 12 Alfred Ln		City Stamford	I		State CT	Zip Code 06902		Date Received 05/25/2010		
Principal Occupation Retired		Name of En	mployer			Is this contribution association fundraising event listed in If yes, list Event # 052	Section J	<sub>J1?</sub> 🗀	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribut \$1	ions 00.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name Kindall	First Name Clare			MI	Cash	contribution:    X   Personal C		Contribution 0198	n ID#	Amount of Contribution
Residential Street Address 46 Bishop Rd		City West Har	rtford		State CT	Zip Code 06119-1535		Pate Received 15/25/2010		
Principal Occupation Attorney		Name of E	mployer		-	Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Reynolds	First Name Tom			MI	Cash	contribution:  Personal C y Order X Credit/Del		Contribution 0240	n ID#	Amount of Contribution
Residential Street Address 47 Bittersweet Dr		City Gales Fe	rry		State CT	Zip Code 06335-1002		Pate Received 05/26/2010		
Principal Occupation Legislator		Name of E			•	Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$2	ions 25.00	\$25.00
Last Name Brown	First Name Michael V			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0241	n ID#	Amount of Contribution
Residential Street Address 67 Point Beach Dr		City Milford			State CT	Zip Code 06460-7647		Pate Received 15/26/2010		
Principal Occupation  Consultant		Name of E	<sup>nployer</sup> ndard Institute			Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Jordan	First Name Terral			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0228	n ID#	Amount of Contribution
Residential Street Address 1521 Applecroft Ln		City Cockeys	ville		State MD	Zip Code 21030-1601		Date Received 05/26/2010		
Principal Occupation NA		Name of E	mployer			Is this contribution associ fundraising event listed in If yes, list Event #				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Jordan	Lynn				Cash Money	y Order X Credit/De		0229		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
1521 Applecroft Ln		Cockeysv	rille		MD	21030-1601	0	5/26/2010	)	
Principal Occupation na		Name of Er	nployer		-	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions	\$100.00
Last Name	First Name			MI	Method of	contribution:	1	Contributio	on ID #	Amount of
Flynn	Stephen				Cash Money	y Order Resonal Credit/De		0211	on ib "	Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
3 Sulky Dr		Brookfiel	d		СТ	06804	0	5/27/2010	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes	
None		None		-		fundraising event listed in If yes, list Event #	Section .	x	No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	itions	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Fitzpatrick	William				Cash Money	y Order		0213		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
61 Pleasant St		Waterbur	У		СТ	06706	0	5/27/2010	0	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes	
Laborer		Ultimate	Concrete, Inc.			If yes, list Event #		x	No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of	or prospective	F	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	itions \$50.00	\$50.00
government the contract is with:		Executive	Legislative	+ -			<u> </u>	1		
Last Name Uriano	First Name James			MI	Cash	contribution:  X Personal C y Order Credit/De		Contribution 0214	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code		ate Received		•
207 Dinatali Dr		Waterbur	ту		СТ	06705	0	5/27/2010	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes	
Retired		None				fundraising event listed in If yes, list Event #	Section .	11? <b>x</b>	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	itions	
state contractor?  Is yes, indicate which branch or branches of	П	Executive	Legislative	dependent	child of a lob	-		\$	\$25.00	\$25.00
government the contract is with:										

		I. MONETARY	Y RECEIF	PTS (Section	n A-I)			
NAME OF COMMITTEE							FILIN	IG DUE DATE
Jepsen 2010								
		B. Itemized Cont	ributions fr	rom Individu	ials		•	
Last Name Mulcahy	First Name Ryan		MI	Method of o	contribution:    X   Personal C	heck	Contribution ID #	Amount of Contribution
Residential Street Address 119 Birchfield Dr		City Waterbury		State CT	Zip Code 06705		Received 27/2010	
Principal Occupation Project Crew Worker		Name of Employer Waterbury Hospital			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	deper	ontributor a lobbyist indent child of a lobby Yes	byist?	Aggregate	e Contributions \$50.00	\$50.00
Last Name Mulcahy	First Name Karen		MI	Method of o	contribution:  X Personal C  Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address 119 Birchfield Dr		City Waterbury		State CT	Zip Code 06705		Received 27/2010	
Principal Occupation  Nurse		Name of Employer Mulbury Gardens			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	deper	ontributor a lobbyist indent child of a lob Yes	byist?	Aggregate	e Contributions \$25.00	\$25.00
Last Name Difiore	First Name Dominic		MI	Method of o	contribution:  X Personal C  Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address 3030 N Main St Fl 1		City Waterbury	•	State CT	Zip Code 06704		Received 27/2010	
Principal Occupation None		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	deper	ontributor a lobbyist indent child of a lobbyist Yes	byist?	Aggregate	e Contributions \$40.00	\$40.00
Last Name Bouton	First Name William		MI	Method of o	contribution:    X   Personal C	heck	Contribution ID #	Amount of Contribution
Residential Street Address 18 Rivercove Dr		City Cromwell		State CT	Zip Code 06416		Received 27/2010	
Principal Occupation Attorney		Name of Employer Hinckley Allen & Snyde	er	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	deper	ontributor a lobbyist andent child of a lobbyist Yes	byist?	Aggregate	e Contributions \$100.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
French	Christoph	er			Cash Money	y Order Personal C		0220		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
220 Oxbow Rd		Wayland			MA	01778	0	5/27/2010	0	
Principal Occupation		Name of E	mployer			Is this contribution associ			Yes	
Information Requested		Informa	tion Requested			fundraising event listed in If yes, list Event #	section.	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 °—	child of a lob	,		\$1	100.00	\$100.00
government the contract is with:	<u></u>	Executive	Legislative	<del>                                     </del>	I		<u> </u>	1		
Last Name Feintein	First Name Hilary			MI	Cash	contribution: Personal C	Check	Contribution	on ID#	Amount of Contribution
	,					y Order X Credit/Del	bit Card	0242		Commonium
Residential Street Address		City			State	Zip Code	D	ate Received		
50 Caprice Dr		Stamford	<u> </u>		СТ	06902-1721	0	5/27/2010	0	
Principal Occupation		Name of E	nployer			Is this contribution associ			Yes	
None		None				fundraising event listed in If yes, list Event #	section .	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$1	100.00	\$100.00
government the contract is with:  Last Name	I Einst Name	LACCULIVE	Legislative	Тмі	I		<u> </u>	1		<u> </u>
Cortell	First Name Gary			MI	Cash	contribution: Personal C	Check	Contributio	on ID #	Amount of Contribution
					Money	y Order X Credit/Del	bit Card	0247		
Residential Street Address		City			State	Zip Code	D	ate Received		
1 Wellington Dr		Stamford	!		СТ	06903-3211	0	5/27/2010	0	<u> </u>
Principal Occupation		Name of E	mployer			Is this contribution associ			Yes	
TV Producer		Self				fundraising event listed in If yes, list Event #	i Section .	x	No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t spouse or	Aggra	gate Contribu	utions	†
state contractor? Is yes, indicate which branch or branches of	_		les like		child of a lob	byist?	Aggie	-	100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative	L 1	res X	No				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Aiessio	Cathy				Cash Money	y Order X Credit/Del		0249		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
278 Russet Rd		Stamford	<u> </u>		СТ	06903-1819	0	5/27/2010	0	1
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in			Yes	
None		None				If yes, list Event #	i becuoii .	x	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	gate Contribu	ıtions	Ī
state contractor? Is yes, indicate which branch or branches of			<b></b>		child of a lob	-		\$1	100.00	\$100.00
government the contract is with:	ш	Executive	Legislative	L 1	res X	No				

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ito	emized Contributi	ons from	Individu	ıals				
Last Name F	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Sisco	Rob				Cash	Personal C  X Credit/Deb		0250		Contribution
Residential Street Address		Cit-			State			ate Received		
278 Russet Rd		City Stamford			CT	Zip Code 06903-1819	- 1	5/27/201		
Principal Occupation		Name of En	onlover		<u> </u>	Is this contribution associa	ated with	а Г	7	
None		None	npioyer			fundraising event listed in		J1?	Yes No	
						If yes, list Event#			NO NO	
Is contributor a principal of a state contractor or state contractor?	prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
Is yes, indicate which branch or branches of	П	Executive	Legislative	1 ~	res x	,		\$:	100.00	\$100.00
government the contract is with:	First Name			I —	1	contribution:		0 17 1	ID //	
	Julianne			IVII	Cash	Personal C	heck	Contribution 0251	on ID#	Amount of Contribution
					Money	y Order X Credit/Deb	it Card	0231		
Residential Street Address		City			State	Zip Code		ate Received		
32 S Bedford Rd		Pound Ric	dge		NY	10576-2014	0	5/27/201	0	ļ
Principal Occupation		Name of En	nployer			Is this contribution associa fundraising event listed in			Yes	
None		None				If yes, list Event #		х	No	
Is contributor a principal of a state contractor or	prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		-	100.00	\$100.00
government the contract is with:		Executive	Legislative	L Y	res x	No		1		
	First Name			MI		contribution:	haalr	Contributi	on ID#	Amount of
Sanders	Gerald				Cash Money	y Order X Credit/Deb		0252		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
24 Winding Ln		Glen Hea	d		NY	11545-2904	0	5/27/201	0	
Principal Occupation		Name of En	nployer		•	Is this contribution associa			Yes	
None		None				fundraising event listed in If yes, list Event #	Section J	11?	No	
Is contributor a principal of a state contractor or	nrocnactiva		Yes X No	In contrib	utor a lobbyis	t analysis on	Ι.			•
state contractor?	prospective		Yes X No		child of a lob		Aggre	gate Contribu	utions 100.00	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No		Ψ.	100.00	\$100.00
Last Name F	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Fink	Neal				Cash	Personal C  V Order  X Credit/Deb		0233		Contribution
D 11 (10) 111		a:			<u> </u>			D : 1		
Residential Street Address 70 Crest Ter		City Fairfield			State CT	Zip Code 06825-1204		ate Received 5/27/201		
Principal Occupation		Name of En	anlovar		1	Is this contribution associa	_			
Programmer / Engineer		Self	npioyei			fundraising event listed in		J1?	Yes No	
				1		If yes, list Event#		<u> </u>	7 1/0	
Is contributor a principal of a state contractor or state contractor?	prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
Is yes, indicate which branch or branches of	П	Executive	Legislative	dependent Y		-		9	\$25.00	\$25.00
government the contract is with:			<del>-</del> -							l

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Ite	emized Contributi	ons from	ı Individu	ıals		•		
Last Name Dranginis	First Name Anne			MI	Cash	contribution: Personal C		Contributio	n ID#	Amount of Contribution
Residential Street Address PO Box 39		City Litchfield			State CT	Zip Code 06759-0039		Date Received 05/27/2010	l	
Principal Occupation Atttorney		Name of En Rome Mo	nployer :Guigan PC			Is this contribution associ fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00
Last Name Kirsher	First Name Nanci			MI	Cash	contribution: Personal C y Order X Credit/De		Contributio	n ID#	Amount of Contribution
Residential Street Address 723 Rock Rimmon Rd		City Stamford			State CT	Zip Code 06903-1216		Oate Received 05/27/2010	l	
Principal Occupation  Doctor		Name of En	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00
Last Name Caputo	First Name Judith			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributio	n ID#	Amount of Contribution
Residential Street Address 146 Bayberry Ter		City Middlebur	γ		State CT	Zip Code 06762		Date Received 05/27/2010	ı	
Principal Occupation President		Name of En Advantag	nployer ge Realty Group			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$	tions 50.00	\$50.00
Last Name Jaff	First Name Jennifer			MI	Cash	contribution: Personal C y Order X Credit/De		Contributio 0224	n ID#	Amount of Contribution
Residential Street Address 18 Timberline Dr		City Farmingto	on		State CT	Zip Code 06032-1744		Date Received 05/27/2010	ı	
Principal Occupation Attorney		Name of En Advocacy Illness	nployer / for Patients with Cl	hronic	•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING D											
Jepsen 2010											
		B. Itemized Contribut	ions fron	Individu	ıals						
Last Name Bergenn	First Name James		MI	Cash	contribution: Personal Cl  Order X Credit/Debi	heck 024	tribution ID #	Amount of Contribution			
Residential Street Address 50 Castlewood Rd		City West Hartford		State CT	Zip Code 06107-2903	Date Rec 05/27/					
Principal Occupation Attorney		Name of Employer Shipman & Goodwin, LLP			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$100.00	\$100.00			
Last Name Bergenn	First Name Susan		MI	Cash	contribution: Personal Cl / Order X Credit/Debi	heck 024	tribution ID #	Amount of Contribution			
Residential Street Address 50 Castlewood Rd		City West Hartford		State CT	Zip Code 06107-2903	Date Rec 05/27/					
Principal Occupation Sr. Legal Consultant		Name of Employer Prudential			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	ontributions \$100.00	\$100.00			
Last Name Kaye	First Name Joel		MI	Cash	contribution: Personal Cl  Order X Credit/Debi	heck 022	tribution ID #	Amount of Contribution			
Residential Street Address 87 Hillcrest Park Rd		City Old Greenwich		State CT	Zip Code 06870-1018	Date Rec 05/27/					
Principal Occupation  Lawyer		Name of Employer Self-Employed			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	\$100.00	\$100.00			
Last Name Steinmetz	First Name Shirley		MI	Cash	contribution: Personal Cl  Order X Credit/Debi	heck 022	tribution ID #	Amount of Contribution			
Residential Street Address 375 Brimfield Rd		City Wethersfield		State CT	Zip Code 06109-3203	Date Rec					
Principal Occupation None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	ontributions \$100.00	\$100.00			

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ials				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Zdrojeski	Ronald				Cash Money	Personal C  X Credit/Del		0232		Contribution
Residential Street Address	-	City			State	Zip Code	D	ate Received		
47 Papermill Rd		South Gla	astonbury		СТ	06073-2332	0	5/27/2010	0	
Principal Occupation Attorney		Name of Er Robinsor			-	Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Zdrojeski	First Name John			MI	Cash	contribution: Personal C		Contribution 0244	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code		ate Received		
47 Papermill Rd		1 '	astonbury		CT	06073-2332		5/27/2010		
Principal Occupation		Name of Er	mployer			Is this contribution associ			Yes	
Student		None				fundraising event listed in If yes, list Event #	Section .	11? <b>x</b>	No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob 'es	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Zdrojeski	Katherine				Cash Money	Personal C  V Order X Credit/Del		0245		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
47 Papermill Rd		South Gla	astonbury		СТ	06073-2332	0	5/27/2010	0	
Principal Occupation		Name of Er	mployer			Is this contribution associ- fundraising event listed in			Yes	
Student		None				If yes, list Event #		x	No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Pepe	Alexande	r 			Cash Money	Personal C  Order Credit/Del		0212		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
3 Metacom Dr		Simsbury	′		СТ	06070	0	5/27/2010	0	
Principal Occupation  Campaign Worker		Name of Er Apple Re				Is this contribution associ- fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of	or prospective	P	Yes X No		utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions	\$100.00
government the contract is with:	니	Executive	Legislative		es	INO	1			

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ite	emized Contributi	ons from	Individu	ıals				
Last Name Fir	irst Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Cohen	nn				Cash Money	Personal C  V Order  X Credit/Deb		0255		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
1062 Ponus Ridge Rd		New Cana	aan		CT	06840		5/28/2010		
Principal Occupation		Name of Em	nnlover		ļ	Is this contribution associa	ated with	а Г	Yes	†
retired		none	projet			fundraising event listed in	Section J	11? <b>L</b>	No	
				,		If yes, list Event #			I NO	
Is contributor a principal of a state contractor or pr state contractor?	rospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
Is yes, indicate which branch or branches of government the contract is with:	П	Executive	Legislative	1 ~	es x	,		\$1	100.00	\$100.00
	irst Name			MI	1	contribution:		Contribution	on ID #	
	imberley			"	Cash	Personal C	heck	0253	on ID#	Amount of Contribution
					Money	y Order X Credit/Deb	oit Card	0233		
Residential Street Address		City			State	Zip Code		ate Received		
251 W 89th St Apt 12C		New York			NY	10024-1741	0	5/28/2010	0	ļ
Principal Occupation		Name of Em				Is this contribution association fundraising event listed in		<sub>11?</sub>	Yes	
Alumni Placement Manager		KIPP Fou	ndation			If yes, list Event #		x	No	
Is contributor a principal of a state contractor or pr	rospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	ıtions	†
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		\$1	100.00	\$100.00
government the contract is with:	Ц	Executive	Legislative	L Y	res x	No		1		
	irst Name			MI	Method of Cash	contribution:	heck	Contribution	on ID#	Amount of
Bennett Ro	oger				_	y Order X Credit/Deb		0254		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		1
34 Jerome Ave		West Har	tford		СТ	06117	0	5/28/2010	0	
Principal Occupation		Name of Em	nployer		•	Is this contribution associa			Yes	
СРА		Bennett a	and Co			fundraising event listed in If yes, list Event #	Section J	1? <b>x</b>	No	
Is contributor a principal of a state contractor or pr	rocnective		Yes X No	Is contrib	utor a lobbyis	t chausa or	Ι.			ł
state contractor?	позресиче		Yes No		child of a lob		Aggre	gate Contribu	100.00	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No				<b>\$100.00</b>
Last Name Fin	irst Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Bloss	/illiam				Cash Money	Personal C  V Order  X Credit/Det		0223		Contribution
Residential Street Address		City		1	State	Zip Code		ate Received		•
1165 Great Hill Rd		Guilford			CT	06437-3648		5/28/2010		
Principal Occupation		Name of Em	nplover		<del></del>	Is this contribution associa	ated with	а Г	Yes	†
Attorney			Koskoff & Bieder			fundraising event listed in		11?	No No	
						If yes, list Event #			_ 110	1
Is contributor a principal of a state contractor or principal of a state contractor?	rospective		Yes X No		utor a lobbyis child of a lob		Aggre	gate Contribu		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	П у		-		\$1	100.00	\$100.00
go reminent the contract is will.										1

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING D											
Jepsen 2010											
		B. Itemized Contribu	tions fron	ı Individu	ıals						
Last Name Harris	First Name Victoria		MI F	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0	ontribution ID #	Amount of Contribution			
Residential Street Address 22 Locust St		City Greenwich		State CT	Zip Code 06830-6317		Received 8/2010				
Principal Occupation realtor		Name of Employer self employed			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$50.00	\$50.00			
Last Name Cohen	First Name Neil		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 0	ontribution ID #	Amount of Contribution			
Residential Street Address 1908 NW 4th Ave Apt 108		City Boca Raton		State FL	Zip Code 33432-1501		Received 19/2010				
Principal Occupation Finance		Name of Employer Klein for Congress		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes x No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate	Contributions \$25.00	\$25.00			
Last Name Carmody	First Name Samuel		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0	ontribution ID #	Amount of Contribution			
Residential Street Address 210 High St		City Wallingford	•	State CT	Zip Code 06492		Received 19/2010				
Principal Occupation Registrar of Voters		Name of Employer Town of Wallingford, CT			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate	Contributions \$100.00	\$100.00			
Last Name Cohen	First Name Howard		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0	ontribution ID#	Amount of Contribution			
Residential Street Address 37 Adams Rd		City Ridgefield		State CT	Zip Code 06877-5905		Received 80/2010				
Principal Occupation Human Resources		Name of Employer Right Management		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$25.00	\$25.00			

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Ite	emized Contribution	ons from	Individu	ıals		•		
Last Name Lally	First Name Robert V			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0508	ı ID#	Amount of Contribution
Residential Street Address 38 Brian Ln		City Avon			State CT	Zip Code 06001-3518		Pate Received 16/01/2010		
Principal Occupation Accountant		Name of Em Federma	nployer n, Lally & Remis LLC	:		Is this contribution associ fundraising event listed in If yes, list Event #				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Gahan	First Name Thomas			MI	Cash	contribution:  X Personal C  y Order Credit/Del		Contribution 0221	n ID#	Amount of Contribution
Residential Street Address 196 Harwood Rd		City Waterbur	у		State CT	Zip Code 06706		Pate Received 06/02/2010		
Principal Occupation State Marshal		Name of Em	nployer Connecticut		-	Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contributi \$37	ions 75.00	\$375.00
Last Name Griswold	First Name Evan			MI	Cash	contribution: Personal C		Contribution 0553	ı ID#	Amount of Contribution
Residential Street Address 24 Osprey Rd		City Old Lyme			State CT	Zip Code 06371		Pate Received		
Principal Occupation  Realtor		Name of Em	nployer			Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Shea	First Name Michael			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0566	ı ID#	Amount of Contribution
Residential Street Address 325 Quaker Ln N		City West Harl	tford		State CT	Zip Code 06119-1036		Pate Received		
Principal Occupation  Lawyer		Name of Em Day Pitne				Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ite	emized Contribut	ions from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Furze	Lelieth				Cash Money	Personal C  y Order  X Credit/Del		0575		Contribution
Residential Street Address	1	City			State	Zip Code		ate Received		
150 Wolcott Woods Dr		Simsbury	,		CT	06070-1441		6/02/2010		
Principal Occupation		Name of Er	nnlover		<u> </u>	Is this contribution associ	ated with	а Г	Yes	
mental health provider		self emp				fundraising event listed in	Section .	<sub>11?</sub>	No	
				1		If yes, list Event #			140	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggre	gate Contribu		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	I	res X	•		\$1	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Scarlett	Richard				Cash	Personal C		0612		Contribution
		<u> </u>				y Order X Credit/Del				
Residential Street Address  11 Biltmore Ct		City Avon			State	Zip Code 06001-4305		ate Received 6/02/2010		
					<u> </u>	Is this contribution associ	_			
Principal Occupation Orthopaedic Surgeon		Name of Er Grove Hi	npioyer Il Medical Center			fundraising event listed in		J1?	Yes	
						If yes, list Event #			No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggre	gate Contribu	utions	
Is yes, indicate which branch or branches of	П	Executive	Legislative	1 —	res x	-		\$1	100.00	\$100.00
government the contract is with:  Last Name	First Name			MI		contribution:	<u> </u>	Contribution	ID #	
Nussbaum	John				Cash	Personal C	heck	0525	on ID#	Amount of Contribution
					Money	y Order X Credit/Del	oit Card	0323		
Residential Street Address		City			State	Zip Code		ate Received		
4 Lafayette Ct Apt 1B		Greenwic	h		СТ	06830-5302	0	6/02/2010	0	
Principal Occupation		Name of En				Is this contribution associ- fundraising event listed in		J1?	Yes	
Real Estate Investment		Entry Po	int Capital LLC			If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of				1 —	child of a lob	-		\$1	100.00	\$100.00
government the contract is with:		Executive	Legislative	+ -	res x		<u> </u>	1		
Last Name Barnes	First Name Benjamin			MI	Method of Cash	contribution:	heck	Contribution	on ID#	Amount of Contribution
burnes	Denjaniin					y Order X Credit/Del		0520		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
28 Brightwood Ave		Stratford			СТ	06614-4110	0	6/02/2010	0	
Principal Occupation		Name of En	nployer			Is this contribution associ			Yes	
Administrator		Bridgepo	ort BOE			fundraising event listed in If yes, list Event #	section.	<u>x</u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t. spouse, or	Acor	gate Contribu	utions	
state contractor?  Is yes, indicate which branch or branches of				dependent	child of a lob	byist?	Aggre	-	100.00	\$100.00
government the contract is with:		Executive	Legislative	Y	res X	No			-	

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Cavanagh	Kevin J.				Cash Money	y Order X Credit/Del		0518		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
14 Greenway Rd		New Lone	don		СТ	06320-2909	0	6/03/201	0	
Principal Occupation Retired		Name of En	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu	itions \$10.00	\$10.00
Last Name Tessier-Sherman	First Name Baylah			MI	Cash	contribution:  Personal C y Order X Credit/Del		Contribution 0554	on ID#	Amount of Contribution
Residential Street Address		City			State CT	Zip Code 06105-3051		ate Received		
573 Farmington Ave		Hartford			CI					ļ
Principal Occupation Researcher		Name of Er				Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Benn	Susan				Cash Money	y Order Personal C		0330		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
3 Sprucewood Ln		Avon			СТ	06001	0	6/04/201	0	
Principal Occupation PA		Name of E				Is this contribution associ fundraising event listed in	Section J		Yes No	
						If yes, list Event # 06	022010	<u>ıb</u> L	NO	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	ations \$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:	•	Contributi	on ID#	Amount of
Clougher	Linda				Cash Money	y Order X Personal C		0311		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
38 Scenic Hill Ln		Monroe			СТ	06468	0	6/04/201	0	]
Principal Occupation RN Consultant		Name of Er	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 06	Section J		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of	or prospective	ı	Yes X No	dependent	utor a lobbyis	byist?	Aggre	gate Contribu	utions	\$100.00
government the contract is with:	Ш	Executive	Legislative	<u></u> Ц у	res x	No				

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Constand	Michael				Cash Money	y Order		0286		Contribution
Residential Street Address	•	City		•	State	Zip Code	D	ate Received		
1 Winona Pl		Easton			СТ	06612	0	6/04/2010	0	
Principal Occupation None		Name of Er None	nployer			Is this contribution assoc fundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	utions	\$100.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	on ID #	Amount of
Cohen	Richard				Cash Money	y Order Registration X Personal Credit/De		0270		Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		1
49 Fernwood Rd		West Har	tford		СТ	06119	0	6/04/2010	0	
Principal Occupation		Name of E	mployer		•	Is this contribution assoc			Yes	
Lawyer		Shipmar	n & Goodwin, LLP			fundraising event listed in If yes, list Event #	n Section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu	utions	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Fuchs	Mitchell				Cash Money	y Order X Personal Credit/De		0281		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
202 Melody Ln		Fairfield			СТ	06824	0	6/04/2010	)	_
Principal Occupation		Name of Er				Is this contribution assoc fundraising event listed in		1^	Yes	
Property Manager		Wellesle	y Corp.			If yes, list Event # 06			No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 —	child of a lob	-			\$25.00	\$25.00
Last Name	First Name			MI		contribution:		Contributio	on ID #	Amount of
Manning	Debbie				X Cash Money	y Order Personal Credit/De		0259		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
48 Anthony Dr		Londonde	erry		NH	03053	0	6/04/2010	)	1
Principal Occupation		Name of Er	mployer			Is this contribution assoc fundraising event listed in		J1?	Yes	
Consultant		Self				If yes, list Event #		x	No	
Is contributor a principal of a state contractor state contractor?	or prospective	•	Yes X No		utor a lobbyis child of a lob		Aggre	gate Contribu	itions	\$25.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	No	<u> </u>		, 23.00	\$25.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Morris	Scott				Cash Money	y Order Registration   X Personal C		0261		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		1
1600 N Quinn St Apt 304		Arlington			VA	22209	0	6/04/2010	0	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ			Yes	İ
Information Requested		National	League of Cities			fundraising event listed in If yes, list Event #	Section I	J1? <b>x</b>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	•		\$1	100.00	\$100.00
government the contract is with:  Last Name	First Name	LACCULIVE	Legislative	Тмі	1	contribution:	<u> </u>	I	"	
Gorevic	Jason			MI	Cash	X Personal (	Check	Contribution 0262	on ID #	Amount of Contribution
					Money	y Order Credit/De	bit Card	0202		
Residential Street Address		City			State	Zip Code		ate Received		
32 Norman Dr		Rye			NY	10580		6/04/2010	0	<u> </u>
Principal Occupation		Name of Er Teladoc	nployer			Is this contribution associ fundraising event listed in		J1?	Yes	
CEO		Teladoc				If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$1	100.00	\$100.00
government the contract is with:  Last Name	First Name	Executive	Legislative	I <sub>MI</sub>				1		<u> </u>
Carbone	Nicholas			MI	Cash	contribution:     X   Personal   0	Check	Contribution 0263	on ID #	Amount of Contribution
					Money	y Order Credit/De	bit Card	0263		
Residential Street Address		City			State	Zip Code		ate Received		
2 Park Place Cir Apt 23A		Hartford			СТ	06106		6/04/2010	0	<u> </u>
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		J1?	Yes	
Information Requested		Iniornia	ion Requested			If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of		F			child of a lob	-		9	\$50.00	\$50.00
government the contract is with:	<u></u>	Executive	Legislative	+ -	1			1		
Last Name Schick	First Name Anne			MI E	Method of Cash	contribution:  X Personal 0	Check	Contribution	on ID#	Amount of Contribution
						y Order Credit/De	bit Card	0265		
Residential Street Address		City			State	Zip Code	D	ate Received		
31 Woodland St Apt 1D		Hartford			СТ	06105	0	6/04/2010	0	<u> </u>
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		1^	Yes	
Director of Graduate Medical Education		State of	Connecticut			If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of					child of a lob	-			\$50.00	\$50.00
government the contract is with:	니	Executive	Legislative		res x	No	1			

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name Rosa	First Name Peter			MI	Cash	contribution:    X   Personal C		Contribution 0266	ı ID#	Amount of Contribution
Residential Street Address 13 Cavendish Pl		City Avon			State CT	Zip Code 06001-5100		Date Received 06/04/2010		
Principal Occupation Program Officer		Name of Er Hartfor F	nployer Foundation			Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi	ions 00.00	\$100.00
Last Name Angiolillo	First Name Glenn			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0267	ı ID#	Amount of Contribution
Residential Street Address 84 Middle Ridge Rd		City New Can	aan		State CT	Zip Code 06840		Date Received		
Principal Occupation  Manager		Name of Er GJA Man	nployer nagement Corp.			Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Weinstein	First Name Gayle			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution	n ID#	Amount of Contribution
Residential Street Address 8 Hills End Ln		City Weston			State CT	Zip Code 06883-1339		Pate Received		
Principal Occupation First Selectwoman		Name of Er Town of			-	Is this contribution associ fundraising event listed in If yes, list Event # 06	Section .	J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Gianquinto	First Name Michael			MI J	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0285	ı ID#	Amount of Contribution
Residential Street Address 2633 Post Rd		City Southpor	t		State CT	Zip Code 06890		Date Received 06/04/2010		
Principal Occupation Consultant		Name of Er Self	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	ı Individu	uals				
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
Robinson	Michael				Cash Money	y Order X Persona  Credit/E	Check Debit Card	0291		Contribution
Residential Street Address	<u> </u>	City			State	Zip Code		Date Received		
9 Newport Ave		Shelton			СТ	06484	c	06/04/201	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution asso		1.	Yes	
Business Representative		New Eng Carpente	lland Regional Counc ers	cil of		fundraising event listed  If yes, list Event # 0	in Section .		No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 <sup>-</sup>	res x	•		:	\$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Burke	William				Cash Money	y Order X Persona Credit/L	Check Debit Card	0293		Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
245 Unquowa Rd Apt 50		Fairfield			СТ	06824-5069	C	06/04/201	0	
Principal Occupation		Name of Er	mployer			Is this contribution asso fundraising event listed		1.	Yes	
Attorney		Self				If yes, list Event # 0			No	
Is contributor a principal of a state contractorstate contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	obyist?	Aggre	egate Contrib	utions \$25.00	\$25.00
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
Strand	C.J.				X Cash Money	y Order Persona Credit/I	Check Debit Card	0299		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
221 Main St Apt A2		Farmingt	on		СТ	06032	C	06/04/201	0	
Principal Occupation		Name of Er				Is this contribution asso fundraising event listed		J1?	Yes	
Clerk		State of	Connecticut			If yes, list Event # 0			No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	•
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		:	\$20.00	\$20.00
government the contract is with:  Last Name	First Name	Executive	Legislative	I <sub>MI</sub>	I	contribution:	<u> </u>	1	"	
Black	Shirley			MI	Cash	x Persona	Check Debit Card	Contributi 0307	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
301 Tremont St Apt 3		New Brita	ain		СТ	06051-1120	C	06/04/201	0	
Principal Occupation		Name of Er	mployer			Is this contribution asso		1.7	Yes	
Retired		None				fundraising event listed  If yes, list Event # 0			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	st, spouse, or	Aggre	egate Contrib	utions	ł
state contractor? Is yes, indicate which branch or branches of				_	child of a lob	-		-	\$25.00	\$25.00
government the contract is with:	Ц	Executive	Legislative	Y	res x	No				

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE FILING DU												
Jepsen 2010												
		B. Itemized Contri	butions	s from	Individu	ials						
Last Name	First Name		M	ИI	Method of	contribution:		Contributi	on ID#	Amount of		
Vayer	Paul				Cash Money	Order Rersonal C		0308		Contribution		
Residential Street Address		City			State	Zip Code	D	ate Received				
222 Overlook Ave		New Britain			СТ	06053	0	6/04/201	0			
Principal Occupation Attorney		Name of Employer Information Requested				Is this contribution associ fundraising event listed in If yes, list Event # 06		<sub>J1?</sub>	Yes No			
Is contributor a principal of a state contractor	or prospective	Yes X No	Is	s contribu	itor a lobbyist	. spouse, or	Aggre	egate Contrib	utions			
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative			child of a lob	byist?	Aggic	-	\$50.00	\$50.00		
Last Name	First Name		M			contribution:		Contributi	on ID#	Amount of		
Jacobs	Henry		E		Cash Money	Order Personal C		0310		Contribution		
Residential Street Address		City			State	Zip Code	D	ate Received	l			
24 Huntington Dr		West Hartford			СТ	06117		06/04/201	0			
Principal Occupation  Doctor/Lawyer		Name of Employer Self				Is this contribution association fundraising event listed in If yes, list Event # 06		<sub>J1?</sub>	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No			ttor a lobbyist	byist?	Aggre	egate Contribi	utions 100.00	\$100.00		
Last Name	First Name		М	ИΙ	Method of	contribution:	•	Contributi	on ID#	Amount of		
Centeno	Rolando				Cash Money	V Order		0313		Contribution		
Residential Street Address		City			State	Zip Code		ate Received				
289 Slater Rd		New Britain			СТ	06053-3444		06/04/201				
Principal Occupation Paraprofessional Autism Class		Name of Employer  Consolidated School Dist Britain	rict of N	New		Is this contribution association fundraising event listed in If yes, list Event # 06	n Section .	J1?	Yes No			
Is contributor a principal of a state contractor	or prospective	Yes X No			itor a lobbyist		Aggre	egate Contrib	utions			
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative	de	ependent o	child of a lob	•		:	\$25.00	\$25.00		
Last Name	First Name		M	ИI		contribution:		Contributi	on ID#	Amount of		
Emmel	David				Cash Money	Order Rersonal C		0318		Contribution		
Residential Street Address	•	City			State	Zip Code	D	ate Received				
28 Henderson Rd		Avon			СТ	06001	0	6/04/201	0			
Principal Occupation		Name of Employer				Is this contribution associ fundraising event listed in		J1?	Yes			
Physician		Self				If yes, list Event # 06			No			
Is contributor a principal of a state contractorstate contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No			tor a lobbyist	byist?	Aggre	egate Contribu	utions 100.00	\$100.00		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribut	ions fron	Individu	ıals		•		
Last Name Catanzaro	First Name Paul		MI	Cash	contribution:    X   Personal Cl		Contribution	n ID#	Amount of Contribution
Residential Street Address 250 Hillhurst Ave		City New Britain		State CT	Zip Code 06053-2622		te Received 5/04/2010		
Principal Occupation Groundskeeper		Name of Employer City of New Britain			Is this contribution associa fundraising event listed in If yes, list Event # 060		? <u>—</u>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	ate Contributi	ions 50.00	\$50.00
Last Name Thompson	First Name Michael		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb		Contribution	n ID#	Amount of Contribution
Residential Street Address 7 Cedar Ln		City Unionville		State CT	Zip Code 06085		te Received 5/04/2010		
Principal Occupation Park Foreperson		Name of Employer City of New Britain		•	Is this contribution associa fundraising event listed in If yes, list Event # 060		? <u> </u>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	ate Contributi \$7	ions 75.00	\$75.00
Last Name Matulis	First Name John		MI	Cash	contribution:  X Personal Cl  y Order Credit/Deb		Contribution	n ID#	Amount of Contribution
Residential Street Address 260 Beckley Rd		City Berlin		State CT	Zip Code 06037		te Received 5/04/2010		
Principal Occupation Attorney		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		, Ц	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	ate Contributi	ions 00.00	\$100.00
Last Name Friedle	First Name Gary		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb		Contribution	n ID#	Amount of Contribution
Residential Street Address 78 Pheasant Run		City Avon		State CT	Zip Code 06001		te Received 5/04/2010		
Principal Occupation Attorney		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # 060	Section J1	? <u> </u>	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	ate Contributi	ions 50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contribut	ions fron	ı Individu	uals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Melley	Diane			Α	Cash Money	y Order X Personal  Credit/D	Check ebit Card	0339		Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
55 Brookside Rd		New Brita	ain		СТ	06052	c	06/04/201	0	
Principal Occupation		Name of Er	nployer		•	Is this contribution asso		1.	Yes	
Consultant		Dullumie	e & Co.			fundraising event listed  If yes, list Event # 0	in Section . 6022010		No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 °—	child of a lob	,		\$	100.00	\$100.00
government the contract is with:  Last Name	First Name	Executive	Legislative	I <sub>MI</sub>	1	contribution:		T		
Durst	Matthew			IVII	Cash	x Personal	Check	Contributi 0342	on ID#	Amount of Contribution
					Money	y Order Credit/D	ebit Card	0342		
Residential Street Address		City			State	Zip Code		Date Received		
20 Woodcliff Dr		Simsbury			СТ	06070		06/04/201		
Principal Occupation PT		Name of Er	nployer nabilitation, LLC			Is this contribution asso fundraising event listed		J1?	Yes	
7 1		15111161		_		If yes, list Event # 0	6022010	<u>)b</u> L	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$	100.00	\$100.00
government the contract is with:  Last Name	First Name			MI		contribution:		Contributi	on ID#	
Kogen	Betty				Cash	X Personal	Check	0296	on id #	Amount of Contribution
		ī			Money	y Order Credit/D	ebit Card			
Residential Street Address  35 Bridge St		City Westport			State CT	Zip Code 06880		Date Received 06/04/201		
		<u> </u>			Ci	Is this contribution asso				
Principal Occupation  Information Requested		Name of Er Informat	nployer tion Requested			fundraising event listed	in Section	<sub>J1?</sub>	Yes	
				1		If yes, list Event # 0	6022010	<u>)a</u> L	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob		Aggre	egate Contrib		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Î		No		:	\$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID #	Amount of
Dzwonkowski	Edward				Cash Money	y Order Personal Credit/D	Check ebit Card	0344		Contribution
Residential Street Address	•	City			State	Zip Code	Г	Date Received		
114 Hillcrest Ave		New Brita	ain		СТ	06053	C	06/04/201	0	
Principal Occupation		Name of Er	mployer			Is this contribution asso		1.7	Yes	
Administrator of Elections		City of N	lew Britain			fundraising event listed  If yes, list Event # 0			No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	st, spouse, or	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of				dependent	child of a lob	obyist?	1-55		\$50.00	\$50.00
government the contract is with:		Executive	Legislative		res X	No				

		I. MONETARY I	RECEIPT	ΓS (Sectio	n A-I)			
NAME OF COMMITTEE							FII	LING DUE DATE
Jepsen 2010								
		B. Itemized Contrib	outions fro	m Individu	ıals			
Last Name Powers	First Name Patricia		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck	Contribution ID	# Amount of Contribution
Residential Street Address 984 S Pine Creek Rd		City Fairfield		State CT	Zip Code 06824		Received 04/2010	
Principal Occupation Retired		Name of Employer None		•	Is this contribution association fundraising event listed in If yes, list Event # 060		X Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative		ributor a lobbyis ent child of a lob Yes	byist?	Aggregate	e Contributions \$25.0	
Last Name Sullivan	First Name James		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck	Contribution ID	# Amount of Contribution
Residential Street Address 41 High Farms Rd		City West Hartford		State CT	Zip Code 06107		Received 04/2010	
Principal Occupation Attorney		Name of Employer Howard, Kohn, Sprague 8 LLC	k Fitzgerald	,	Is this contribution associa fundraising event listed in If yes, list Event # 060		X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative		ributor a lobbyis ent child of a lob Yes	byist?	Aggregate	e Contributions \$100.0	
Last Name Carbray	First Name Richard		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0	Contribution ID	# Amount of Contribution
Residential Street Address 18 Foxbriar Ln		City Rocky Hill	-	State CT	Zip Code 06067		Received 04/2010	
Principal Occupation Pharmacist		Name of Employer Apex Pharmacy			Is this contribution associated fundraising event listed in If yes, list Event # 060		X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative		ributor a lobbyis ent child of a lob Yes	byist?	Aggregate	e Contributions \$100.0	
Last Name Pfeifer	First Name Conor		МІ	Cash	contribution:    X   Personal C  y Order   Credit/Deb	heck	Contribution ID	# Amount of Contribution
Residential Street Address 670 S Pine Creek Rd		City Fairfield		State CT	Zip Code 06824		Received 04/2010	
Principal Occupation Student		Name of Employer Himes for Congress		•	Is this contribution associa fundraising event listed in If yes, list Event # 060	Section J1?	X Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative		ributor a lobbyis ent child of a lob Yes	byist?	Aggregate	e Contributions \$20.0	

		I. MONETARY RI	ECEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							1	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribu	tions fron	ı Individu	ıals		·		
Last Name Geragosian	First Name Audrey		MI H	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution	ID#	Amount of Contribution
Residential Street Address 39 Pendleton Rd		City New Britain		State CT	Zip Code 06053-2105		te Received /04/2010		
Principal Occupation  Director of Communications		Name of Employer CT State Medical Society		•	Is this contribution association fundraising event listed in If yes, list Event # 060		? <u> </u>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio \$50	ons 0.00	\$50.00
Last Name Geragosian	First Name John		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution	ID#	Amount of Contribution
Residential Street Address 39 Pendleton Rd		City New Britain		State CT	Zip Code 06053-2105		te Received /04/2010		
Principal Occupation Realtor		Name of Employer Self		•	Is this contribution association fundraising event listed in If yes, list Event # 060		? ഥ □.		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$60.00
Last Name McQuillan	First Name Martin		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution	ID#	Amount of Contribution
Residential Street Address 18 Sherry Ln		City Kensington		State CT	Zip Code 06037		te Received /04/2010		
Principal Occupation Attorney		Name of Employer Januszewski, McQuillan & D	eNigria		Is this contribution associa fundraising event listed in If yes, list Event # 060		11.		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	bbyist?	Aggrega	ate Contributio	ons 0.00	\$100.00
Last Name Valengavich	First Name John		MI	Cash	contribution:    X   Personal C  y Order   Credit/Deb		Contribution	ID#	Amount of Contribution
Residential Street Address 15 Parkmore St		City New Britain		State CT	Zip Code 06051-3357		te Received /04/2010		
Principal Occupation Retired		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event # 060	Section J1	? <u> </u>		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$80.00

		I. MO	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itei	mized Contributi	ons fron	Individu	ıals				
Last Name Sauer	First Name Kathleen			MI M	Cash	contribution:  X Personal C  y Order Credit/Deb		Contribution 0260	ı ID#	Amount of Contribution
Residential Street Address 55 Birch Hill Dr		City New Britai	n		State CT	Zip Code 06052		Pate Received		
Principal Occupation  None		Name of Emp None	oloyer			Is this contribution association fundraising event listed in If yes, list Event # 060	Section J			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribution \$5	ions 50.00	\$50.00
Last Name Masselli	First Name Mark			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0320	ı ID#	Amount of Contribution
Residential Street Address 110 Washington St		City Middletowr	n		State CT	Zip Code 06457		Pate Received 06/04/2010		
Principal Occupation  Executive		Name of Emp	oloyer		•	Is this contribution association fundraising event listed in If yes, list Event # 060				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi	ions 00.00	\$100.00
Last Name Kochol	First Name Peter			MI J	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0300	ı ID#	Amount of Contribution
Residential Street Address 97 Harrison St		City New Britai	n		State CT	Zip Code 06052		Pate Received 06/04/2010		
Principal Occupation Program Manager		Name of Emp CT Judicia	•			Is this contribution association fundraising event listed in If yes, list Event # 060	Section J			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribution \$5	ions 50.00	\$50.00
Last Name Schaffman	First Name Susan			MI	Cash	contribution:    X   Personal C		Contribution 0327	ı ID#	Amount of Contribution
Residential Street Address		City	£d		State	Zip Code		Pate Received		
26 Riggs Ave Principal Occupation Marketing Consultant		West Hartf Name of Emp Self			СТ	Is this contribution associated fundraising event listed in If yes, list Event # 060	ated with	a x	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribution \$5	ions 50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Reynolds	Barbara				Cash Money	y Order		0288		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
20 Cannondale Rd		Weston			СТ	06883	0	6/04/201	0	
Principal Occupation Homemaker		Name of Er None	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 06		<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribu	utions \$75.00	\$75.00
Last Name	First Name			MI	Method of	contribution:	•	Contribution	on ID #	Amount of
Wallington	Dale				X Cash Money	Personal C  y Order Credit/De		0298		Contribution
Residential Street Address		City		-	State	Zip Code	D	ate Received		
50 Beechtree Ln		West Har	tford		СТ	06107	0	6/04/201	0	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ		1^	Yes	
Physician		Resiliano	e Healthcare, LLC			fundraising event listed in  If yes, list Event # 06			No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob 'es	byist?	Aggre	egate Contribu \$:	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Aranow	Michael				Cash Money	y Order X Personal C		0316		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
36 Braintree Dr		West Har	tford		СТ	06117	0	6/04/201	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ		1^	Yes	
Physician		Universit Center	ty of Connecticut Hea	alth		fundraising event listed in  If yes, list Event # 06			No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 <sup>^</sup>	child of a lob	*		\$1	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Feigenbaum	Seth				Cash Money	y Order Personal C		0338		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
23 Peaslee HI		West Har	tford		СТ	06117	0	6/04/201	0	
Principal Occupation		Name of Er	mployer			Is this contribution associ		1^	Yes	
Lawyer		City of N	lew Britain			fundraising event listed in  If yes, list Event # 06		I	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	dependent	child of a lob	-		\$:	100.00	\$100.00
government the contract is with:		плесинуе	Legislative	·	<u></u>	110	1			l

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ito	emized Contributi	ons from	Individu	ıals				
Last Name First	t Name			MI	Method of	contribution:		Contributi	on ID #	Amount of
Pillsbury	ephen				Cash Money	y Order X Personal C		0340		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
26 Sturbridge Ln		Avon			CT	06001		6/04/201		
Principal Occupation		Name of En	nnlover			Is this contribution associ	ated with	а Гх	Yes	İ
MD			ll Medical Center			fundraising event listed in		11?	No	
				,		If yes, list Event # 06	022010	<u>ıb</u> L	_ NO	1
Is contributor a principal of a state contractor or pros state contractor?	spective		Yes X No		utor a lobbyist		Aggre	gate Contribu	utions	
Is yes, indicate which branch or branches of government the contract is with:	П	Executive	Legislative	1 °—	es x	•		\$:	100.00	\$100.00
1	t Name			MI		contribution:		Contribution	on ID #	
Freedman Joe				"	Cash	X Personal C	Check	0264	on ID#	Amount of Contribution
					Money	y Order Credit/De	bit Card	0204		
Residential Street Address		City			State	Zip Code		ate Received		
26 Brookdale Dr		Stamford			СТ	06903	0	6/04/201	0	ļ
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in		J1?	Yes	
Real Estate Manager		Garden F	Homes Mgt. Corp.			If yes, list Event #		х	No	
Is contributor a principal of a state contractor or pro-	spective		Yes X No	Is contrib	utor a lobbyist	t, spouse, or	Aggre	gate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of	П				child of a lob	-		\$:	100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative	L Y	res X	No		1		
	t Name			MI	Method of o	contribution:	heck	Contributi	on ID#	Amount of
Hendel   Pat	ricia				_	y Order Credit/De		0268		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
127 Parkway South		New Lond	don		СТ	06320	0	6/04/201	0	
Principal Occupation		Name of En	nployer		•	Is this contribution associ			Yes	
Retired		None				fundraising event listed in If yes, list Event #	1 Section .	x	No	
Is contributor a principal of a state contractor or pro-	snective		Yes X No	Is contrib	utor a lobbyist	t enquee or	Τ.	. 6 . 7		
state contractor?	spective		Yes No		child of a lob		Aggre	gate Contribu	\$50.00	\$50.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	es x	No				φ30.00
Last Name First	t Name			MI	Method of	contribution:		Contributi	on ID #	Amount of
Cocozza	uis				Cash Money	y Order Registration   X   Personal C		0294		Contribution
Residential Street Address		City		1	State	Zip Code		ate Received		
37 Tori Ln		Brookfield	d		CT	06804		6/04/201		
Principal Occupation		Name of En	nnlover			Is this contribution associ	ated with	a T	Yes	İ
Business Representative			land Regional Counc	cil of		fundraising event listed in	n Section .		No No	
		Carpente		1		If yes, list Event # 06	022010	<u>la</u> L	<b>_</b> 110	
Is contributor a principal of a state contractor or pros state contractor?	spective		Yes X No		utor a lobbyist	-	Aggre	gate Contribu		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	П ч		-		5	\$25.00	\$25.00
go realiment the contract 15 with.										<u> </u>

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FI	ILING	DUE DATE	
Jepsen 2010										
		B. Itemized Contrib	utions fro	n Individu	ıals					
Last Name Cunningham	First Name Virginia		MI C	Cash	contribution:	heck C	Contribution ID	O#	Amount of Contribution	
Residential Street Address 7 North Ave		City Weston		State CT	Zip Code 06883		Received 04/2010			
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 060		X Ye			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggregate	te Contributions \$100.		\$100.00	
Last Name Benjamin	First Name Adrienne		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck	Contribution ID	D#	Amount of Contribution	
Residential Street Address 288 Steele St		City New Britain		State CT	Zip Code 06052		Received 04/2010			
Principal Occupation Clinical Social Worker		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event # 060		X Ye			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggregate	te Contributions \$40.		\$40.00	
Last Name Greenfield	First Name Jeffrey		MI	Cash	contribution:    X   Personal C	heck C	Contribution ID	O#	Amount of Contribution	
Residential Street Address 111 Apple HI		City Newington		State CT	Zip Code 06111		Received 04/2010			
Principal Occupation Legislative Staff		Name of Employer State of Connecticut			Is this contribution associa fundraising event listed in If yes, list Event # 060		X Ye			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggregate	te Contributions \$100.		\$100.00	
Last Name Bielinski	First Name Suzanne		MI	Cash	contribution:    X   Personal Credit/Deb	heck C	Contribution ID	D#	Amount of Contribution	
Residential Street Address 544 Corbin Ave		City New Britain		State CT	Zip Code 06052		Received 04/2010			
Principal Occupation  Contract Negotiator		Name of Employer CAGNA Ins.			Is this contribution associa fundraising event listed in If yes, list Event # 060	Section J1?	X Ye			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggregate	te Contributions \$50.		\$50.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE								FILING	G DUE DATE		
Jepsen 2010											
B. Itemized Contributions from Individuals											
Last Name O'Brien	First Name Timothy		MI	Cash	contribution:    X   Personal C		Contribution	n ID#	Amount of Contribution		
Residential Street Address 74 Monroe St		City New Britain		State CT	Zip Code 06051		te Received 5/04/2010				
Principal Occupation Legislator		Name of Employer State of Connecticut		•	Is this contribution associa fundraising event listed in If yes, list Event # 060			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggreg	ate Contributi \$2	ions 20.00	\$20.00		
Last Name Brennan	First Name Timothy		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb		Contribution	n ID#	Amount of Contribution		
Residential Street Address 111 Garfield Rd		City West Hartford		State CT	Zip Code 06107		te Received 5/04/2010				
Principal Occupation Attorney		Name of Employer The Hartford Financial Service	ces Group	•	Is this contribution associa fundraising event listed in If yes, list Event # 060			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggreg	ate Contributi	ions 00.00	\$100.00		
Last Name Puzzo	First Name Elaine		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0325	ı ID#	Amount of Contribution		
Residential Street Address 53 Lake Dr		City East Hampton		State CT	Zip Code 06424		te Received 5/04/2010				
Principal Occupation Retired		Name of Employer None			Is this contribution associal fundraising event listed in If yes, list Event # 060			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	ate Contributi \$5	ions 50.00	\$50.00		
Last Name Puzzo	First Name Paul		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb		Contribution	ı ID#	Amount of Contribution		
Residential Street Address 53 Lake Dr		City East Hampton		State CT	Zip Code 06424		te Received 5/04/2010				
Principal Occupation Admin		Name of Employer Conn Renewal			Is this contribution associa fundraising event listed in If yes, list Event # 060	Section J1		Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggreg	ate Contributi	ions 50.00	\$50.00		

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING DU											
Jepsen 2010											
		B. It	emized Contributi	ons fron	Individu	uals					
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of	
Feltman	Arthur				Cash Money	y Order X Persona Credit/E	Check bebit Card	0324		Contribution	
Residential Street Address		City			State	Zip Code	Е	Date Received			
596 Broadview Ter		Hartford			СТ	06106	C	06/04/201	0		
Principal Occupation		Name of Er	mployer		•	Is this contribution asso		1^	Yes		
Educator		Parent A	cademy			fundraising event listed  If yes, list Event # 0	in Section . 6022010		No		
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contribu	utions	Ī	
state contractor? Is yes, indicate which branch or branches of		F			child of a lob	•		\$3	100.00	\$100.00	
government the contract is with:		Executive	Legislative	<del>                                     </del>	1			1		<u> </u>	
Last Name Pudlin	First Name David			MI	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution	
. dam.	Javia					y Order Credit/E	ebit Card	0306		Contribution	
Residential Street Address		City			State	Zip Code	Е	Date Received			
407 Monroe St		New Brita	ain		СТ	06052	С	06/04/201	0		
Principal Occupation		Name of Er	mployer			Is this contribution asso fundraising event listed		1^	Yes		
Consultant		Self				If yes, list Event # 0			No		
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis	-	Aggre	egate Contribu	utions		
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$3	100.00	\$100.00	
government the contract is with:		Executive	Legislative	<del>                                     </del>				1		<u> </u>	
Last Name Cunningham	First Name John			MI	Method of Cash	contribution:	Check	Contribution	on ID#	Amount of Contribution	
					_	y Order Credit/E	ebit Card	0295		Commodium	
Residential Street Address		City			State	Zip Code	Е	Date Received			
26 Honey Ln		Sandy Ho	ook		СТ	06482	C	06/04/201	0		
Principal Occupation		Name of Er	nployer			Is this contribution asso fundraising event listed		1^	Yes		
Business Representative		New Eng Carpente	land Regional Cound ers	cil of		If yes, list Event # 0			No		
Is contributor a principal of a state contractor	or prospective	- Carpone	Yes X No	Is contrib	utor a lobbyis	st. spouse, or	Aggre	egate Contribu	utione		
state contractor? Is yes, indicate which branch or branches of	_		les like		child of a lob	obyist?	Aggit	-	100.00	\$100.00	
government the contract is with:	Ш	Executive	Legislative	L 1	res x	No		·			
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of	
Lopes	Richard				Cash Money	y Order Persona  Credit/E	Check bebit Card	0337		Contribution	
Residential Street Address		City			State	Zip Code	Г	Date Received			
208 S Mountain Dr		New Brita	ain		СТ	06052	С	06/04/201	0		
Principal Occupation		Name of Er				Is this contribution asso fundraising event listed		1^	Yes		
Information Requested		State of	Connecticut			If yes, list Event # 0			No		
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	st, spouse, or	Aggra	egate Contribu	utions	†	
state contractor? Is yes, indicate which branch or branches of			_	dependent	child of a lob	obyist?	1.551		\$50.00	\$50.00	
government the contract is with:	Ш	Executive	Legislative	L 1	res X	No					

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING I										
Jepsen 2010										
		B. Itemized Contrib	utions fror	n Individu	ıals		•			
Last Name Passaro	First Name Cara		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	0341	tion ID#	Amount of Contribution		
Residential Street Address 70 September Ln		City Shelton		State CT	Zip Code 06484	Date Receive 06/04/20				
Principal Occupation Policy Analyst		Name of Employer State of Connecticut			Is this contribution associal fundraising event listed in If yes, list Event # 060	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggregate Contri	butions \$50.00	\$50.00		
Last Name Cohen	First Name Bruce		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	0269	tion ID#	Amount of Contribution		
Residential Street Address 7 Perkely Ln		City Riverside		State CT	Zip Code 06878	Date Receive 06/04/20				
Principal Occupation  Lawyer		Name of Employer Fogarty, Cohen et al		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00		
Last Name Brachfeld	First Name Kenneth		MI	Cash	contribution:    X   Personal C	0287	tion ID#	Amount of Contribution		
Residential Street Address 2493 Redding Rd		City Fairfield		State CT	Zip Code 06824	Date Receive 06/04/20				
Principal Occupation Self		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # 060	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$50.00	\$50.00		
Last Name Vahey	First Name Cristin		MI M	Cash	contribution:  X Personal City Order Credit/Deb	heck 0280	tion ID#	Amount of Contribution		
Residential Street Address 1625 Melville Ave		City Fairfield		State CT	Zip Code 06825-2044	Date Receive 06/04/20				
Principal Occupation  Mom/Social Worker		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event # 060	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$50.00	\$50.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Steeneck-Luflecho	Sherri				Cash Money	y Order X Personal Credit/De		0284		Contribution
Residential Street Address		City		-	State	Zip Code	D	ate Received		
166 Rock Ridge Rd		Fairfield			СТ	06824	0	6/04/2010	0	
Principal Occupation Realtor		Name of Er Self	nployer			Is this contribution assoc fundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	ations \$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:	•	Contribution	on ID #	Amount of
Tessier	Robert				Cash Money	y Order Personal Credit/De		0323		Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
32 Griswold St		Hartford			СТ	06114	0	6/04/2010	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution assoc	iated with	a x	Yes	Ī
Executive Director		CT Coali	tion T-H Health Fund	ls		fundraising event listed in  If yes, list Event # 06		<sup>11?</sup>	No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu	itions	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Jannotta	Alfonso				Cash Money	y Order X Personal Credit/De		0271		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
70 Laurelbrook Ln		Fairfield			СТ	06824	0	6/04/2010	0	
Principal Occupation		Name of E	nployer		•	Is this contribution assoc		1^	Yes	
Retired		None				fundraising event listed in  If yes, list Event # 06			No	
To a section to a section to the sec							1			
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob		Aggre	gate Contribu	utions 100.00	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	es x	No		<b>\$</b> .	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	•	Contribution	on ID #	Amount of
Jannotta	Jeannette	:			Cash Money	y Order Registration X Personal Credit/De		0272		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
70 Laurelbrook Ln		Fairfield			СТ	06824	0	6/04/2010	0	
Principal Occupation		Name of E	mployer		-	Is this contribution assoc		1^	Yes	
Retired		None				fundraising event listed in  If yes, list Event # 06		<sup>11?</sup>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		Б 2		dependent	child of a lob	-		\$1	100.00	\$100.00
government the contract is with:	Ц	Executive	Legislative	ТП	es	NO				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Dubrosky	Thomas				Cash Money	y Order X Personal C		0278		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
131 Fairfield Pl		Fairfield			СТ	06824-5603	0	6/04/2010	0	
Principal Occupation		Name of E	mployer		•	Is this contribution associ		1^	Yes	ĺ
Sales		Boehring	ger-Ingelheim			fundraising event listed in  If yes, list Event # 06	022010		No	
Is contributor a principal of a state contractor	or prospective	-	Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	I '-	child of a lob	*		9	\$50.00	\$50.00
government the contract is with:	<u></u>	Executive	Legislative	+ =	1		<u> </u>	1		1
Last Name Hinch	First Name Karen			MI	Method of Cash	contribution:  X Personal 0	Check	Contributio	on ID #	Amount of Contribution
					Money	y Order Credit/De	bit Card	0292		
Residential Street Address		City			State	Zip Code	D	ate Received		
21 Middlebrook Dr		Fairfield			СТ	06824-3008	0	6/04/2010	0	
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		1^	Yes	
Bookkeeper		Vogel &	Co.			I -	022010		No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	it, spouse, or	Aggre	gate Contribu	utions	†
state contractor? Is yes, indicate which branch or branches of				1 —	child of a lob	•			\$25.00	\$25.00
government the contract is with:		Executive	Legislative	'	res x	No	<u> </u>	1		
Last Name Andre	First Name Marc			MI	Method of Cash	contribution:	Theck	Contribution	on ID#	Amount of
Allure	Marc				_	y Order Credit/De		0283		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
130 Lakeview Dr		Fairfield			СТ	06825	0	6/04/2010	0	1
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		1^	Yes	
Architect/Real Estate Developer		Self				If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	ıtions	†
state contractor? Is yes, indicate which branch or branches of			_	I	child of a lob	•		-	\$20.00	\$20.00
government the contract is with:		Executive	Legislative	'	res X	No	<u> </u>	1		
Last Name	First Name			MI		contribution:	Theek	Contribution	on ID#	Amount of
Andre	Karina			D	Cash Money	y Order Credit/De		0289		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
130 Lakeview Dr		Fairfield			СТ	06825	0	6/04/2010	0	1
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		1^	Yes	
Clinician		Carter R	esources			If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of	_		_	dependent	child of a lob	bbyist?		-	\$20.00	\$20.00
government the contract is with:	Ш	Executive	Legislative	\	res X	No				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Ito	emized Contributi	ons from	ı Individu	ıals				
Last Name Hughes	First Name James			MI	Cash	contribution:  X Personal C y Order Credit/Det		Contribution 0273	ı ID#	Amount of Contribution
Residential Street Address 166 Lalley Blvd		City Fairfield			State CT	Zip Code 06824		Pate Received 06/04/2010		
Principal Occupation Attorney		Name of En Law Office	nployer ces of James M. Hugl	nes		Is this contribution association fundraising event listed in If yes, list Event # 060	Section J	J1? 🗀	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut	ions 25.00	\$25.00
Last Name Gerratana	First Name Jessica			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0304	n ID#	Amount of Contribution
Residential Street Address 111 Brookside Rd		City New Brita	in		State CT	Zip Code 06052		ate Received 6/04/2010		
Principal Occupation  Design/Print		Name of En	nployer		•	Is this contribution association fundraising event listed in If yes, list Event # 060		J1? 🗀	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribut	ions 50.00	\$50.00
Last Name Kantrowitz	First Name Jonathan			MI	Cash	contribution:  X Personal C y Order Credit/Det		Contribution 0275	ı ID#	Amount of Contribution
Residential Street Address 877 Burr St		City Fairfield		•	State CT	Zip Code 06824-7112		Pate Received		
Principal Occupation CEO		Name of En Queue Ir			•	Is this contribution association fundraising event listed in If yes, list Event # 060	Section J	J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut	ions 36.00	\$36.00
Last Name Biondino	First Name Robert			MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0343	n ID#	Amount of Contribution
Residential Street Address 197 Cheshire Rd		City Wallingfo	rd		State CT	Zip Code 06492		Pate Received 06/04/2010		
Principal Occupation Orthop Surgeon		Name of En	nployer rthopaedics			Is this contribution association fundraising event listed in If yes, list Event # 060			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut	ions 00.00	\$200.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Klotz	Rosemary	′			Cash Money	y Order Registration   X Personal (		0331		Contribution
Residential Street Address		City			State	Zip Code		ate Received		•
95 Harrison St		New Brita	ain		CT	06052-1228		6/04/2010		
Principal Occupation		Name of E	mployer			Is this contribution assoc	iated with	а Гх	Yes	†
Team Lead		KRA Cor				fundraising event listed in	n Section I 022010	J1?	No	
				_			1	<u>,,,                                  </u>		<u> </u>
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob		Aggre	egate Contribu		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No		S	\$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:	•	Contribution	on ID #	Amount of
Flinter	Margaret				Cash	X Personal		0319		Contribution
		1			<del>                                     </del>	y Order Credit/De		<u> </u>		
Residential Street Address 52 Maple Ave W		City Higganur	n		State CT	Zip Code 06441		ate Received 6/04/2010		
Principal Occupation		<del>                                     </del>				Is this contribution assoc				l
Healthcare		Name of E	прюуег			fundraising event listed in	n Section .	<sup>J1?</sup>	Yes	
						If yes, list Event # 06	022010	) <u>b</u>	No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob		Aggre	egate Contribu	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	-		\$1	100.00	\$100.00
Last Name	First Name			MI		contribution:		Contribution	on ID #	
Mullins	Thomas				Cash	X Personal	Check	0334	OII ID#	Amount of Contribution
		1			Money	y Order Credit/De	bit Card			
Residential Street Address		City			State	Zip Code		ate Received		
2 Pearl St		Farmingt			СТ	06032		6/04/2010		<u> </u>
Principal Occupation		Name of E	mployer			Is this contribution assoc fundraising event listed is		J1?	Yes	
Attorney		Jen				If yes, list Event # 06	022010	<u>)b</u> L	No	
Is contributor a principal of a state contractor	or prospective	-	Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 <sup>-</sup>	child of a lob	•		\$1	100.00	\$100.00
government the contract is with:	le: .x	Executive	Legislative	+ -	1			1		<u> </u>
Last Name Tetreau	First Name Michael			MI	Method of Cash	contribution:  X Personal	Check	Contributio	on ID #	Amount of Contribution
					_	y Order Credit/De	bit Card	0282		
Residential Street Address		City			State	Zip Code	D	ate Received		
5 Pleszko Pl		Fairfield			СТ	06824	0	6/04/2010	0	
Principal Occupation		Name of E				Is this contribution assoc fundraising event listed in		1^	Yes	
Realtor		William	Raveis Real Estate			If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	it, spouse, or	Aggre	egate Contribu	ıtions	†
state contractor? Is yes, indicate which branch or branches of			_	dependent	child of a lob	bbyist?	1.5510	-	\$50.00	\$50.00
government the contract is with:	Ш	Executive	Legislative	\ \ \ \ \	res X	No				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Walsh	Nancy				Cash Money	Personal C		0586		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
349 Main St		Old Sayb	rook		CT	06475-2366		6/04/2010		
Principal Occupation retired		Name of Er	mployer		<b>!</b>	Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
				1			1			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	tions \$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Pfeifer	Devon				Cash Money	y Order		0279	,	Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
670 S Pine Creek Rd		Fairfield			СТ	06824-6326	0	6/04/2010	0	
Principal Occupation		Name of E	mployer		•	Is this contribution associ		1^	Yes	
None		None				fundraising event listed in  If yes, list Event # 06	022010		No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	itions \$25.00	\$25.00
government the contract is with:		Executive	Legislative	+ -	1			1		<u> </u>
Last Name Heller	First Name Harriett			MI	Cash	contribution:  X Personal C  y Order Credit/De		Contribution 0290	on ID#	Amount of Contribution
Residential Street Address	<u> </u>	City			State	Zip Code		ate Received		
126 Valley Forge Rd		Weston			СТ	06883		6/04/2010	0	
Principal Occupation		Name of E	mployer		•	Is this contribution associ		1^	Yes	İ
Retired		None				fundraising event listed in If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t snouse or	1	il	-+:	<u> </u>
state contractor?  Is yes, indicate which branch or branches of	or prospective		_	dependent	child of a lob	byist?	Aggre	gate Contribu	\$25.00	\$25.00
government the contract is with:		Executive	Legislative	+ -	res X			1		
Last Name Defronzo	First Name Donald			MI	Method of Cash	contribution:	Check	Contributio	on ID #	Amount of Contribution
Delitorizo	Donala					y Order Credit/De		0302		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
9 Bedford St		New Brit	ain		СТ	06051-1601	0	6/04/2010	)	
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		1^	Yes	
Legislator		State of	Connecticut			If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of		ъ .	П	dependent	child of a lob	-		-	100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative		es	N0				1

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name Geragosian	First Name Harriet			MI	Cash	contribution:    X   Personal C		Contribution 0321	ID#	Amount of Contribution
Residential Street Address 33 Recano Rd		City New Brita	ain		State CT	Zip Code 06053-2546		Pate Received 06/04/2010		
Principal Occupation  Real Estate Broker		Name of Er Self	mployer		-	Is this contribution associ- fundraising event listed in If yes, list Event # 061	Section J			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributio	ons 50.00	\$50.00
Last Name Tyszka	First Name William			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0390	ID#	Amount of Contribution
Residential Street Address 12 Briarwood Dr		City Simsbury	/		State CT	Zip Code 06070-1104		Pate Received 06/05/2010		
Principal Occupation Retired		Name of Er None	mployer		•	Is this contribution associ- fundraising event listed in If yes, list Event # 061				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribution \$7	ons 75.00	\$75.00
Last Name Buck	First Name Christine			MI S	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0372	ID#	Amount of Contribution
Residential Street Address 358 West St		City Plantsvill	e		State CT	Zip Code 06479-1162		Pate Received 06/05/2010		L
Principal Occupation  Investigator		Name of Er State of	mployer Connecticut		•	Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribution \$5	ons 50.00	\$50.00
Last Name Grudberg	First Name Ira			MI B	Cash	contribution:    X   Personal C		Contribution 0352	ID#	Amount of Contribution
Residential Street Address 14 Lorraine Dr		City Woodbrid	dge		State CT	Zip Code 06525		Pate Received 16/05/2010		
Principal Occupation  Lawyer		Name of En	mployer Grudberg, Belt, Dow	& Katz	·-	Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribution	ons 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Gillespie	Peter				Cash Money	y Order Registration   X Personal C		0346		Contribution
Residential Street Address	I	City			State	Zip Code		ate Received		
7 Woodcock Ln		Westport	:		СТ	06880-1036		6/05/2010		
Principal Occupation Attorney		Name of Er Self	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribu	utions	\$100.00
Last Name	First Name			MI	I	contribution:		Contributio	on ID #	
Raymes	Joyce			K	Cash	y Order Personal Credit/De		0377	3II I <i>D #</i>	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
83 Spoonville Rd		East Gra	nby		СТ	06026	0	6/05/2010	0	
Principal Occupation		Name of E	mployer		•	Is this contribution associ		1^	Yes	
Planner		NPS				fundraising event listed in  If yes, list Event # 06			No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	bbyist?	Aggre	egate Contribu	itions \$35.00	\$35.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Carey	Mary				Cash Money	y Order X Personal C		0396		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
11 Pinnacle Mountain Rd		Simsbury	<u>′</u>		СТ	06070	0	6/05/2010	)	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in		1^	Yes	
Lawyer		CIGNA				If yes, list Event # 06			No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	itions	\$100.00
Last Name	First Name			MI	I	contribution:		Contributio	on ID #	
Pena	David				Cash	y Order Personal Credit/De		0382	JII ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
11 Avalon Dr		Avon			СТ	06001-3539	0	6/05/2010	)	
Principal Occupation		Name of E	mployer		•	Is this contribution associ		1^	Yes	
Consultant		Self				fundraising event listed in  If yes, list Event # 06			No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	dependent	child of a lob	-		\$	\$25.00	\$25.00
government the contract is with:		LACCULIVE	Legislative	<u> </u>	ت	*10	1			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Jepsen 2010											
B. Itemized Contributions from Individuals											
Last Name Houlihan	First Name Charles			MI	Cash	contribution:    X   Personal C		Contributi 0384	on ID#	Amount of Contribution	
Residential Street Address 2 Somerset Ln		City Simsbury			State CT	Zip Code 06070-1716		ate Received			
Principal Occupation Attorney		Name of Emp	ployer			Is this contribution associ fundraising event listed in If yes, list Event # 06		11? E	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contrib	utions \$50.00	\$50.00	
Last Name Colman	First Name Wanda			MI	Cash	contribution:  X Personal C  y Order Credit/De		Contributi 0375	on ID#	Amount of Contribution	
Residential Street Address 14 Main Street Ext		City Tariffville			State CT	Zip Code 06081		ate Received			
Principal Occupation  Speech/Language Pathologist		Name of Emp	ployer			Is this contribution associ fundraising event listed in If yes, list Event # 06		11? E	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contrib	utions \$35.00	\$35.00	
Last Name Bishop	First Name Vincent			MI	Cash	contribution:    X   Personal C		Contributi	on ID#	Amount of Contribution	
Residential Street Address  14 Main Street Ext		City Tariffville			State CT	Zip Code 06081		eate Received			
Principal Occupation Prop. Manager		Name of Emp Folly Farm				Is this contribution associ fundraising event listed in If yes, list Event # 06		11? E	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	utions \$45.00	\$45.00	
Last Name Esty	First Name Daniel			MI	Cash	contribution: Personal C y Order X Credit/De		Contributi 0568	on ID#	Amount of Contribution	
Residential Street Address 213 Preston Ter		City Cheshire			State CT	Zip Code 06410-3138		ate Received			
Principal Occupation Professor		Name of Emp				Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contrib	utions 100.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE								FILING	DUE DATE	
Jepsen 2010										
		B. Itemized Contributi	ions fron	ı Individu	ıals					
Last Name Borkowski	First Name Heidi		MI F	Cash	contribution:    X   Personal Characteristics   Personal Characteristics   Credit/Debit   Personal Characteristics   Personal Cha		Contribution 0360	ID#	Amount of Contribution	
Residential Street Address 8 Arbor Ct		City Bristol		State CT	Zip Code 06010		e Received /05/2010			
Principal Occupation  Executive Assistant		Name of Employer Collier Electrical Corp.		-	Is this contribution associate fundraising event listed in State If yes, list Event #			Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00	
Last Name Davis	First Name William		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0365	ID#	Amount of Contribution	
Residential Street Address 2 Biltmore Park		City Bloomfield		State CT	Zip Code 06002		e Received /05/2010			
Principal Occupation Attorney		Name of Employer RisCassi & Davis			Is this contribution associate fundraising event listed in State of the If yes, list Event #		?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00	
Last Name Klett	First Name Richard		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contribution 0356	ID#	Amount of Contribution	
Residential Street Address 104 Harold Dr		City Newington		State CT	Zip Code 06111		e Received /05/2010			
Principal Occupation Director of Security		Name of Employer Town of Newington		-	Is this contribution associate fundraising event listed in State If yes, list Event #			Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggrega	ate Contributio	ons 50.00	\$50.00	
Last Name Hammerslough	First Name John		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0371	ID#	Amount of Contribution	
Residential Street Address 119 Kettle Creek Rd		City Weston		State CT	Zip Code 06883		te Received /05/2010			
Principal Occupation Financial Consultant		Name of Employer Self-employed			Is this contribution associal fundraising event listed in S If yes, list Event #		?	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 25.00	\$25.00	

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Pena	Mardelle				Cash	y Order X Personal C		0383		Contribution
Residential Street Address	<u> </u>	City			State	Zip Code		ate Received		
11 Avalon Dr		Avon			CT	06001		6/05/201		
Principal Occupation		Name of Er	nployer		-	Is this contribution associ	ated with	a Tx	Yes	İ
None		None				fundraising event listed in  If yes, list Event # 06	Section 3 052010	<sup>11?</sup>	No	
Is contributor a principal of a state contractor	or prospective	·	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of					child of a lob	•			\$25.00	\$25.00
government the contract is with:		Executive	Legislative	<del>                                     </del>	res x			1		<u> </u>
Last Name Mielert	First Name Anita			MI	Method of Cash	contribution:  X Personal C	Check	Contributi	on ID #	Amount of Contribution
						y Order Credit/Del	bit Card	0388		Commodition
Residential Street Address		City			State	Zip Code	D	ate Received		
57 E Weatogue St		Simsbury	/		СТ	06070	0	6/05/201	0	
Principal Occupation		Name of E	nployer			Is this contribution associ fundraising event listed in		1^	Yes	
None		None				If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		E d	Legislative	I —	child of a lob	-		\$3	100.00	\$100.00
government the contract is with:	<u></u>	Executive	Legislative	+ -	1		<u> </u>	1		<u> </u>
Last Name Mielert	First Name Wolfried			MI	Method of Cash	contribution:  X Personal C	Check	Contribution	on ID#	Amount of Contribution
					Money	y Order Credit/Del	bit Card	0389		
Residential Street Address		City			State	Zip Code		ate Received		
57 E Weatogue St		Simsbury	<u>'</u>		СТ	06070		6/05/201		
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		11?	Yes	
None		None				If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	ıtions	
state contractor? Is yes, indicate which branch or branches of		E d			child of a lob	•		\$3	100.00	\$100.00
government the contract is with:		Executive	Legislative	+ -	I			1		
Last Name Berger	First Name Karen			MI K	Method of Cash	contribution:  X Personal C	Check	Contribution	on ID #	Amount of Contribution
					Money	y Order Credit/Del	bit Card	0391		
Residential Street Address		City			State	Zip Code		ate Received		
15 Orchard Hill Rd		Canton			СТ	06019	0	6/05/201	0	ļ
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		1^	Yes	
None		None				If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	ĺ
state contractor? Is yes, indicate which branch or branches of					child of a lob	•		-	\$50.00	\$50.00
government the contract is with:		Executive	Legislative	Т п,	res X	INO	1			1

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
O'Brien	Donald				Cash Money	y Order		0386		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
15 Aspenwood		Weatogu	е		СТ	06089	0	6/05/2010	0	
Principal Occupation Attorney		Name of Er Self	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	l	Yes X No	dependent	outor a lobbyis	byist?	Aggre	gate Contribu	utions	\$100.00
government the contract is with:		Executive	Legislative		res X	No		,		
Last Name Cortes	First Name Karen			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0392	on ID#	Amount of Contribution
Residential Street Address		City		1	State	Zip Code	D	ate Received		
17 Rosewood Dr		Simsbury	,		СТ	06070	0	6/05/2010	0	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ		1^	Yes	
Registrar of Voters		Town of	Simsbury	_		fundraising event listed in  If yes, list Event # 06			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	itions \$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Lanza	Susanne				Cash Money	y Order Personal C		0379		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
30 E Weatogue St		Simsbury	<u>'</u>		СТ	06070	0	6/05/2010	0	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in			Yes	
Furniture Maker		Self				If yes, list Event # 06			No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	, 1	Aggre	gate Contribu	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Î	res x	•		\$1	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Long	Ann				Cash Money	y Order Personal C		0367		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
8 Erin's Way		Simsbury	<u>'</u>		СТ	06070	0	6/05/2010	0	
Principal Occupation Retired		Name of Er None	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 06	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	utor a lobbyis	byist?	Aggre	gate Contribu	utions	\$100.00
government the contract is with:		Executive	Legislative	_ L L \	res X	No				

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	uals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Long	Michael				Cash Money	=	nal Check Debit Card	0368		Contribution
Residential Street Address		City			State	, <u> </u>		Date Received		†
8 Erin's Way		Simsbury	,		CT	Zip Code 06070		06/05/201		
Principal Occupation		Name of Er	mployer			Is this contribution as	sociated with	ıa [ <u>y</u>	Yes	İ
Retired		None				fundraising event list If yes, list Event #	ed in Section 06052010	J1?	No	
				1			00032010	<u>Ja</u> <u> </u>		<u> </u>
Is contributor a principal of a state contractor of state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggr	egate Contrib		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	_ Y	res X	No		\$	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Ronalter	Thomas				Cash	=	nal Check t/Debit Card	0358		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
95 Dover Rd		New Brita	ain		CT	06052		06/05/201		
Principal Occupation		Name of En	mployer			Is this contribution as	sociated with	ıa [5	Yes	†
Deputy Fire Chief		New Brit	ain Fire Department			fundraising event list If yes, list Event #		J1?	No	
Is contributor a principal of a state contractor of state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob	-	Aggr	egate Contrib	utions 100.00	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No				, , , , , ,
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
Rubenstein	Bruce	,			Cash Money	= =	nal Check t/Debit Card	0361		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
665 Mountain Rd		West Har	tford		СТ	06117		06/05/201	0	<u> </u>
Principal Occupation		Name of En	nployer ein & Sendy LLC			Is this contribution as fundraising event list		J1?	Yes	
Attorney		Rubelist	elli & Selluy LLC			If yes, list Event #		Ŀ	No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No		utor a lobbyis		Aggr	egate Contrib	utions	Ī
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 <sup>^</sup>	child of a lob	*		\$	100.00	\$100.00
government the contract is with:		Executive	Legislative	+ -	1			1		
Last Name Scheffler	First Name William			MI	Method of Cash	contribution:	nal Check	Contributi	on ID#	Amount of Contribution
	-				_	y Order Credi	/Debit Card	0349		
Residential Street Address		City			State	Zip Code		Date Received		
17 Stony Point Rd		Westport			СТ	06880	(	06/05/201	0	<u> </u>
Principal Occupation		Name of En	mployer			Is this contribution as fundraising event list		J1?	Yes	
Retired		None				If yes, list Event #		<u> </u>	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggr	egate Contrib	utions	Ì
state contractor? Is yes, indicate which branch or branches of				dependent	child of a lob	-		-	100.00	\$100.00
government the contract is with:	Ц	Executive	Legislative		es 🔼	N0				<u> </u>

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contribut	ions from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Ballard	Barbara			E	Cash Money	y Order X Personal C		0351		Contribution
Residential Street Address		City			State	Zip Code		ate Received		1
86 Elys Ferry Rd		Lyme			CT	06371		6/05/2010		
Principal Occupation		Name of Er	mployer			Is this contribution associ	ated with	a	Yes	İ
Executive		Odyssey	Enterprises, Inc.			fundraising event listed in If yes, list Event #	Section .	11? <b>x</b>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 °	t child of a lob Yes	,		\$1	100.00	\$100.00
Last Name	First Name			MI		contribution:		Contribution	on ID#	
Sodipo	John				Cash Money	Personal C  y Order  X  Credit/Del		0611	Oll ID #	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		1
150 Stanley Dr		Glastonb	ury		СТ	06033-2622	0	6/05/2010	0	
Principal Occupation		Name of E	nployer			Is this contribution associ			Yes	
Attorney		Jacobs 8	s Sodipo			fundraising event listed in If yes, list Event #	section .	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	1	outor a lobbyis	-	Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		t child of a lob Yes	-		\$1	100.00	\$100.00
government the contract is with:  Last Name	First Name			MI	I	contribution:		Contribution	on ID#	
Ford	William				Cash	y Order		0345	OII ID#	Amount of Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
223 Atlantic Ave Apt 4-A		Palm Bea	nch		FL	33480	0	6/05/2010	0	
Principal Occupation		Name of E	nployer			Is this contribution associ			Yes	
None		None				fundraising event listed in If yes, list Event #	i Section .	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	outor a lobbyis	t, spouse, or	Aggre	gate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of			_		t child of a lob	-	1 383	-	250.00	\$250.00
government the contract is with:		Executive	Legislative	L \ \	res X	No		1		
Last Name	First Name			MI E	Method of Cash	contribution:	heck	Contribution	on ID#	Amount of
Taylor	Margaret			<u></u>		y Order Credit/Del		0347		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
7 Woodcock Ln		Westport			СТ	06880	0	6/05/2010	0	1
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in			Yes	
Attorney		TIAA - C	KEF			If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	1	outor a lobbyis	-	Aggre	gate Contribu	utions	Ì
state contractor? Is yes, indicate which branch or branches of		<b>P</b> 2	<b>—</b>	dependent	t child of a lob Yes	-		-	100.00	\$100.00
government the contract is with:	ᆜ	Executive	Legislative		res 🔼	No				<u> </u>

		I. MONET.	ARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								1	FILING	DUE DATE
Jepsen 2010										
		B. Itemized (	Contributio	ons from	Individu	ials		•		
Last Name Gillespie	First Name Ian			MI	Cash	contribution:    X   Personal C		Contribution 0348	ID#	Amount of Contribution
Residential Street Address 7 Woodcock Ln		City Westport			State CT	Zip Code 06880		ate Received 6/05/2010		
Principal Occupation Student		Name of Employer Student		_		Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyist child of a lob es	byist?	Aggre	gate Contributio	ons 0.00	\$100.00
Last Name Sotil	First Name Ricardo			MI	Cash	contribution:  X Personal C  Order Credit/Del		Contribution 0350	ID#	Amount of Contribution
Residential Street Address 6 Valley View Dr		City East Granby			State CT	Zip Code 06026		ate Received 6/05/2010		
Principal Occupation Owner		Name of Employer Sotil Tree Service	LLC			Is this contribution associ- fundraising event listed in If yes, list Event # 060				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyist child of a lob es	byist?	Aggre	gate Contributio	ons 5.00	\$25.00
Last Name Bishop	First Name Steven			MI	Cash	contribution:  X Personal C  Order Credit/Del		Contribution 0353	ID#	Amount of Contribution
Residential Street Address 265 Taconic Rd		City Greenwich			State CT	Zip Code 06831		ate Received 6/05/2010		
Principal Occupation Attorney		Name of Employer Mead, Bromley an	nd Bishop			Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	child of a lob	byist?	Aggre	egate Contribution \$10	ons 0.00	\$100.00
Last Name DiNardo	First Name Nancy			MI	Cash	contribution:    X   Personal C		Contribution 0354	ID#	Amount of Contribution
Residential Street Address 61 Suzanne Cir		City Trumbull			State CT	Zip Code 06611-4537		ate Received 6/05/2010		
Principal Occupation Retired		Name of Employer None				Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyist child of a lob	byist?	Aggre	gate Contributio	ons 10.00	\$100.00

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	uals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Kosturko	William				Cash Money	y Order Registration   X Personal C		0355		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
201 Water St		Guilford			CT	06437		6/05/2010		
Principal Occupation		Name of Er	mployer		<b>!</b>	Is this contribution associ	ated with	а Г	Yes	†
None		None				fundraising event listed in If yes, list Event #	n Section .	J1? x	No No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		outor a lobbyis		Aggre	egate Contribu	utions	Ī
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 ~	t child of a lob Yes	,		\$3	375.00	\$375.00
government the contract is with:  Last Name	First Name	Executive	Legislative	Тмі		contribution:		1		<u> </u>
Fitzsimmons	Mark			IVII	Cash	X Personal C	Check	Contribution 0357	on ID #	Amount of Contribution
					Money	y Order Credit/De	bit Card	0337		
Residential Street Address		City			State	Zip Code		ate Received		
3 Braeburn Rd		West Har	tford		СТ	06107		6/05/2010	0	<u> </u>
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		J1?	Yes	
Sales Rep.		Killy Pilo	armaceuticals			If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		outor a lobbyis	-	Aggre	gate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		t child of a lob Yes	-		\$1	100.00	\$100.00
government the contract is with:		Executive	Legislative	Тмі	I			1		<u> </u>
Last Name Buttaro	First Name Lois			IVII	Cash	contribution:    X   Personal (	Check	Contribution 0359	on ID #	Amount of Contribution
					Money	y Order Credit/De	bit Card	0359		
Residential Street Address		City			State	Zip Code		ate Received		
46 Chelsea Ln		East Gra	nby		СТ	06026		6/05/2010		1
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		J1?	Yes	
Retired R.N.		None				If yes, list Event # 06	052010	<u>a</u> L	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		outor a lobbyis		Aggre	gate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	1 m	t child of a lob Yes	•		9	\$25.00	\$25.00
government the contract is with:	<u></u>	Executive	Legislative	+ -	1		<u> </u>	1		1
Last Name Bareiss	First Name Conrad			MI	Method of Cash	contribution:	Check	Contributio	on ID#	Amount of Contribution
						y Order Credit/De	bit Card	0362		
Residential Street Address		City			State	Zip Code		ate Received		
113 Old North Stamford Rd		Stamford	<u> </u>		СТ	06905-3964	0	6/05/2010	0	<u> </u>
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes	
Attorney		Conard \	W. Bareiss Attorney	at Law		If yes, list Event #		х	No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	outor a lobbyis	st, spouse, or	Aggre	egate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of			_		t child of a lob	-		-	100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative	1	res X	No	1			

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Walker	Lyn				Cash Money	y Order X Personal C		0363		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
95 Elm St		Hartford			СТ	06106	0	6/05/201	0	
Principal Occupation  Lawyer		Name of Er Shipmar	nployer 1 & Goodwin, LLP			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob	byist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	1	Contributi	on ID #	Amount of
Gay	Merrill				Cash Money	y Order Registration Registrati		0364	on ib "	Contribution
Residential Street Address		City		-	State	Zip Code	D	ate Received		
72 Brady Ave		New Brita	ain		СТ	06052	0	6/05/201	0	
Principal Occupation		Name of Er	mployer		-	Is this contribution associ			Yes	
Consultant		Self		_		fundraising event listed in If yes, list Event #	n Section .	)1?   <b>x</b>	No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	bbyist?	Aggre	egate Contribu	ations \$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Rodriguez	Angeles				Cash Money	y Order X Personal C		0366		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
5 Riverfield Dr		Weston			СТ	06883	0	6/05/201	0	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in			Yes	
None		None				If yes, list Event #		х	No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob	byist?	Aggre	egate Contribu	ations \$30.00	\$30.00
Last Name	First Name			MI	Method of	contribution:	<u> </u>	Contributi	on ID #	A
Michel	James				Cash	y Order Registration Registration X Personal C		0369	on id #	Amount of Contribution
Residential Street Address		City		-	State	Zip Code	D	ate Received		
127 Duncaster Rd		Bloomfiel	d		СТ	06002-1253	0	6/05/201	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes	
Finance/Insurance		Aetna				fundraising event listed in If yes, list Event #	n Section .	x	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	dependent	child of a lob	-		\$:	100.00	\$100.00
government the contract is with:		LACCULIVE	Legisiative	'		110	1			

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Hammerslough	Nancy				Cash Money	y Order		0370		Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
119 Kettle Creek Rd		Weston			СТ	06883-2241	0	6/05/2010	0	
Principal Occupation Publisher		Name of Er None	mployer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	itions \$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:	•	Contributio	on ID #	Amount of
Erickson	Caryn				Cash Money	y Order Personal Credit/De		0373		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
PO Box 942		Old Lyme	e		СТ	06371	0	6/05/2010	0	
Principal Occupation		Name of E	mployer		•	Is this contribution assoc	iated with	a [	Yes	
Information Requested		Informat	tion Requested			fundraising event listed in If yes, list Event #	n Section I	J1? ==	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	bbyist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Wolfe	Nancy				Cash Money	y Order X Personal Credit/De		0374		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
109 E Weatogue St		Simsbury	/		СТ	06070	0	6/05/2010	0	
Principal Occupation		Name of E	mployer		•	Is this contribution assoc		1^	Yes	
Professor of Public Health		Universi Center	ty of Connecticut He	alth		fundraising event listed in  If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lob	•		\$1	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Weiss	Richard				Cash Money	y Order X Personal Credit/De		0378		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
360 Cherry Brook Rd		Canton			СТ	06019	0	6/05/2010	0	
Principal Occupation		Name of E	mployer		•	Is this contribution assoc		1^	Yes	
Physician		Connect	icut Children's Medic	al Center		fundraising event listed in  If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		P 2		dependent	child of a lob	-		\$1	100.00	\$100.00
government the contract is with:	니	Executive	Legislative		es	NO				

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Schofield	Linda				Cash Money	y Order X Persona Credit/I	Check Debit Card	0380		Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
3 Ryan's Cir		Simsbury	′		СТ	06070-1879	C	06/05/201	0	
Principal Occupation		Name of E	mployer		•	Is this contribution asso		1.	Yes	
State Rep.		State of	Connecticut			fundraising event listed If yes, list Event # 0	in Section . 6052010		No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Turketen.	I	child of a lob	•		:	\$25.00	\$25.00
government the contract is with:	<u></u>	Executive	Legislative	+ =	1			1		
Last Name Tindall	First Name Jeffrey			MI	Method of Cash	contribution:  X Persona	Check	Contributi	on ID#	Amount of Contribution
	,					y Order Credit/I	ebit Card	0381		Commodium
Residential Street Address		City			State	Zip Code	Е	Date Received		
47 Owens Brook Blvd		Simsbury	′		СТ	06070-1924	С	06/05/201	0	
Principal Occupation		Name of Er	nployer			Is this contribution asso		1.	Yes	
Gov't Affairs		CIGNA		-		fundraising event listed If yes, list Event # 0			No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of		Executive	Legislative	1 —	child of a lob	-		\$	100.00	\$100.00
government the contract is with:  Last Name	First Name	LACCULIVE	Degisianve			contribution:		I	"	
Krinitsky	Joyce			IVII	Cash	X Persona	Check	Contributi 0385	on ID#	Amount of Contribution
,					Money	y Order Credit/I	ebit Card	0385		
Residential Street Address		City			State	Zip Code	Г	Date Received		
11 Fairview Ave		Terryville	2		СТ	06786	С	06/05/201	0	
Principal Occupation		Name of E				Is this contribution asso fundraising event listed		1.	Yes	
Realtor		Prudenti	al CT Realty			If yes, list Event # 0			No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	st, spouse, or	Δαστε	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of					child of a lob	bbyist?	71551	-	\$25.00	\$25.00
government the contract is with:		Executive	Legislative	L 1	es x	No				
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
McCusker	Meagen				Cash Money	y Order Persona Credit/I	Pebit Card	0387		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
45 E Weatogue St		Simsbury	<u>'</u>		СТ	06070	C	06/05/201	0	
Principal Occupation		Name of Er				Is this contribution asso fundraising event listed		1.7	Yes	
Physician		Capital A	Area Health Consorti	um		If yes, list Event # 0			No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis	st, spouse, or	Aggre	egate Contrib	utions	†
state contractor? Is yes, indicate which branch or branches of	_		_	dependent	child of a lob	bbyist?	1.55	-	100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative	\	res X	No				

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							1	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Donohue	First Name Margaret		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 0393	ID#	Amount of Contribution
Residential Street Address 17 Firetown Rd , P.O. Box 472		City Simsbury		State CT	Zip Code 06070		te Received /05/2010		
Principal Occupation Information Requested		Name of Employer Information Requested			Is this contribution associa fundraising event listed in If yes, list Event # 060		1 1		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00
Last Name Willerup	First Name Tara		MI D	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 0394	ID#	Amount of Contribution
Residential Street Address 17 Firetown Rd		City Simsbury		State CT	Zip Code 06070-1914		e Received /05/2010		
Principal Occupation  Mom		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 060		1 1		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution	ons 00.00	\$100.00
Last Name Alfieri	First Name Patricia		MI	Cash	contribution:    X   Personal Cl		Contribution 0395	ID#	Amount of Contribution
Residential Street Address 36 County Rd		City Simsbury		State CT	Zip Code 06070		te Received /05/2010		
Principal Occupation Portfolio Manager		Name of Employer  New Alliance Bank			Is this contribution associa fundraising event listed in If yes, list Event # 060				ı
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution \$10	ons 00.00	\$100.00
Last Name Belniak	First Name Robert		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb		Contribution 0544	ID#	Amount of Contribution
Residential Street Address 102 Taine Mountain Rd		City Burlington		State CT	Zip Code 06013-1913		te Received /05/2010		
Principal Occupation Physician		Name of Employer Grove Hill Medical Center			Is this contribution associa fundraising event listed in If yes, list Event #		? <b>x</b>	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00

		I. MON	ETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemiz	zed Contributi	ons from	Individu	ıals				
Last Name Ustach	First Name Lynne			MI	Cash	contribution: Personal C y Order X Credit/Det		Contribution 0534	ID#	Amount of Contribution
Residential Street Address 35 Ashford Dr		City Avon			State CT	Zip Code 06001-4552		eate Received 6/05/2010		
Principal Occupation Attorney		Name of Employe Self	er			Is this contribution association fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	child of a lob	byist?	Aggre	gate Contribution \$5	ons 50.00	\$50.00
Last Name Hayes	First Name Lara			MI	Cash	contribution:  Personal C y Order X Credit/Del		Contribution 0529	ID#	Amount of Contribution
Residential Street Address 34 Mandeney Ln		City Ormond Beac	h		State FL	Zip Code 32174		ate Received 6/05/2010		
Principal Occupation  Manager		Name of Employe Linear	er		•	Is this contribution association fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contributi	ons 00.00	\$100.00
Last Name Spear	First Name Gregory			MI	Cash	contribution: Personal C		Contribution 0549	ı ID#	Amount of Contribution
Residential Street Address 161 Brace Rd		City West Hartford	I		State CT	Zip Code 06107-1812		eate Received 6/05/2010		
Principal Occupation Publisher		Name of Employe Independent			-	Is this contribution association fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribution \$10	ons 00.00	\$100.00
Last Name Brenneman	First Name Barbara			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0571	ID#	Amount of Contribution
Residential Street Address 15 Twin Ponds Dr		City Unionville			State CT	Zip Code 06085-1503		eate Received 6/05/2010		
Principal Occupation Registrar of Voters		Name of Employe				Is this contribution association fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribution	ons 00.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Landino	Phil				Cash Money	Personal C  y Order X Credit/Deb		0592		Contribution
Residential Street Address	ı	City			State	Zip Code	D	ate Received		1
70 Kuhr Dr		Southing	ton		СТ	06489-4433	0	6/05/201	0	
Principal Occupation Sales Rep		Name of Er Synthes	nployer			Is this contribution associa fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	utions \$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Wilds	Nina				Cash Money	Personal C  y Order X Credit/Deb		0532		Contribution
Residential Street Address		City		1	State	Zip Code	D	ate Received		
636 Adams St		Holliston			MA	01746-1406	0	6/06/201	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution associa			Yes	ĺ
Assoc Editorial Director		Natixis G	Global Associates			fundraising event listed in If yes, list Event #	Section .	11?	No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Tyrer	Sean				Cash Money	Personal C  x Credit/Deb		0599		Contribution
Residential Street Address		City		-	State	Zip Code	D	ate Received		
251 W 89th St Apt 12C		New York	<b>C</b>		NY	10024-1741	0	6/06/201	0	]
Principal Occupation		Name of Er				Is this contribution association fundraising event listed in			Yes	
Student		NYU Law	1			If yes, list Event #	Section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	<u> </u>	Contributi	on ID #	Amount of
Brody	Adrian				Cash	Personal C  y Order X Credit/Deb		0594	on ib "	Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
69 Hoyt Farm Rd		New Can	aan		СТ	06840-5035	0	6/06/201	0	_
Principal Occupation N		Name of Er Retired	nployer			Is this contribution associa fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative	Y	res x	No				<u> </u>

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribut	ions fron	Individu	ıals				
Last Name McArdle	First Name Chris		MI	Cash	contribution: Personal Ch y Order X Credit/Debi		Contribution 0604	ID#	Amount of Contribution
Residential Street Address 41 Bennetts Bridge Rd		City Sandy Hook		State CT	Zip Code 06482-1440		te Received /06/2010		
Principal Occupation  Video Director		Name of Employer  Dan Malloy for Governor			Is this contribution associate fundraising event listed in St. If yes, list Event #		1 1	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contribution \$1	ons 10.00	\$10.00
Last Name Kostek	First Name David		MI	Cash	contribution: Personal Cl y Order X Credit/Debi		Contribution 0538	ID#	Amount of Contribution
Residential Street Address 31 Hoyt St		City New Canaan		State CT	Zip Code 06840-5618		te Received /06/2010		
Principal Occupation At home parent		Name of Employer None			Is this contribution associate fundraising event listed in State of the If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00
Last Name Zonis	First Name Jennifer		MI	Cash	contribution:  Personal Ch y Order X Credit/Debi		Contribution 0515	ID#	Amount of Contribution
Residential Street Address 893 N Wilton Rd		City New Canaan		State CT	Zip Code 06840-2426		te Received /07/2010		
Principal Occupation  None		Name of Employer None			Is this contribution associate fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contributio	ons 10.00	\$40.00
Last Name Corbett	First Name Kathleen		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0412	ID#	Amount of Contribution
Residential Street Address 49 Cross Ridge Rd		City New Canaan		State CT	Zip Code 06840-2312		te Received /07/2010		
Principal Occupation Private Investing/Consulting		Name of Employer Cross Ridge Capital, LLC			Is this contribution associal fundraising event listed in 1 If yes, list Event # 060		? <u> </u>		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ions fron	Individu	ıals				
Last Name Silvan	First Name Jon		MI	Cash	contribution: Personal Cl y Order X Credit/Debi		Contribution	ı ID#	Amount of Contribution
Residential Street Address 53 N Moore St Apt 3D		City New York		State NY	Zip Code 10013-2340		te Received 5/07/2010		
Principal Occupation CEO		Name of Employer Global Strategy Group			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contributi \$10	ions 00.00	\$100.00
Last Name Ryan	First Name David		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0400	ı ID#	Amount of Contribution
Residential Street Address 20 Westledge Rd		City West Simsbury		State CT	Zip Code 06092-2318		te Received 5/07/2010		
Principal Occupation Eng		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # 060			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	gate Contributi \$5	ions 50.00	\$50.00
Last Name karp	First Name Arnold		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi		Contribution	ı ID#	Amount of Contribution
Residential Street Address 302 Canoe Hill Rd		City New Canaan		State CT	Zip Code 06840-3710		ite Received 5/07/2010		
Principal Occupation  Real Estate		Name of Employer Karp Associates			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contributi	ions 00.00	\$100.00
Last Name Schacter	First Name Steven		MI	Cash	contribution:  Personal Cl y Order x Credit/Debi		Contribution	ı ID#	Amount of Contribution
Residential Street Address 10 Glenville St		City Greenwich		State CT	Zip Code 06831-3680		ite Received 5/07/2010		
Principal Occupation President		Name of Employer Mill Management Inc.		•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contributi \$10	ions 00.00	\$100.00

		I. N	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	Individu	ıals				
Last Name Jones	First Name Elizabeth			MI	Cash	contribution:  X Personal C  y Order Credit/Deb		Contribution 0413	ı ID#	Amount of Contribution
Residential Street Address 101 Harrison Ave		City New Can	aan		State CT	Zip Code 06840-5804		Date Received 06/07/2010		
Principal Occupation  Gardener		Name of Er Self	nployer			Is this contribution association fundraising event listed in If yes, list Event # 060	Section J			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$2	ions 25.00	\$25.00
Last Name Blondin	First Name Audrey			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0405	ı ID#	Amount of Contribution
Residential Street Address 66 Talmadge Ln		City Litchfield			State CT	Zip Code 06759-2417		Date Received 06/07/2010		
Principal Occupation Attorney		Name of Er Self	nployer		•	Is this contribution association fundraising event listed in If yes, list Event # 060				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Ryan	First Name Gail			MI	Cash	contribution:    X   Personal C		Contribution 0399	ı ID#	Amount of Contribution
Residential Street Address 20 Westledge Rd		City West Sim	nsbury		State CT	Zip Code 06070		Date Received 06/07/2010		
Principal Occupation Librarian		Name of Er Loomis (			•	Is this contribution association fundraising event listed in If yes, list Event # 060	Section J			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribution \$5	ions 50.00	\$50.00
Last Name Turrentine	First Name Lucie			MI	Cash	contribution:    X   Personal C		Contribution 0407	ı ID#	Amount of Contribution
Residential Street Address 79 Greenley Rd		City New Can	aan		State CT	Zip Code 06840		Date Received 06/07/2010		
Principal Occupation Housewife		Name of En	nployer			Is this contribution association fundraising event listed in If yes, list Event # 060				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi	ions 00.00	\$100.00

		I. N	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	Individu	ıals		•		
Last Name Cosgrove	First Name Edward			MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0401	ı ID#	Amount of Contribution
Residential Street Address 6 Eagle Ln		City Simsbury	,		State CT	Zip Code 06070		Pate Received 16/07/2010		
Principal Occupation State Marshal		Name of Er Self	nployer			Is this contribution association fundraising event listed in If yes, list Event # 060	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$5	ions 50.00	\$50.00
Last Name Runnette	First Name Alice			MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0426	n ID#	Amount of Contribution
Residential Street Address 49 St John Pl		City New Can	aan		State CT	Zip Code 06840		Pate Received 06/07/2010		
Principal Occupation Housewife		Name of En	nployer		•	Is this contribution association fundraising event listed in If yes, list Event # 060			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$5	ions 50.00	\$50.00
Last Name Apy	First Name Eileen			MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0415	ı ID#	Amount of Contribution
Residential Street Address 96 Harrison Ave		City New Can	aan		State CT	Zip Code 06840		Pate Received		
Principal Occupation Retired		Name of Er None	nployer			Is this contribution association fundraising event listed in If yes, list Event # 060	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$1	ions 10.00	\$10.00
Last Name Franco	First Name Richard			MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0414	n ID#	Amount of Contribution
Residential Street Address 180 Summer St		City New Can	aan		State CT	Zip Code 06840		Date Received 06/07/2010		
Principal Occupation  Merchant		Name of Er Franco V	mployer Vines, Inc.			Is this contribution association fundraising event listed in If yes, list Event # 060			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$5	ions 50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions from	Individu	uals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Rashin	Samuel				Cash Money	y Order X Personal Credit/Do		0416		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
217 Middle Ridge Rd		New Cana	aan		СТ	06840	0	6/07/201	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution assoc		1.2	Yes	
Student		None				fundraising event listed i  If yes, list Event # 06	n Section . 5062010	I	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:	П	Executive	Legislative	I '─	res x	,		:	\$10.00	\$10.00
Last Name	First Name			MI	1	contribution:		Contributi	on ID#	
Rashin	Daniel				Cash	y Order Personal		0420	on id#	Amount of Contribution
Residential Street Address		City			State	Zip Code		ate Received		
217 Middle Ridge Rd		New Cana	aan		CT	06840		6/07/201		
Principal Occupation		Name of Er	mployer			Is this contribution assoc		1.2	Yes	
Real Estate		Hines				fundraising event listed if If yes, list Event # 06		J1? _	No	
Is contributor a principal of a state contractor of state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	ĺ
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 —	child of a lob	-		\$	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Adelman	Robert				Cash Money	y Order X Personal Credit/De		0418		Contribution
Residential Street Address		City		-	State	Zip Code	Е	ate Received		
687 Mill Hill Rd		Southpor	t		СТ	06890	0	6/07/201	0	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		1.2	Yes	
Lawyer		Adelman	Hirsh & Newman			If yes, list Event # 06			No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of				1 —	child of a lob	-		\$	100.00	\$100.00
government the contract is with:		Executive	Legislative	+ -	1			1		<u> </u>
Last Name Adelman	First Name Merril			MI	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution
Addition	T ICITII				_	y Order Credit/Do	ebit Card	0419		Contribution
Residential Street Address		City			State	Zip Code	Г	ate Received		
687 Mill Hill Rd		Southpor	t		СТ	06890-3011	0	6/07/201	0	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed i		1.7	Yes	
Nutritionist		Norwalk	nospitai			If yes, list Event # 06			No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	ĺ
state contractor? Is yes, indicate which branch or branches of		E		dependent	child of a lob	-		-	100.00	\$100.00
government the contract is with:	니	Executive	Legislative	<u>Г</u> Г	es 🔼	N0				1

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Cody	George				Cash Money	=	al Check Debit Card	0421		Contribution
Residential Street Address	l	City			State	Zip Code		Date Received		
241 Main St Box 667		New Cana	aan		CT	06840-5608		)6/07/201		
Principal Occupation		Name of Er	nnlover		-	Is this contribution ass	ociated with	a [x	Yes	
Registrar of Voters		1	New Canaan			fundraising event listed If yes, list Event #	l in Section 06062010	J1?	No No	
Is contributor a principal of a state contractor state contractor?	or prospective	•	Yes X No		utor a lobbyis child of a lob		Aggro	egate Contrib	utions \$50.00	\$50.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res X	No			\$30.00	\$30.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Swerdloff	David				Cash Money	=	al Check Debit Card	0422		Contribution
Residential Street Address		City			State	Zip Code		Date Received		
87 Alexandria Dr		Stamford			СТ	06903	C	06/07/201	0	
Principal Occupation		Name of Er				Is this contribution ass fundraising event listed		1.2	Yes	
Lawyer		Day Pitn	ey LLP			If yes, list Event #			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis t child of a lob	bbyist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID #	Amount of
Ritt	Kenneth				Cash Money	=	al Check Debit Card	0423		Contribution
Residential Street Address		City			State	Zip Code	Ι	Date Received		
12 Pennoyer St		Norwalk			СТ	06853	C	06/07/201	0	
Principal Occupation		Name of Er				Is this contribution ass fundraising event listed		1.2	Yes	
Information Requested		Informat	ion Requested			If yes, list Event #			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		-	100.00	\$100.00
government the contract is with:		Executive	Legislative	<del>                                     </del>	res X			1		<u> </u>
Last Name Griffith	First Name F. Lee			MI	Method of Cash	contribution:	al Check	Contributi	on ID#	Amount of Contribution
Gilliai	i. Lee					=	Debit Card	0424		Contribution
Residential Street Address		City			State	Zip Code	Ι	Date Received		
5 Marsh Rd		Westport			СТ	06880-6721	C	06/07/201	0	
Principal Occupation		Name of Er				Is this contribution ass fundraising event listed		1.7	Yes	
Information Requested		Informat	ion Requested			If yes, list Event #			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		-	100.00	\$100.00
government the contract is with:		Executive	Legislative		res X	NO				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ite	mized Contributio	ons from	Individu	ıals				
Last Name Rodriguez	First Name Sabino			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi 0425	on ID#	Amount of Contribution
Residential Street Address 12 Norwalk Ave		City Westport			State CT	Zip Code 06880		eate Received		
Principal Occupation  Lawyer		Name of Emp Day Pitne	-			Is this contribution association fundraising event listed in If yes, list Event # 06		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribi	utions 100.00	\$100.00
Last Name MacEachron	First Name Devon			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi 0427	on ID#	Amount of Contribution
Residential Street Address 164 Middle Beach Rd		City Madison			State CT	Zip Code 06443		ate Received		
Principal Occupation Psychologist		Name of Emp Hines	ployer		•	Is this contribution associfundraising event listed in If yes, list Event # 06		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Kulig	First Name Amy			MI S	Cash	contribution:  X Personal C y Order Credit/De		Contributi 0397	on ID#	Amount of Contribution
Residential Street Address 10 Talcott Range Dr		City East Grant	by		State CT	Zip Code 06026		ate Received		
Principal Occupation Attorney		Name of Emp	ployer Connecticut Dept. of	Labor		Is this contribution associ fundraising event listed in If yes, list Event # 06	n Section J	11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Borrino	First Name Lisa			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi 0402	on ID#	Amount of Contribution
Residential Street Address 41 Banks Rd		City Simsbury			State CT	Zip Code 06070		ate Received		
Principal Occupation Hearing Officer		Name of Emp	ployer			Is this contribution associfundraising event listed in If yes, list Event # 06	n Section J	11? E	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID #	Amount of
Borrino	David				Cash Money	y Order X Personal C		0403		Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
41 Banks Rd		Simsbury	<i>'</i>		СТ	06070	0	6/07/201	0	
Principal Occupation		Name of E	mployer		_	Is this contribution assoc		1^	Yes	
Attorney		Benaett	& McHugh PC			fundraising event listed in  If yes, list Event # 06	n Section I 052010	I	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		<b>.</b>		I '─	child of a lob	*		\$	100.00	\$100.00
government the contract is with:		Executive	Legislative		1		<u> </u>	1		<u> </u>
Last Name Blondin	First Name Matthew			MI	Method of Cash	contribution:	Check	Contributi	on ID #	Amount of Contribution
Biorium	Matthew					y Order Credit/De		0404		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
66 Tallmage Ln		Litchfield			СТ	06759	0	6/07/201	0	
Principal Occupation		Name of E	mployer		•	Is this contribution associ		1^	Yes	
Optometrist		Self				fundraising event listed in  If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$:	100.00	\$100.00
government the contract is with:	<u></u>	Executive	Legislative	+-			<u> </u>	1		<u> </u>
Last Name Apy	First Name Virginia			MI	Method of Cash	contribution:  Personal 0	Check	Contribution	on ID #	Amount of Contribution
					_	y Order Credit/De	bit Card	0406		Commonition
Residential Street Address		City			State	Zip Code	D	ate Received		
96 Harrison Ave		New Can	aan		СТ	06840-5801	0	6/07/201	0	
Principal Occupation		Name of Er	mployer			Is this contribution associ		a <b>x</b>	Yes	
None		None				fundraising event listed in  If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t spouse or	Aggra	egate Contribu	utions	<del> </del>
state contractor? Is yes, indicate which branch or branches of	_		_ resno		child of a lob	byist?	Aggie	-	\$20.00	\$20.00
government the contract is with:		Executive	Legislative	<u> </u>	res X	No				
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
Winkles	Madaline				Cash Money	y Order Personal Credit/De		0408		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
63 Fitch Ln		New Can	aan		СТ	06840	0	6/07/201	0	
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		1^	Yes	
Sales		Roy Win	kles Consulting			If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective	I	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		-	100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative	L 1	res X	No				

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribut	ions fron	Individu	ıals				
Last Name Winkles	First Name Roy		MI	Cash	contribution:    X   Personal Cl	heck	Contribution 0428	ID#	Amount of Contribution
Residential Street Address 63 Fitch Ln		City New Canaan		State CT	Zip Code 06840		e Received /07/2010		
Principal Occupation  Consultant		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # 060		1 1		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00
Last Name Hussey	First Name Christine		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	heck	Contribution 0409	ID#	Amount of Contribution
Residential Street Address 325 Main St		City New Canaan		State CT	Zip Code 06840-5837		e Received /07/2010		
Principal Occupation  Realtor		Name of Employer Chris Hussey Real Estate			Is this contribution associa fundraising event listed in If yes, list Event # 060		1 1		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 50.00	\$50.00
Last Name Finn	First Name Stephen		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	heck	Contribution 0410	ID#	Amount of Contribution
Residential Street Address 75 Pheasant Dr		City New Canaan		State CT	Zip Code 06840		e Received /07/2010		
Principal Occupation Attorney		Name of Employer Wofsey Rosen			Is this contribution associa fundraising event listed in If yes, list Event # 060				ı
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contribution \$10	ons 10.00	\$100.00
Last Name Finn	First Name Denise		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	heck	Contribution 0411	ID#	Amount of Contribution
Residential Street Address 75 Pheasant Dr		City New Canaan		State CT	Zip Code 06840		te Received /07/2010		
Principal Occupation Nurse		Name of Employer New Canaan Pediatric			Is this contribution associa fundraising event listed in If yes, list Event # 060	Section J13			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Devereaux	Kathryn				Cash Money	y Order X Personal C		0417		Contribution
Residential Street Address	-	City			State	Zip Code	D	ate Received		
43 St John Pl		New Cana	aan		СТ	06840	0	6/07/201	0	
Principal Occupation Retired		Name of En	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event # 060		11? E	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribu	ations \$35.00	\$35.00
Last Name	First Name			MI	Method of	contribution:	•	Contributi	on ID#	Amount of
Pollock	Jefrey				Cash Money	Personal C  y Order  X  Credit/Del		0600		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
825 W End Ave		New York	(		NY	10025-5349	0	6/07/201	0	
Principal Occupation		Name of En	mployer			Is this contribution association fundraising event listed in			Yes	
Consultant		Global S	trategy Group			If yes, list Event #	. Section 3	X	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Burrows	Lori				Cash Money	y Order X Credit/Del		0602		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
43 Farmstead Ln		West Sim	nsbury		СТ	06092-2416	0	6/07/201	0	
Principal Occupation		Name of Er				Is this contribution associ- fundraising event listed in			Yes	
Teacher		Simsbur	y Public Schools			If yes, list Event #	. Beetion i	x	No	
Is contributor a principal of a state contractor	or prospective	·	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of				1 ~	child of a lob	•		-	100.00	\$100.00
government the contract is with:		Executive	Legislative	<u> </u>	res X	No	<u> </u>	1		
Last Name	First Name			MI		contribution:	heck	Contributi	on ID#	Amount of
Hathaway	William				Cash Money	y Order Credit/Del		0398		Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
54 Lilley Rd		West Har	tford		СТ	06119	0	6/07/201	0	
Principal Occupation		Name of Er	mployer		-	Is this contribution associ		1^	Yes	
Public Affairs Office		Yale Univ	versity			fundraising event listed in  If yes, list Event # 060			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	•		9	\$25.00	\$25.00
government the contract is with:		LACCULIVE	L Legisiative	Т,		110	1			1

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Byrne	First Name Erica		MI	Cash	contribution: Personal Cl  Order X Credit/Debi	neck 055	ibution ID #	Amount of Contribution		
Residential Street Address 79 Bristol St		City Southington		State CT	Zip Code 06489-4515	Date Rece 06/08/2				
Principal Occupation  Nonprofit Manager		Name of Employer Latino Community Services			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$50.00	\$50.00		
Last Name Camhi	First Name Glenn		MI	Cash	contribution: Personal Cl / Order X Credit/Debi	neck 051	ibution ID #	Amount of Contribution		
Residential Street Address 757 S Euclid Ave		City Pasadena		State CA	Zip Code 91106-3734	Date Rece 06/08/2				
Principal Occupation screenwriter		Name of Employer self		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	stributions \$100.00	\$100.00		
Last Name Urbank	First Name Katharine	2	MI	Cash	contribution: Personal Cl  Order X Credit/Debi	neck 056	ibution ID #	Amount of Contribution		
Residential Street Address 227 Brookdale Rd		City Stamford		State CT	Zip Code 06903-4118	Date Rece 06/09/2				
Principal Occupation  Deputy Treasurer		Name of Employer  Dan Malloy for Governor		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cor	stributions \$100.00	\$100.00		
Last Name Wilhelms	First Name Edward		MI	Cash	contribution: Personal Cl  Order X Credit/Debi	neck 057	ibution ID #	Amount of Contribution		
Residential Street Address 109 Nehantic Trl		City Old Saybrook		State CT	Zip Code 06475-1825	Date Rece 06/09/2				
Principal Occupation actor / director		Name of Employer self employed			Is this contribution associa fundraising event listed in If yes, list Event #		Yes			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	stributions \$50.00	\$50.00		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name Ahern	First Name Monica		MI	Cash	contribution: Personal Cl y Order X Credit/Debi		Contribution 0543	ID#	Amount of Contribution
Residential Street Address 46 Arundel Ave		City West Hartford		State CT	Zip Code 06107-1705		te Received 5/09/2010		
Principal Occupation Teacher		Name of Employer West Hartford Public Schools	; 		Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	ate Contributi	ons 25.00	\$25.00
Last Name Bassik	First Name Michael		MI	Cash	contribution: Personal Cl y Order X Credit/Debi		Contribution 0536	ID#	Amount of Contribution
Residential Street Address 45 E 30th St		City New York		State NY	Zip Code 10016-7361		te Received 5/09/2010		
Principal Occupation Digital Strategist		Name of Employer Global Strategy Group			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	ate Contributi	ons 50.00	\$50.00
Last Name Hypolite	First Name Wayne		MI	Cash	contribution: Personal Cl y Order X Credit/Debi		Contribution 0513	ID#	Amount of Contribution
Residential Street Address 55 Prospect St		City Bloomfield		State CT	Zip Code 06002-3038		te Received 5/10/2010		
Principal Occupation  Executive Assistant		Name of Employer State of CT			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	ate Contributi	ons 50.00	\$50.00
Last Name Haines	First Name Karen		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi		Contribution 0429	ID#	Amount of Contribution
Residential Street Address 16 Orchard Rd		City Farmington		State CT	Zip Code 06032		te Received 5/10/2010		
Principal Occupation Admin. Mgr.		Name of Employer William Raveis Real Estate			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributi \$2	ons 25.00	\$25.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	Individu	ıals				
Last Name Fortunato	First Name Stephen			MI	Cash	contribution:    X   Personal C		Contribution 0430	ID#	Amount of Contribution
Residential Street Address 16 Orchard Rd		City Farmingt	con		State CT	Zip Code 06032		Pate Received 06/10/2010		
Principal Occupation IT Consultant		Name of E	mployer			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributio \$2	ons 25.00	\$25.00
Last Name Norton	First Name Maureen			MI	Cash	contribution:  X Personal C  Order Credit/Deb		Contribution 0434	ID#	Amount of Contribution
Residential Street Address 56 Edwards Rd		City Avon			State CT	Zip Code 06001		Pate Received 06/10/2010		
Principal Occupation  Market Insights Analyst		Name of E	mployer		•	Is this contribution association fundraising event listed in If yes, list Event # 060				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribution \$5	ons 50.00	\$50.00
Last Name Norton	First Name William			MI	Cash	contribution:  X Personal C  Order Credit/Deb		Contribution 0435	ID#	Amount of Contribution
Residential Street Address 56 Edwards Rd		City Avon			State CT	Zip Code 06001		Pate Received		
Principal Occupation Asso. Dean		Name of E	mployer		•	Is this contribution association fundraising event listed in If yes, list Event # 060	Section J			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribution \$5	ons 50.00	\$50.00
Last Name Bishnoi	First Name Vijay			MI	Cash	contribution:    X   Personal C		Contribution 0442	ID#	Amount of Contribution
Residential Street Address 64 Highcrest Rd		City Wetherst	ield		State CT	Zip Code 06109		Pate Received 06/10/2010		
Principal Occupation None		Name of E	mployer			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribution	ons 00.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							1	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ons fron	Individu	ıals		·		
Last Name Knaus	First Name Albert		MI	Cash	contribution:    X   Personal Cl		Contribution 0444	ID#	Amount of Contribution
Residential Street Address 59 Fairty Dr		City New Canaan		State CT	Zip Code 06840		te Received /10/2010		
Principal Occupation Retired Teacher		Name of Employer Retired			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contributio	ons 20.00	\$20.00
Last Name Doyle	First Name Phillip		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0445	ID#	Amount of Contribution
Residential Street Address 95 Wright Rd		City Canton		State CT	Zip Code 06019		e Received /10/2010		
Principal Occupation Urban Planner		Name of Employer  LADA PC			Is this contribution associa fundraising event listed in If yes, list Event # 060		1 1		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution	ons 00.00	\$100.00
Last Name House	First Name Arthur		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0446	ID#	Amount of Contribution
Residential Street Address 137 E Weatogue St		City Simsbury		State CT	Zip Code 06070-2537		te Received /10/2010		
Principal Occupation Espionage		Name of Employer Office of Director, National Intelligence	_		Is this contribution associa fundraising event listed in If yes, list Event # 060				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution \$10	ons 00.00	\$100.00
Last Name House	First Name Rita		MI J	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0447	ID#	Amount of Contribution
Residential Street Address 137 E Weatogue Rd		City Simsbury		State CT	Zip Code 06070		te Received /10/2010		
Principal Occupation  None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 060	Section J1	1 1		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name Rashin	First Name Steven		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi		Contribution 0449	n ID#	Amount of Contribution
Residential Street Address 4545 Connecticut Ave NW Apt 52		City Washington		State DC	Zip Code 20008		te Received 5/10/2010		
Principal Occupation Information Requested		Name of Employer Information Requested			Is this contribution associa fundraising event listed in If yes, list Event #		l? <b>''</b>	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	ate Contribut	ions 25.00	\$25.00
Last Name Tusch	First Name Paul		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi		Contribution 0451	n ID#	Amount of Contribution
Residential Street Address 31 Stone Fence Ln		City Stamford		State CT	Zip Code 06903		te Received		
Principal Occupation Attorney		Name of Employer  Cacace, Tusch & Santagata			Is this contribution associa fundraising event listed in If yes, list Event # 060			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	ate Contribut	ions 00.00	\$100.00
Last Name Fox	First Name Daniel		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi		Contribution 0453	n ID#	Amount of Contribution
Residential Street Address 287 Hamilton Ave Unit 2H		City Stamford		State CT	Zip Code 06902		te Received 5/10/2010		
Principal Occupation Attorney		Name of Employer Curtis Brickenhoff & Barrett			Is this contribution associa fundraising event listed in If yes, list Event # 060			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	ate Contribut \$1	ions 00.00	\$100.00
Last Name McCreery	First Name Edward		MI	Cash	contribution:  X Personal Cl  / Order Credit/Debi		Contribution 0454	n ID#	Amount of Contribution
Residential Street Address 14 Arden Ln		City Shelton		State CT	Zip Code 06484		te Received 5/10/2010		
Principal Occupation Attorney		Name of Employer Pullman & Comley, LLC			Is this contribution associa fundraising event listed in If yes, list Event # 060	Section J1		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	ate Contribut	ions 00.00	\$100.00

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Ite	emized Contribution	ons from	Individu	ıals				
Last Name Kowalski	First Name Ronald			MI	Cash	contribution:  X Personal C  y Order Credit/Deb		Contribution 0460	ı ID#	Amount of Contribution
Residential Street Address 545 N Park Avene		City Easton			State CT	Zip Code 06612-1249		Pate Received		
Principal Occupation Attorney		Name of Em	nployer Fusch & Santagata			Is this contribution association fundraising event listed in If yes, list Event # 060	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$2	ions 25.00	\$25.00
Last Name Ronan	First Name Timothy			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0464	ı ID#	Amount of Contribution
Residential Street Address 10 Pipers Hill Rd		City Wilton			State CT	Zip Code 06897		Pate Received		
Principal Occupation Attorney		Name of Em	nployer & Comley, LLC			Is this contribution association fundraising event listed in  If yes, list Event # 060			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Jackson	First Name Tommie			MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0465	n ID#	Amount of Contribution
Residential Street Address PO Box 8236		City Stamford		•	State CT	Zip Code 06905-8236		Pate Received		
Principal Occupation Information Requested		Name of Em Informati	nployer ion Requested		•	Is this contribution association fundraising event listed in If yes, list Event # 060	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Simmons	First Name Laura			MI A	Cash	contribution:    X   Personal C		Contribution 0466	ı ID#	Amount of Contribution
Residential Street Address 60 Grove St Unit 5		City Shelton			State CT	Zip Code 06484		Pate Received		
Principal Occupation Attorney		Name of Em Piazza, S	nployer immons & Grant			Is this contribution association fundraising event listed in If yes, list Event # 060			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$5	ions 50.00	\$50.00

		I. MO	NETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Item	ized Contributi	ons from	Individu	ıals				
Last Name Guarino	First Name George			MI	Cash	contribution:  X Personal C y Order Credit/Det		Contribution 0467	n ID#	Amount of Contribution
Residential Street Address 206 Old Sib Rd		City Ridgefield			State CT	Zip Code 06877		ate Received 6/10/2010		
Principal Occupation Attorney		Name of Emplo	<sup>yer</sup> Guarino, LLC			Is this contribution association fundraising event listed in If yes, list Event # 060	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	child of a lob	byist?	Aggre	gate Contribut	ions 50.00	\$50.00
Last Name Grant	First Name Richard			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0468	n ID#	Amount of Contribution
Residential Street Address 20-9 Hudson St		City Bethel			State CT	Zip Code 06801		ate Received 6/10/2010		
Principal Occupation Attorney		Name of Emplo	<sup>yer</sup> mons & Grant			Is this contribution association fundraising event listed in  If yes, list Event # 060			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyist child of a lob	byist?	Aggre	gate Contribut \$	ions 50.00	\$50.00
Last Name Walton	First Name Garland			MI	Cash	contribution:  X Personal C y Order Credit/Det		Contribution 0469	n ID#	Amount of Contribution
Residential Street Address 42 Blaine St # 3		City Fairfield			State CT	Zip Code 06824		ate Received 6/10/2010		
Principal Occupation Chief of State		Name of Emplo	yer			Is this contribution association fundraising event listed in If yes, list Event # 060	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	child of a lob	byist?	Aggre	gate Contribut \$1	ions 00.00	\$100.00
Last Name Shapiro	First Name Madeline			MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0459	n ID#	Amount of Contribution
Residential Street Address 77 Brook Run Ln		City Stamford			State CT	Zip Code 06905-3002		eate Received 6/10/2010		
Principal Occupation Realtor		Name of Emplo	yer			Is this contribution association fundraising event listed in If yes, list Event # 060			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyist child of a lob	byist?	Aggre	gate Contribut \$1	ions 00.00	\$100.00

		I. MONE	TARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemize	d Contributi	ons from	Individu	ıals				
Last Name Pollak	First Name Edward			MI	Cash	contribution:    X   Personal 0		Contribution 0431	ı ID#	Amount of Contribution
Residential Street Address 1920 Long Ridge Rd		City Stamford			State CT	Zip Code 06903-3232		Pate Received 16/10/2010		
Principal Occupation  None		Name of Employer None				Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive L	es X No	dependent	child of a lob	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Bieder	First Name Richard			MI	x Cash	contribution: Personal ( y Order Credit/De		Contribution 0448	ı ID#	Amount of Contribution
Residential Street Address 19 Millertown Rd		City Bedford			State NY	Zip Code 10506		Pate Received 06/10/2010		
Principal Occupation Attorney		Name of Employer Koskoff Koskoff	f & Bieder		•	Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive L	es X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Widland	First Name Michael			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution 0456	ı ID#	Amount of Contribution
Residential Street Address 42 Trails End Rd		City Weston			State CT	Zip Code 06883		Pate Received		
Principal Occupation Attorney		Name of Employer Shipman & Goo	odwin, LLP			Is this contribution associ fundraising event listed in If yes, list Event # 06	n Section J			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive L	es X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Louizos	First Name John			MI	Cash	contribution:  X Personal 0  y Order Credit/De		Contribution 0455	ı ID#	Amount of Contribution
Residential Street Address 1867 Shippan Ave		City Stamford			State CT	Zip Code 06902-8103		Pate Received 06/10/2010		
Principal Occupation Attorney		Name of Employer Curtis Brickenh	off & Barrett			Is this contribution associfundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive L	es X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Skovgaard	Robert				Cash Money	y Order X Credit/De		0605		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
128 Pond Rd		Stamford	I		СТ	06902-1831	0	6/10/2010	0	
Principal Occupation Attorney		Name of Er Self	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu \$1	utions	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID #	Amount of
Diamond	Mark				Cash Money	y Order X Personal Credit/De		0461		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
24 West Trl		Stamford	I		СТ	06903	0	6/10/2010	0	
Principal Occupation		Name of E	mployer		•	Is this contribution associ		1^	Yes	
Attorney		Diamono	d & Diamond, LLC	_		fundraising event listed in  If yes, list Event # 06	092010		No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	bbyist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
DeFusco	Leopold				Cash Money	y Order X Personal C		0462		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
35 Catherine St		Trumbull			СТ	06611	0	6/10/2010	0	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in		1^	Yes	
Attorney		Self				If yes, list Event # 06			No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	ıtions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lob	•		\$1	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Freedman	Richard				Cash Money	y Order X Personal C		0440		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
115 Haviland Rd		Stamford	<u> </u>		СТ	06903	0	6/10/2010	0	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes	
Real Estate		Garden	Homes Mgmt			If yes, list Event #	. DOUDOII .	x	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	dependent	child of a lob	-		\$1	100.00	\$100.00
government the contract is with:		LACCULIVE	Legisiative	'		110				

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Freedman	Nancy				Cash Money	y Order X Personal Credit/D		0441		Contribution
Residential Street Address	•	City			State	Zip Code	Е	ate Received		
115 Haviland Rd		Stamford			СТ	06903	0	6/10/201	0	
Principal Occupation Retired		Name of En	nployer			Is this contribution associated fundraising event listed If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID #	A
Kelly	Matthew				Cash Money	y Order X Personal Credit/D	Check	0443	on is "	Amount of Contribution
Residential Street Address	ı	City			State	Zip Code	Е	ate Received		
23 W River Rd		Pleasant	Valley		СТ	06063	0	6/10/201	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution associated		1^	Yes	
Airport Management		State of	Connecticut DOT			fundraising event listed  If yes, list Event # 06			No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	bbyist?	Aggre	egate Contribu	itions	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Shapiro	James				Cash Money	y Order X Personal Credit/D		0457		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
93 East Ln		Stamford	<u> </u>		СТ	06905	0	6/10/201	0	
Principal Occupation		Name of En	mployer			Is this contribution associated		1^	Yes	
Legislator		State of	Connecticut			fundraising event listed  If yes, list Event # 06			No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No		utor a lobbyis		Aggre	gate Contribu	ıtions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lob	-		\$1	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Tierney	Cristin				Cash Money	y Order X Personal Credit/D		0458		Contribution
Residential Street Address	•	City			State	Zip Code	Е	ate Received		
93 East Ln		Stamford	1		СТ	06905	0	6/10/201	0	
Principal Occupation		Name of Er	mployer			Is this contribution associ		1^	Yes	
Art Consultant		Cristin T	ierney Fine Arts Adv	isory		fundraising event listed  If yes, list Event # 06			No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	dependent	child of a lob	-		\$3	100.00	\$100.00
government the contract is with:	ш	Executive	Legisiative	'		110				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Fox	John				Cash Money	y Order Registration   X Personal (		0452		Contribution
Residential Street Address	<u> </u>	City			State	Zip Code		ate Received	l	
13 Apple Tree Dr		Stamford			СТ	06906	0	6/10/201	0	
Principal Occupation		Name of Er	nployer		•	Is this contribution assoc		1.	Yes	
Attorney		Curtis B8	ķВ	_		fundraising event listed in  If yes, list Event # 06	n Section . 092010		No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lob	-		\$	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	-	Contributi	on ID#	Amount of
Camhi	Ellen				Cash Money	y Order X Personal Credit/De		0438		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received	I	
50 Arnold Dr		Stamford			СТ	06905	0	6/10/201	0	
Principal Occupation		Name of Er	nployer			Is this contribution assoc fundraising event listed in		1.2	Yes	
Retired		None				If yes, list Event # 06			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Fox	Gerald			М	Cash Money	y Order X Personal Credit/De		0463		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received	!	
66 Fairview Ave		Stamford			СТ	06902	0	6/10/201	0	
Principal Occupation		Name of En				Is this contribution assoc fundraising event listed is			Yes	
Attorney		Fox & Fo	X LLP			If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis		Aggre	gate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	•		\$	100.00	\$100.00
government the contract is with:	First Name	Executive	Legislative	+ -	1			l		<u> </u>
Last Name Pameijer	First Name Huguet			MI	Cash	contribution:		Contributi 0436	on ID#	Amount of Contribution
		1			<u> </u>	y Order Credit/De		<u> </u>		-
Residential Street Address  10 Highwood Rd		City Simsbury	,		State CT	Zip Code 06070	1	ate Received 6/10/201		
Principal Occupation		Name of En	nployer			Is this contribution assoc	iated with	a 5	Yes	†
Attorney		Self				fundraising event listed is  If yes, list Event # 06		J1? _	No No	
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	dependent	child of a lob	-		\$	100.00	\$100.00
government the contract is with.										I

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemized Cont	ributions	s from	Individu	ials				
Last Name Pameijer	First Name Cornelis		M	ИI	Method of o	contribution:    X   Personal C		Contribution 0437	on ID#	Amount of Contribution
Residential Street Address 10 Highwood Rd		City Simsbury			State CT	Zip Code 06070		ate Received 6/10/2010		
Principal Occupation Retired		Name of Employer None				Is this contribution associ fundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative			tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	itions \$50.00	\$50.00
Last Name Ziotas	First Name Angelo		M	ИI	Method of o	contribution: Personal C Order X Credit/Del		Contribution 0560	on ID#	Amount of Contribution
Residential Street Address 6 Kimberly Pl		City New Canaan			State CT	Zip Code 06840-4511		ate Received 6/10/2010	0	
Principal Occupation Attorney		Name of Employer Self				Is this contribution associ fundraising event listed in If yes, list Event #		1? <b>_</b>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative			tor a lobbyist	byist?	Aggre	gate Contribu \$1	itions	\$100.00
Last Name McCluskey	First Name David		M	ИІ	Method of o	contribution:    X   Personal C		Contribution 0432	on ID#	Amount of Contribution
Residential Street Address 251 Westport Ter		City West Hartford	•		State CT	Zip Code 06107		ate Received 6/10/2010		
Principal Occupation Union Staff Rep.		Name of Employer  Connecticut State Emp Association	loyees	·		Is this contribution associ fundraising event listed in If yes, list Event # 06	Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	No Is		tor a lobbyist	byist?	Aggre	gate Contribu	tions \$50.00	\$50.00
Last Name Doolittle	First Name Theodore		M		Method of o	contribution:    X   Personal C		Contribution 0433	on ID#	Amount of Contribution
Residential Street Address 84 Walden St		City West Hartford			State CT	Zip Code 06107-1740		ate Received 6/10/2010		
Principal Occupation Attorney		Name of Employer United Healthcare				Is this contribution associ fundraising event listed in If yes, list Event #		12	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative			tor a lobbyist	byist?	Aggre	gate Contribu	utions	\$100.00

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Jepsen 2010								
		B. Itemized Contribu	tions fron	n Individu	ıals			
Last Name Martin	First Name David		MI	Cash	contribution:  Personal C y Order X Credit/Deb	heck 0514	ution ID#	Amount of Contribution
Residential Street Address 2121 Long Ridge Rd		City Stamford		State CT	Zip Code 06903-2105	Date Receiv		
Principal Occupation Senior Partner		Name of Employer Michael Allen Company			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00
Last Name Kelley	First Name James		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 0450	ution ID#	Amount of Contribution
Residential Street Address 26 Coopers Pond Rd		City Stamford		State CT	Zip Code 06905-3008	Date Receive 06/10/20		
Principal Occupation Firefighter		Name of Employer City of Stamford		•	Is this contribution associa fundraising event listed in If yes, list Event # 060		X Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00
Last Name Gioiello	First Name David		MI	Cash	contribution:  Personal C y Order X Credit/Deb	heck 0603	ution ID#	Amount of Contribution
Residential Street Address 65 Walnut Tree Hill Rd		City Shelton		State CT	Zip Code 06484-2514	Date Receiv		
Principal Occupation Industrial Hygienist		Name of Employer Industrial Health & Safety Consultants		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$50.00	\$50.00
Last Name Nastri	First Name Kathleen		MI	Cash	contribution:  Personal Contribution:  y Order  X Credit/Deb	heck 0567	ution ID#	Amount of Contribution
Residential Street Address 554 Busk Ct		City Cheshire		State CT	Zip Code 06410-4155	Date Receive 06/10/20		
Principal Occupation Attorney		Name of Employer Koskoff, Koskoff & Bieder		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Jepsen 2010								
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Zohdy	First Name Mohamed	1	MI	Cash	contribution: Personal Contribution:  y Order  X Credit/Deb	heck 050	tribution ID #	Amount of Contribution
Residential Street Address 77 Circle Dr		City Greenwich	•	State CT	Zip Code 06830-6738	Date Rec 06/10/		
Principal Occupation Owner		Name of Employer Zodi's 19th Hole			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	ontributions \$50.00	\$50.00
Last Name Diamond	First Name James		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 043	tribution ID #	Amount of Contribution
Residential Street Address 33 Fieldstone Rd		City Stamford		State CT	Zip Code 06902-2575	Date Rec 06/10/		
Principal Occupation Attorney		Name of Employer Diamond Law		•	Is this contribution associa fundraising event listed in If yes, list Event # 060		X Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	ontributions \$100.00	\$100.00
Last Name Geller	First Name Barbara		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 047	tribution ID #	Amount of Contribution
Residential Street Address 276 Marvelwood Dr		City New Haven		State CT	Zip Code 06515	Date Rec 06/11/		
Principal Occupation Administrator		Name of Employer State of Connecticut DMH	AS		Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	ontributions \$100.00	\$100.00
Last Name Gould	First Name Theodore		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 047	tribution ID#	Amount of Contribution
Residential Street Address Echo Hill Farm, PO Box 5564		City Charlottesville		State VA	Zip Code 22905	Date Rec 06/11/		
Principal Occupation Retired Investor		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	ontributions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	Individu	ıals		·			
Last Name Webb	First Name Susan		MI	Cash	contribution:    X   Personal Cl	neck 047	tribution ID#	Amount of Contribution		
Residential Street Address 30 Windermere Ln		City Stamford		State CT	Zip Code 06902	Date Rec 06/11/				
Principal Occupation Sales		Name of Employer Thomson/Reuters			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	ontributions \$100.00	\$100.00		
Last Name Smits	First Name Laura		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 047	tribution ID#	Amount of Contribution		
Residential Street Address 26 Birch Hill Rd		City Weston		State CT	Zip Code 06883-1711	Date Rec 06/11/				
Principal Occupation Registrar of Voters		Name of Employer Town of Weston			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	ontributions \$20.00	\$20.00		
Last Name Cunningham	First Name Carolin		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 051	tribution ID#	Amount of Contribution		
Residential Street Address 3815 Woodbine St		City Chevy Chase		State MD	Zip Code 20815-4958	Date Rec 06/11/				
Principal Occupation  Executive		Name of Employer Trust for the National Mall		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	ontributions \$100.00	\$100.00		
Last Name Lightbourne	First Name Taber		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 054	tribution ID#	Amount of Contribution		
Residential Street Address 251 W 89th St		City New York		State NY	Zip Code 10024-1712	Date Rec 06/11/				
Principal Occupation Research assistant		Name of Employer  Memorial Sloan Kettering			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	ontributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							I	FILING	DUE DATE	
Jepsen 2010										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Occhiogrosso	First Name Roy		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution	
Residential Street Address 827 Shuttle Meadow Ave		City New Britain		State CT	Zip Code 06052-1829		e Received /11/2010			
Principal Occupation  Consultant		Name of Employer Global Strategy Group		•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ste Contributio	ons 0.00	\$100.00	
Last Name Bergstresser	First Name Richard		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution	
Residential Street Address 200 Old Church Rd		City Greenwich		State CT	Zip Code 06830-4823		e Received /11/2010			
Principal Occupation Retired		Name of Employer none			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ite Contribution	ons 0.00	\$50.00	
Last Name Norman	First Name David		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck	Contribution I	ID#	Amount of Contribution	
Residential Street Address 16 Russell Dr		City Vernon		State CT	Zip Code 06066-6218		e Received /12/2010			
Principal Occupation  Bookseller		Name of Employer Barnes & Noble			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ste Contribution	ons 0.00	\$10.00	
Last Name Emmett	First Name Kathryn		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck	Contribution 1	ID#	Amount of Contribution	
Residential Street Address 47 Old Long Ridge Rd		City Stamford		State CT	Zip Code 06903-1620		e Received /12/2010			
Principal Occupation Attorney		Name of Employer self: Emmett & Glander		•	Is this contribution associa fundraising event listed in If yes, list Event #		? <b>X</b> 1	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	te Contributio	ons 0.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Spivack	Linda			В	Cash Money	y Order X Personal C		0474		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
100 Santa Fe Ave		Hamden			СТ	06517	0	6/12/2010	0	
Principal Occupation		Name of E	nployer		•	Is this contribution associ	ated with	a	Yes	Î
V.P. Nursing		Hartford	Hospital			fundraising event listed in If yes, list Event #	Section I	11? <b>x</b>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	utions	†
state contractor? Is yes, indicate which branch or branches of				1 °	child of a lob	•		5	\$50.00	\$50.00
government the contract is with:		Executive	Legislative	L  \	res X			1		1
Last Name Goldstein	First Name Robert			MI	Method of Cash	contribution:	`heck	Contribution	on ID#	Amount of Contribution
Goldstein	Robert					y Order Credit/De		0475		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
86 Barnes Rd		Stamford	I		СТ	06902	0	6/12/2010	0	
Principal Occupation		Name of E	mployer		•	Is this contribution associ			Yes	
Accountant		Self				fundraising event listed in If yes, list Event #	Section.	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of			Legislative		child of a lob	-		\$1	100.00	\$100.00
government the contract is with:		Executive	Legislative	+ =	I			1		<u> </u>
Last Name Mackay	First Name Marilyn			MI	Method of Cash	contribution:	Check	Contribution	on ID#	Amount of Contribution
Trackay	l larnyn	_			_	y Order X Credit/De	bit Card	0528		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
92 Wyassup Lake Rd		North Sto	onington		СТ	06359-1124	0	6/12/2010	0	_
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in			Yes	
none		retired				If yes, list Event #	i section .	x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	itions	†
state contractor? Is yes, indicate which branch or branches of					child of a lob	byist?	, riggic	-	\$25.00	\$25.00
government the contract is with:		Executive	Legislative	<u> </u>	res X	No				
Last Name	First Name			MI		contribution:	71 1	Contribution	on ID#	Amount of
Faxon	Joel				Cash Money	y Order Personal C		0505		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
38 Old Farm Hill Rd		Newtown	1		СТ	06470	0	6/14/2010	0	1
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in			Yes	
Attorney		Stratton	Faxon			If yes, list Event #	. Section .	x	No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Agore	gate Contribu	utions	†
state contractor? Is yes, indicate which branch or branches of			_	dependent	child of a lob	byist?	1.5510	-	100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	res X	No				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										
Jepsen 2010										
		B. Itemized Cont	ributions f	rom Individ	uals		·			
Last Name Faxon	First Name Carolyn		MI C	Cash	cy Order Personal C	Check 0506	ibution ID#	Amount of Contribution		
Residential Street Address 38 Old Farm Hill Rd		City Newtown		State CT	Zip Code 06470	Date Rece 06/14/2				
Principal Occupation  Consultant		Name of Employer Self			Is this contribution associ fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative		endent child of a lo		Aggregate Cor	\$100.00	\$100.00		
Last Name Marquis	First Name Tessa		MI	Cash	f contribution:  X Personal C ey Order Credit/Del	Check 050:	ibution ID #	Amount of Contribution		
Residential Street Address 67 Point Beach Dr		City Milford		State CT	Zip Code 06460-7647	Date Rece 06/14/2				
Principal Occupation Project Coord		Name of Employer New Standard Institute	e, Inc.	·	Is this contribution associ fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative		ontributor a lobbyi endent child of a lo	-	Aggregate Cor	stributions \$100.00	\$100.00		
Last Name Hoffstatter	First Name Ted		MI	Cash	f contribution:  X Personal C ey Order Credit/Del	Check 047	ibution ID #	Amount of Contribution		
Residential Street Address 201 Deer Run Rd		City Wilton	-	State CT	Zip Code 06897-1211	Date Rece 06/14/2				
Principal Occupation Teacher		Name of Employer Wilton Public Schools		•	Is this contribution associ fundraising event listed ir If yes, list Event # 06	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	No Is co	ontributor a lobbyi endent child of a lo Yes		Aggregate Cor	\$50.00	\$50.00		
Last Name Thompson	First Name Elizabeth		MI	Cash	f contribution:  X Personal C ey Order Credit/Del	Check 049:	ibution ID #	Amount of Contribution		
Residential Street Address 12 Spectacle Ln		City Ridgefield		State CT	Zip Code 06877-5714	Date Rece 06/14/2				
Principal Occupation None		Name of Employer None		•	Is this contribution associ fundraising event listed in If yes, list Event # 06	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative		ontributor a lobbyi endent child of a lo	-	Aggregate Cor	stributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemized Cont	ributions	from	Individu	als				
Last Name Straiton	First Name Richard		MI	II	Method of o	contribution:    X   Personal C		Contribution 0483	on ID#	Amount of Contribution
Residential Street Address 7 Codfish Hill Rd		City Bethel			State CT	Zip Code 06801-3301		ate Received		
Principal Occupation  Maintenence Director		Name of Employer Bethel Health Care		•		Is this contribution association fundraising event listed in If yes, list Event # 06.			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative			tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	stions \$50.00	\$50.00
Last Name Hennessey	First Name William		M	II	Method of o	ontribution: Personal C Order X Credit/Deb		Contribution 0576	on ID#	Amount of Contribution
Residential Street Address 25 Wallacks Dr		City Stamford			State CT	Zip Code 06902-7114		ate Received 6/14/201		
Principal Occupation Attorney		Name of Employer Sandak, Hennessey &	Greco, LLF	P		Is this contribution associa fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative			tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Jevera	First Name Kaye Hen	nessey	M	II	Method of o	contribution: Personal C Order X Credit/Deb		Contribution 0521	on ID#	Amount of Contribution
Residential Street Address 25 Wallacks Dr		City Stamford			State CT	Zip Code 06902-7114		ate Received		
Principal Occupation Attorney		Name of Employer  Kaye & Hennessey, LLG	C	•		Is this contribution associa fundraising event listed in If yes, list Event #		112	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative			tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Godfrey	First Name Robert		M	II	Method of d Cash Money	contribution:    X   Personal C		Contribution 0492	on ID#	Amount of Contribution
Residential Street Address 13 Stillman Ave		City Danbury			State CT	Zip Code 06810-8007		ate Received		
Principal Occupation State Rep.		Name of Employer State of Connecticut		•		Is this contribution association fundraising event listed in If yes, list Event # 06.	Section J		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative			tor a lobbyist	byist?	Aggre	gate Contribu	tions \$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										
Jepsen 2010										
		B. Itemized Contribu	itions fron	ı Individu	ıals					
Last Name Hartwell	First Name John		MI	Cash	contribution:    X   Personal Cl	0480	tion ID#	Amount of Contribution		
Residential Street Address 35 Beachside Ave		City Westport		State CT	Zip Code 06880	Date Receive 06/14/202				
Principal Occupation  Consultant		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # 061	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contril	outions \$100.00	\$100.00		
Last Name Smith	First Name Eric		MI P	Cash	contribution:  X Personal Cl y Order Credit/Debi	0503	tion ID#	Amount of Contribution		
Residential Street Address 491 Racebrook Rd		City Orange		State CT	Zip Code 06477	Date Receive 06/14/203				
Principal Occupation Attorney		Name of Employer Stratton Faxon		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contril	outions \$100.00	\$100.00		
Last Name Darvick	First Name Elinor		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	<b>l</b> 0487	tion ID#	Amount of Contribution		
Residential Street Address 97 Holmes Rd		City Ridgefield		State CT	Zip Code 06877	Date Receive 06/14/203				
Principal Occupation Retired		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event # 061	Section J1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contril	\$50.00	\$50.00		
Last Name Rothberg	First Name David		MI	Cash	contribution:    X   Personal Cl y Order	I 0494	tion ID#	Amount of Contribution		
Residential Street Address 16 Cleft Rock Ln		City Woodbridge		State CT	Zip Code 06525	Date Receive 06/14/20:				
Principal Occupation Information Requested		Name of Employer Information Requested		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contril	s50.00	\$50.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Johnson-Lundberg	Ann				Cash Money	y Order Registration   X Personal C		0486		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		1
45 Cooper Hill Rd		Ridgefield	d		СТ	06877	0	6/14/2010	0	
Principal Occupation Retired		Name of Er None	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event # 06		<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis		1	egate Contribu	-4:	<u> </u>
state contractor? Is yes, indicate which branch or branches of				dependent	child of a lob	byist?	Aggie	-	\$50.00	\$50.00
government the contract is with:		Executive	Legislative	L  \	res X	No		1		
Last Name Thompson	First Name Robert			MI	Cash	contribution:  X Personal 0  y Order Credit/De		Contribution 0493	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		1
12 Spectacle Ln		Ridgefield	d		СТ	06877	0	6/14/2010	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution associ		1^	Yes	Ī
None		None				fundraising event listed in  If yes, list Event # 06			No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	bbyist?	Aggre	egate Contribu	itions	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Bartlett	Maureen				Cash Money	y Order X Personal C		0481		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
27 Seth Low Mountain Rd		Ridgefield	d		СТ	06877	0	6/14/2010	0	1
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in			Yes	
Retired		None				If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 —	child of a lob	-		9	\$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID #	
Bartlett	Geoffrey				Cash	y Order		0482	on id #	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
27 Seth Low Mountain Rd		Ridgefield	d		СТ	06877-2021	0	6/14/2010	0	]
Principal Occupation		Name of E				Is this contribution associ fundraising event listed in		1^	Yes	
Programmer		Zero Cha	aos			If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis		Aggre	gate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of		<b>P</b> 2		dependent	child of a lob	-			\$50.00	\$50.00
government the contract is with:	Ш	Executive	Legislative		res 🔼	NO	1			<u> </u>

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Iter	mized Contributio	ons from	Individu	ıals				
Last Name Mcgerald	First Name Katherine			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 91 Ramapoo Rd		City Ridgefield			State CT	Zip Code 06877-3719		ate Received		
Principal Occupation  None		Name of Emp None	oloyer			Is this contribution associ fundraising event listed in If yes, list Event # 06		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contrib	stions \$50.00	\$50.00
Last Name Masone	First Name Thomas			MI	Cash	contribution:  X Personal ( y Order		Contributi 0479	on ID#	Amount of Contribution
Residential Street Address 28 Sunset Hill Rd		City Wilton			State CT	Zip Code 06897		ate Received 6/14/201		
Principal Occupation Retired		Name of Emp None	oloyer			Is this contribution associ fundraising event listed in If yes, list Event # 06		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Howard	First Name Richard			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributi 0484	on ID#	Amount of Contribution
Residential Street Address 308 N Salem Rd		City Ridgefield			State CT	Zip Code 06877		ate Received		
Principal Occupation Retired		Name of Emp None	oloyer			Is this contribution associ fundraising event listed in If yes, list Event # 06		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	ations \$50.00	\$50.00
Last Name James	First Name Elizabeth			MI	Cash	contribution:  X Personal ( y Order		Contributi 0485	on ID#	Amount of Contribution
Residential Street Address 61 Seaview Ave Apt 59		City Stamford			State CT	Zip Code 06902		ate Received 6/14/201		
Principal Occupation VP Corp. Comm		Name of Emp MBIA	oloyer			Is this contribution associ fundraising event listed in If yes, list Event # 06	n Section J	11? E	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contrib	ations \$60.00	\$60.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							]	FILING	DUE DATE	
Jepsen 2010										
		B. Itemized Contribut	ions fron	ı Individu	ıals		•			
Last Name Cocco	First Name Susan		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution 0488	ID#	Amount of Contribution	
Residential Street Address 513 Branchville Rd		City Ridgefield		State CT	Zip Code 06877-6032		te Received /14/2010			
Principal Occupation  Advertising		Name of Employer Colangelo			Is this contribution associa fundraising event listed in If yes, list Event # 061		11.	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$50.00	
Last Name Bruno	First Name Cynthia		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution 0489	ID#	Amount of Contribution	
Residential Street Address 355 Bennett's Farm Rd		City Ridgefield		State CT	Zip Code 06877		te Received /14/2010			
Principal Occupation Registrar of Voters		Name of Employer Town of Ridgefield		•	Is this contribution associa fundraising event listed in If yes, list Event # 061		11.			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$50.00	
Last Name Turpin	First Name Fred		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution 0490	ID#	Amount of Contribution	
Residential Street Address 18 Lakeview Dr		City Ridgefield		State CT	Zip Code 06877		te Received /14/2010			
Principal Occupation Psychoanalyst		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # 061		11.			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggrega	ate Contributio	ons 0.00	\$50.00	
Last Name Rotenberg	First Name David		MI L	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution 0495	ID#	Amount of Contribution	
Residential Street Address 13741 Wood Ln		City Minnetonka		State MN	Zip Code 55305		te Received /14/2010			
Principal Occupation Information Requested		Name of Employer retired		•	Is this contribution associa fundraising event listed in If yes, list Event #		? <b>x</b> 1	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemized C	ontributio	ons from	Individu	ıals				
Last Name Rotenberg	First Name Jean			MI	Cash	contribution:  X Personal y Order Credit/De		Contribution 0496	on ID#	Amount of Contribution
Residential Street Address 13741 Wood Ln		City Minnetonka			State MN	Zip Code 55305		ate Received 6/14/2010		
Principal Occupation Information Requested		Name of Employer retired				Is this contribution assoc fundraising event listed i If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisl	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	ntions	\$100.00
Last Name Whisker	First Name Patricia			MI	Cash	contribution:  X Personal y Order Credit/De		Contribution 0497	on ID#	Amount of Contribution
Residential Street Address 3 Strawberry Ln		City Old Lyme			State CT	Zip Code 06371		ate Received 6/14/2010	0	
Principal Occupation Retired		Name of Employer None				Is this contribution assoc fundraising event listed i If yes, list Event # 06	n Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisl	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions	\$100.00
Last Name Whisker	First Name Robert			MI	Cash	contribution:  X Personal y Order Credit/De		Contribution 0498	on ID#	Amount of Contribution
Residential Street Address 3 Strawberry Ln		City Old Lyme			State CT	Zip Code 06371		ate Received 6/14/2010		
Principal Occupation Retired		Name of Employer None				Is this contribution assoc fundraising event listed i If yes, list Event # 06	n Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisl	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions	\$100.00
Last Name Ash	First Name Lucinda			MI	Cash	contribution:  X Personal y Order Credit/De		Contribution 0500	on ID#	Amount of Contribution
Residential Street Address  1 West St Unit 125		City Simsbury			State CT	Zip Code 06070		ate Received 6/14/2010		
Principal Occupation None		Name of Employer None		_	•	Is this contribution assoc fundraising event listed i If yes, list Event # 06	n Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisl	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	itions \$35.00	\$35.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Jepsen 2010										
		B. Itemized Contributi	ions fron	Individu	ıals					
Last Name Plaut	First Name Jeffrey		MI	Cash	contribution:    X   Personal Cl	neck 0502	bution ID #	Amount of Contribution		
Residential Street Address 288 Grove St		City Montclair		State NJ	Zip Code 07042	Date Rece 06/14/2				
Principal Occupation  Consultant		Name of Employer Global Strategy Group			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Cor	stributions \$100.00	\$100.00		
Last Name Edwards	First Name Paul		MI T	Cash	contribution:  X Personal Cl  / Order Credit/Debi	neck 0504	bution ID #	Amount of Contribution		
Residential Street Address 35 Wyndemere Ct		City Cheshire		State CT	Zip Code 06410	Date Rece 06/14/2				
Principal Occupation Attorney		Name of Employer Stratton Faxon		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cor	stributions \$100.00	\$100.00		
Last Name ellovich	First Name david		MI	Cash	contribution: Personal Cl  Order X Credit/Debi	neck 054!	bution ID #	Amount of Contribution		
Residential Street Address 311 Fern St		City West Hartford		State CT	Zip Code 06119-1134	Date Rece 06/14/2				
Principal Occupation financial advisor		Name of Employer ubs			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cor	stributions \$100.00	\$100.00		
Last Name Goldstein	First Name Francine		MI	Cash	contribution:    X   Personal Cl	neck 0499	bution ID #	Amount of Contribution		
Residential Street Address 43 Good Hill Rd		City Weston		State CT	Zip Code 06883	Date Rece 06/14/2				
Principal Occupation  Marketing		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Cor	tributions \$100.00	\$100.00		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name golub	First Name david		MI	Cash	contribution: Personal C		Contribution I	ID#	Amount of Contribution
Residential Street Address 47 Old Long Ridge Rd		City Stamford		State CT	Zip Code 06903-1620		ate Received 6/15/2010		
Principal Occupation attorney		Name of Employer silver golub & teitell llp			Is this contribution associa fundraising event listed in If yes, list Event #		I Y	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribution \$100		\$100.00
Last Name Rifkin	First Name Howard		MI	Cash	contribution:  Personal Contribution:  y Order X Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 144 Sunny Reach Dr		City West Hartford		State CT	Zip Code 06117-1537		ate Received 6/16/2010		
Principal Occupation Public Official		Name of Employer State of CT Treasury		-	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggres	gate Contribution \$100		\$100.00
Last Name Putterman	First Name Bruce		MI	Cash	contribution: Personal Contribution:  y Order  X Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 57 Pioneer Dr		City West Hartford		State CT	Zip Code 06117-3031		ate Received 6/16/2010		
Principal Occupation  Consultant		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		1 1 1	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribution \$25	ns 5.00	\$25.00
Last Name Wood	First Name Jeffrey		MI	Cash	contribution: Personal C y Order X Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 260 France St		City Rocky Hill		State CT	Zip Code 06067-2916		ate Received 6/16/2010		
Principal Occupation Consultant		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggreg	gate Contribution \$25	ns 5.00	\$25.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Jepsen 2010											
		B. Itemized Contribut	ions fron	ı Individu	ıals						
Last Name Mandyck	First Name John		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 055	ribution ID#	Amount of Contribution			
Residential Street Address 1037 N Main St		City West Hartford		State CT	Zip Code 06117-2055	Date Rec 06/16/					
Principal Occupation VP, Sustainability		Name of Employer  Carrier Corporation			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$100.00	\$100.00			
Last Name Toomey	First Name Aoife		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 055	ribution ID #	Amount of Contribution			
Residential Street Address 308 1/2 11th St SE		City Washington		State DC	Zip Code 20003-2103	Date Rec 06/16/					
Principal Occupation Fundraising		Name of Employer Smithsonian Institution			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	entributions \$25.00	\$25.00			
Last Name Curry	First Name David		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 058	ribution ID #	Amount of Contribution			
Residential Street Address 23 Visgrove Ln		City West Hartford		State CT	Zip Code 06117-2333	Date Rec 06/17/					
Principal Occupation Attorney		Name of Employer RIU		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	sntributions \$100.00	\$100.00			
Last Name Evans	First Name Deane		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 051	ribution ID#	Amount of Contribution			
Residential Street Address 8 Fox Run Rd		City Norwalk		State CT	Zip Code 06850-2323	Date Rec 06/18/					
Principal Occupation Architect		Name of Employer NJIT		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	sntributions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Jepsen 2010											
		B. Itemized Cont	ributions	s from	Individu	ials					
Last Name Loeser	First Name John		М	11	Method of o	contribution: Personal C		Contribution 0607	on ID#	Amount of Contribution	
Residential Street Address PO Box 1252		City Weston			State CT	Zip Code 06883-0252		Date Received			
Principal Occupation Business Management		Name of Employer IBM				Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	de		tor a lobbyist child of a lob es	byist?	Aggre	egate Contribu	ations \$75.00	\$75.00	
Last Name Burns	First Name Joseph		М	1I	Method of o	contribution: Personal C  Order X Credit/Del		Contribution 0517	on ID#	Amount of Contribution	
Residential Street Address 163 Annelise Ave		City Southington			State CT	Zip Code 06489-1826		Oate Received			
Principal Occupation Attorney		Name of Employer Rome McGuigan P.C.		·		Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	de		tor a lobbyist child of a lob es	byist?	Aggre	egate Contribu	utions 100.00	\$100.00	
Last Name Carannante	First Name Vincenzo		M	1I	Method of o	contribution: Personal C		Contribution 0523	on ID#	Amount of Contribution	
Residential Street Address 60 Bainton Rd		City West Hartford	-		State CT	Zip Code 06117-2809		Pate Received			
Principal Occupation Attorney		Name of Employer Shipman & Goodwin,	LLP			Is this contribution associ- fundraising event listed in If yes, list Event #		<sub>J1?</sub>	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	de		tor a lobbyist child of a lob es	byist?	Aggre	egate Contribu	utions 100.00	\$100.00	
Last Name Lee	First Name K. J.		М	1I	Method of o	contribution: Personal C  Order X Credit/Del		Contribution 0526	on ID#	Amount of Contribution	
Residential Street Address 219 Uncas Point Rd		City Guilford			State CT	Zip Code 06437-3145		Date Received			
Principal Occupation Doctor		Name of Employer K. J. Lee, P.C.				Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	de		tor a lobbyist	byist?	Aggre	egate Contribu	utions 100.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Jepsen 2010											
		B. Itemized Contribu	itions fron	n Individu	ıals						
Last Name Hoberman	First Name Matthew		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0589	ution ID#	Amount of Contribution			
Residential Street Address 77 Pilgrim Rd		City West Hartford		State CT	Zip Code 06117-2244	Date Receiv 06/19/20					
Principal Occupation  None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Conti	sibutions \$100.00	\$100.00			
Last Name Rome	First Name Lewis		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 0590	ution ID#	Amount of Contribution			
Residential Street Address 16 High Hill Rd		City Bloomfield		State CT	Zip Code 06002-2110	Date Receiv 06/19/20					
Principal Occupation Attorney		Name of Employer Rome McGuigan P.C.		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contr	ributions \$100.00	\$100.00			
Last Name Ruel	First Name Debra		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 0577	ution ID#	Amount of Contribution			
Residential Street Address 38 Enrico Rd		City Bolton		State CT	Zip Code 06043-7553	Date Receiv					
Principal Occupation Attorney		Name of Employer Rome McGuigan P.C.			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	bbyist?	Aggregate Conti	ributions \$100.00	\$100.00			
Last Name Roberts	First Name William		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0580	ution ID#	Amount of Contribution			
Residential Street Address 58 Country Ln		City Collinsville		State CT	Zip Code 06019-3406	Date Receiv 06/19/20					
Principal Occupation Attorney		Name of Employer Shipman & Goodwin, LLP		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contr	ributions \$100.00	\$100.00			

		I. MONETAF	RY RECE	IPTS	(Section	n A-I)				
NAME OF COMMITTEE								1	FILING	DUE DATE
Jepsen 2010										
		B. Itemized Cor	tributions	from	Individu	als				
Last Name Byrne	First Name Julie		MI M		Method of c	contribution: Personal C Order X Credit/Deb		Contribution 0598	ID#	Amount of Contribution
Residential Street Address 1831 Mill Plain Rd		City Fairfield			State CT	Zip Code 06824-3033		Pate Received 16/19/2010		
Principal Occupation  Lawyer		Name of Employer Shipman & Goodwin,	LLP			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes 2  Executive Legislativ	de		tor a lobbyist child of a lobl	byist?	Aggre	egate Contributio	ons 0.00	\$100.00
Last Name Bronner	First Name Felix		M	I	Method of c Cash Money	contribution:  X Personal C Order Credit/Del		Contribution 0013	ID#	Amount of Contribution
Residential Street Address 33 Ferncliff Dr		City West Hartford			State CT	Zip Code 06117-1013		Pate Received 06/19/2010		
Principal Occupation Professor Emeritus		Name of Employer None		•		Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Yes Executive Legislativ	de		tor a lobbyist	byist?	Aggre	egate Contribution	ons 5.00	\$25.00
Last Name Ott	First Name Deborah		M	I	Method of c	contribution:  X Personal C Order Credit/Deb		Contribution 0004	ID#	Amount of Contribution
Residential Street Address 15 Castlewood Rd		City Weatogue	•		State CT	Zip Code 06089		Pate Received		
Principal Occupation Teacher		Name of Employer East Granby High Sci	nool			Is this contribution association fundraising event listed in If yes, list Event # 060	Section J			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes 2  Executive Legislative	de		tor a lobbyist child of a lobbes	byist?	Aggre	egate Contributio	ons 5.00	\$25.00
Last Name Clemow	First Name Brian		M	I	Method of c	contribution:    X   Personal C		Contribution 0023	ID#	Amount of Contribution
Residential Street Address 154 Steele Rd		City West Hartford			State CT	Zip Code 06119		Date Received 06/19/2010		
Principal Occupation Attorney		Name of Employer Shipman & Goodwin,	LLP			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Yes Executive Legislativ	de		tor a lobbyist	byist?	Aggre	egate Contribution	ons 0.00	\$100.00

		I. MONETA	ARY REC	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								I	FILING	DUE DATE
Jepsen 2010										
		B. Itemized C	Contributio	ns from	Individu	als		·		
Last Name Silver	First Name Richard			MI A	Method of o	contribution: Personal C Order X Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 95 Wild Duck Rd		City Stamford			State CT	Zip Code 06903-3628	- 1	ate Received 6/19/2010		
Principal Occupation Attorney		Name of Employer Silver, Golub & Te	itell			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	child of a lob	byist?	Aggre	gate Contributio \$100		\$100.00
Last Name Pappas Phillips	First Name Anne			MI	Method of o	contribution: Personal C Order X Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 3300 Park Ave Unit 5		City Bridgeport			State CT	Zip Code 06604-1140	- 1	ate Received 6/19/2010		
Principal Occupation Attorney		Name of Employer Anne Pappas Philli	ips, LLC			Is this contribution association fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	ator a lobbyist	byist?	Aggre	gate Contributio \$50	ons 0.00	\$50.00
Last Name Borglum	First Name			MI	Method of o	contribution:  X Personal C  Order Credit/Det		Contribution 1	ID#	Amount of Contribution
Residential Street Address 80 Borglum Rd		City Wilton			State <del>CT</del>	Zip Code <del>06897</del>	- 1	ate Received 6/19/2010		
Principal Occupation  General Contractor		Name of Employer Self				Is this contribution association fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyist child of a lob es	byist?	Aggre	gate Contributio \$40	ons 0.00	<del>\$20.00</del>
Last Name Borglum	First Name  David			MI	Cash	contribution:    X   Personal C		Contribution I	ID#	Amount of Contribution
Residential Street Address 80 Borglum Rd		City <b>Wilton</b>			State CT	Zip Code <b>06897</b>	- 1	ate Received 6/19/2010	,	
Principal Occupation  General Contractor		Name of Employer Self				Is this contribution association fundraising event listed in If yes, list Event # 06.	Section J			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyist child of a lob es	byist?	Aggre	gate Contributio	ons <b>D.00</b>	\$20.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Jepsen 2010											
		B. Itemized Contribut	ions fron	ı Individu	ıals						
Last Name Conti	First Name William		MI	Cash	contribution:    X   Personal Cl	heck 00	ontribution ID#	Amount of Contribution			
Residential Street Address 3 Sarcka Ln		City Litchfield		State CT	Zip Code 06759-2416		eceived 9/2010				
Principal Occupation Attorney		Name of Employer Conti & Levy			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00			
Last Name Weisman	First Name Joel		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 00	ontribution ID #	Amount of Contribution			
Residential Street Address 25 Forest Hills Dr		City West Hartford		State CT	Zip Code 06117	Date Ro 06/19	eceived 9/2010				
Principal Occupation  Real Estate Developer		Name of Employer RWR Enterprises		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00			
Last Name Sullivan	First Name Robert		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 00	ontribution ID#	Amount of Contribution			
Residential Street Address 46 N Whittlesey Ave		City Wallingford		State CT	Zip Code 06492		eceived 9/2010				
Principal Occupation VP		Name of Employer HAIG		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00			
Last Name Garrison	First Name Joseph		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 05	ontribution ID#	Amount of Contribution			
Residential Street Address 4 Juniper Point Rd		City Branford		State CT	Zip Code 06405-5654		eceived 9/2010				
Principal Occupation  Lawyer		Name of Employer Garrison Levin & Epstein		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contributi	ons from	Individu	ıals					
Last Name Benjamin	First Name Daniel		MI	Cash	contribution:    X   Personal Character   Credit/Debi	neck 000	tribution ID#	Amount of Contribution		
Residential Street Address 206 Lynam Rd		City Stamford		State CT	Zip Code 06903	Date Rec 06/19/				
Principal Occupation Attorney		Name of Employer Benjamin & Gold			Is this contribution associated fundraising event listed in If yes, list Event # 060		X Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	\$100.00	\$100.00		
Last Name <del>Orland</del>	First Name Carole		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	neck 000	tribution ID#	Amount of Contribution		
Residential Street Address  94 Compo Rd N		City <del>Westport</del>		State <del>CT</del>	Zip Code <del>06880</del>	Date Rec <del>06/19/</del>				
Principal Occupation  Attorney		Name of Employer  Broder & Orland, LLC		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes  No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	ontributions \$200.00	<del>\$100.00</del>		
Last Name <del>Orland</del>	First Name Burton		MI	Cash	contribution:  X Personal Ch  / Order	neck 003	tribution ID #	Amount of Contribution		
Residential Street Address  94 Compo Rd N		City <del>Westport</del>		State <del>CT</del>	Zip Code <del>06880</del>	Date Rec <del>06/19/</del>				
Principal Occupation  Attorney/Consultant		Name of Employer Self		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes  No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	sontributions \$200.00	<del>\$100.00</del>		
Last Name Orland	First Name Burton		МІ	Cash	contribution:  X Personal Ch  Order Credit/Debi	neck 10!	tribution ID#	Amount of Contribution		
Residential Street Address 94 Compo Rd N		City Westport		State CT	Zip Code <b>06880</b>	Date Rec <b>06/19</b>	eeived 0/2010			
Principal Occupation  Attorney/Consultant		Name of Employer Self		•	Is this contribution associal fundraising event listed in If yes, list Event # <b>061</b>	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob ves	byist?	Aggregate Co	\$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE								FILING	DUE DATE		
Jepsen 2010											
		B. Itemized Contribution	ons from	Individu	ıals						
Last Name Orland	First Name Carole		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contributio	on ID#	Amount of Contribution		
Residential Street Address 94 Compo Rd N		City Westport		State CT	Zip Code <b>06880</b>		te Received 5/19/20	10			
Principal Occupation  Attorney		Name of Employer  Broder & Orland, LLC			Is this contribution associal fundraising event listed in 1 If yes, list Event # <b>061</b>			Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	sate Contribu	tions 00.00	\$100.00		
Last Name Freedman	First Name Susan		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contributio	on ID#	Amount of Contribution		
Residential Street Address 213 Tryon St		City South Glastonbury		State CT	Zip Code 06073		te Received 5/19/2010	)			
Principal Occupation Attorney		Name of Employer Shipman & Goodwin, LLP			Is this contribution associal fundraising event listed in the second of the second second in the second sec		l? <b>_</b>	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	ate Contribu \$1	tions .00.00	\$100.00		
Last Name Budlong	First Name Michael		MI	Cash	contribution:    X   Personal Character   Credit/Debit		Contribution	on ID#	Amount of Contribution		
Residential Street Address 48 Cider Mill Hts		City North Granby		State CT	Zip Code 06060		te Received	)			
Principal Occupation Attorney		Name of Employer Self			Is this contribution associal fundraising event listed in S If yes, list Event #		l? <b>_</b>	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	ate Contribu \$1	tions .00.00	\$100.00		
Last Name Spector	First Name Jessica		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contributio	on ID #	Amount of Contribution		
Residential Street Address 220 Weston Rd		City Weston		State CT	Zip Code 06883-2101		te Received 5/19/2010	)			
Principal Occupation Writer		Name of Employer Self			Is this contribution associal fundraising event listed in S If yes, list Event #		1?	Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	ate Contribu	tions .00.00	\$100.00		

		I. N	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name Thanhauser	First Name Albert			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 2521 Palisade Ave # 4C		City Bronx			State NY	Zip Code 10463		Date Received		
Principal Occupation  Consultant		Name of E None	mployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Thanhauser	First Name Yvonne			MI	Cash	contribution:  X Personal ( y Order		Contributi	on ID#	Amount of Contribution
Residential Street Address 2521 Palisade Ave # 4C		City Bronx			State NY	Zip Code 10463		Date Received 06/19/201		
Principal Occupation  None		Name of E None	mployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Wentworth	First Name Ralph			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 12 Stuart Dr		City Bloomfie	ıld		State CT	Zip Code 06002		Date Received		
Principal Occupation Ins. Agent		Name of E Wentwo	mployer rth-DeAngelis Inc			Is this contribution associ fundraising event listed in If yes, list Event #		112 <b>L</b>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribi	ations 100.00	\$100.00
Last Name Margolis	First Name Emanuel			MI	Cash	contribution:  X Personal ( y Order		Contributi	on ID#	Amount of Contribution
Residential Street Address 72 Myrtle Ave		City Westpor	t		State CT	Zip Code 06880		Date Received 06/19/201		
Principal Occupation Attorney		Name of E Self	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contrib	ations \$25.00	\$25.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	DUE DATE	
Jepsen 2010											
		B. It	emized Contributi	ons from	Individu	ıals					
Last Name Callender	First Name Olga			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi	on ID#	Amount of Contribution	
Residential Street Address 108 Georgetown Rd		City Forestvill	e		State CT	Zip Code 06010		Date Received			
Principal Occupation Retired		Name of Er None	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es X	byist?	Aggre	egate Contrib	utions \$25.00	\$25.00	
Last Name Seltzer	First Name Richard			MI	Cash	contribution:  X Personal G y Order Credit/De		Contributi	on ID#	Amount of Contribution	
Residential Street Address 220 Middle Rdg		City New Can	aan		State CT	Zip Code 06840		Oate Received 06/19/201			
Principal Occupation Retired		Name of Er None	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es X	byist?	Aggre	egate Contrib	utions \$50.00	\$50.00	
Last Name Donovan	First Name Brian			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution	
Residential Street Address 134 Fairview Ave		City Stamford	I		State CT	Zip Code 06902		Pate Received 06/19/201			
Principal Occupation Attorney		Name of Er Ernst & `	nployer Young, LLP		•	Is this contribution associfundraising event listed in If yes, list Event # 06	n Section .	<sub>J1?</sub> [2	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contrib	utions 100.00	\$100.00	
Last Name Banbury	First Name Richard			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi	on ID#	Amount of Contribution	
Residential Street Address 21 Cheney Rd		City Marlboro	ugh		State CT	Zip Code 06447-1328		0ate Received 06/19/201			
Principal Occupation Attorney		Name of Er Rome Mo	nployer cGuigan, PC			Is this contribution associ fundraising event listed in If yes, list Event #		J12 L	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contrib	utions 100.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FIL	ING DUE DATE			
Jepsen 2010											
		B. Itemized Contributi	ons from	Individu	ıals						
Last Name Staib	First Name Karen		MI	Cash	contribution:  X Personal Characteristics of the contribution:  y Order Credit/Debi	neck	Contribution ID #	Amount of Contribution			
Residential Street Address 55 Grennan Rd		City West Hartford		State CT	Zip Code 06107		Received 19/2010				
Principal Occupation Attorney		Name of Employer Shipman & Goodwin, LLP			Is this contribution associate fundraising event listed in the street If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate	e Contributions \$100.00	\$100.00			
Last Name Murphy	First Name Patricia		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck	Contribution ID#	Amount of Contribution			
Residential Street Address 410 E Main St Apt 604		City Meriden		State CT	Zip Code 06450		Received 19/2010				
Principal Occupation Receptionist		Name of Employer Shipman & Goodwin, LLP			Is this contribution associal fundraising event listed in S If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	e Contributions \$25.00	\$25.00			
Last Name Schuurmans	First Name Hans		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck (	Contribution ID#	Amount of Contribution			
Residential Street Address  5 Old Field Ln		City Redding		State <del>CT</del>	Zip Code <del>06896</del>		Received 19/2010				
Principal Occupation  Architect		Name of Employer Fletcher Thompson		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	e Contributions <del>\$200.0</del> 4	<del>\$100.00</del>			
Last Name Schuurmans	First Name Hans		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck	Contribution ID#	Amount of Contribution			
Residential Street Address 5 Old Field Ln		City Redding		State CT	Zip Code <b>06896</b>		Received /19/2010				
Principal Occupation  Architect		Name of Employer Fletcher Thompson		-	Is this contribution associal fundraising event listed in If yes, list Event # <b>061</b>	Section J1?	X Yes				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate	e Contributions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contributi	ions fron	Individu	ıals					
Last Name Felipe	First Name Ruben		MI	x Cash	contribution: Personal Cl	heck 10	ontribution ID #	Amount of Contribution		
Residential Street Address  195 Crestview Dr		City  Bridgeport		State CT	Zip Code <b>06606-2057</b>		eceived 1 <b>9/2010</b>			
Principal Occupation  Deputy Chief of Staff		Name of Employer  City of Bridgeport			Is this contribution associa fundraising event listed in If yes, list Event # <b>061</b>		X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$20.00	\$20.00		
Last Name Felipe	First Name Ruben		MI	X Cash	contribution: Personal Cl	heck 00	ontribution ID #	Amount of Contribution		
Residential Street Address  195 Crestview Dr		City Bridgeport		State <del>CT</del>	Zip Code <del>06606-2057</del>	Date Re	eceived <del>9/2010</del>			
Principal Occupation  Deputy Chief of Staff		Name of Employer City of Bridgeport			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$40.00	<del>\$20.00</del>		
Last Name <del>Skyers</del>	First Name Eroll		MI	Cash	contribution:   X Personal Cl  Order Credit/Debi	heck 00	ontribution ID #	Amount of Contribution		
Residential Street Address  1 Crozier Ct		City <del>Oxford</del>		State <del>CT</del>	Zip Code <del>06478</del>		eceived <del>9/2010</del>			
Principal Occupation  Lawyer		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate (	Contributions \$50.00	<del>\$25.00</del>		
Last Name Skyers	First Name Eroll		MI	Cash	contribution:  X Personal Cl  / Order Credit/Debi	heck 10	ontribution ID #	Amount of Contribution		
Residential Street Address  1 Crozier Ct		City Oxford		State CT	Zip Code <b>06478</b>		eceived 19/2010			
Principal Occupation  Lawyer		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # 061	Section J1?	X Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate (	Contributions \$25.00	\$25.00		

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILIN	G DUE DATE
Jepsen 2010								
		B. Itemized Contributi	ons from	Individu	ıals			
Last Name Costa	First Name  Joseph		MI	Cash	contribution:    X   Personal Character   Credit/Debi	neck 1	ontribution ID#	Amount of Contribution
Residential Street Address 150 Beechwood Ave		City Trumbull		State CT	Zip Code <b>06611</b>		Received <b>19/2010</b>	
Principal Occupation  Architect		Name of Employer Fletcher Thompson		•	Is this contribution associate fundraising event listed in St. If yes, list Event # <b>061</b>		X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	child of a lob	byist?	Aggregate	Contributions \$100.00	\$100.00
Last Name <del>Costa</del>	First Name <del>Joseph</del>		MI	Cash	contribution:   X Personal Character  y Order Credit/Debi	neck 0	ontribution ID#	Amount of Contribution
Residential Street Address  150 Beechwood Ave		City Trumbull		State <del>CT</del>	Zip Code <del>06611</del>		Received <del>9/2010</del>	
Principal Occupation  Architect		Name of Employer Fletcher Thompson			Is this contribution associat fundraising event listed in S If yes, list Event #		Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyist child of a lob es	byist?	Aggregate	Contributions \$200.00	\$100.00
Last Name <del>Anastasi</del>	First Name  Mark		MI	Cash	contribution:   X Personal Charactery Order  Credit/Debi	neck 0	ontribution ID#	Amount of Contribution
Residential Street Address  25 Sullivan Pl		City Bridgeport		State <del>CT</del>	Zip Code <del>06610-1026</del>		Received <del>9/2010</del>	
Principal Occupation  Attorney		Name of Employer <del>City of Bridgeport</del>			Is this contribution associat fundraising event listed in S If yes, list Event #		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyist child of a lob es x	byist?	Aggregate	Contributions \$100.00	<del>\$50.00</del>
Last Name Anastasi	First Name Mark		MI	Cash	contribution:  X Personal Characteristics  y Order Credit/Debi	neck 1	ontribution ID#	Amount of Contribution
Residential Street Address 25 Sullivan Pl		City  Bridgeport		State CT	Zip Code <b>06610-1026</b>		Received <b>19/2010</b>	
Principal Occupation Attorney		Name of Employer  City of Bridgeport			Is this contribution associate fundraising event listed in State of the If yes, list Event # <b>061</b>	Section J1?	X Yes	
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyist child of a lob es	byist?	Aggregate	Contributions \$50.00	\$50.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
		B. Itemized Contribut	ions from	Individu	ıals			
	First Name <b>Robert</b>		MI	Cash	contribution:    X   Personal C	heck 1050	tion ID#	Amount of Contribution
Residential Street Address  119 Greystone Rd		City  Bridgeport		State CT	Zip Code <b>06610-1254</b>	Date Receive <b>06/19/2</b>		
Principal Occupation Retired		Name of Employer  None		<b>!</b>	Is this contribution associa fundraising event listed in If yes, list Event # <b>06</b> :		X Yes No	
Is contributor a principal of a state contractor or state contractor? Is yes, indicate which branch or branches of government the contract is with:	prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contri	butions 100.00	\$100.00
	First Name <del>Robert</del>		MI	Cash	contribution:   X Personal Contribution:  y Order Credit/Deb	heck 0033	tion ID#	Amount of Contribution
Residential Street Address  119 Greystone Rd		City Bridgeport		State <del>CT</del>	Zip Code 06610-1254	Date Receive 06/19/20		
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor or state contractor? Is yes, indicate which branch or branches of government the contract is with:	prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$200.00	<del>\$100.00</del>
	First Name Tyrone		MI	Cash	contribution:  X Personal Ci y Order Credit/Deb	heck 0034	tion ID#	Amount of Contribution
Residential Street Address  2600 Park Ave Apt 9U		City Bridgeport		State CT	Zip Code 06604-1303	Date Receive 06/19/20		
Principal Occupation  Dir. of Legislative Affairs		Name of Employer City of Bridgeport			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No	
Is contributor a principal of a state contractor or state contractor? Is yes, indicate which branch or branches of government the contract is with:	prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contri	butions <del>\$40.00</del>	<del>\$20.00</del>
	First Name <b>Tyrone</b>		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 1051	tion ID#	Amount of Contribution
Residential Street Address 2600 Park Ave Apt 9U		City  Bridgeport		State CT	Zip Code <b>06604-1303</b>	Date Receive <b>06/19/2</b>		
Principal Occupation  Dir. of Legislative Affairs		Name of Employer  City of Bridgeport		•	Is this contribution associa fundraising event listed in If yes, list Event # <b>06</b> :	Section J1?	X Yes No	
Is contributor a principal of a state contractor or state contractor? Is yes, indicate which branch or branches of government the contract is with:		Yes X No  Executive Legislative		utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$20.00	\$20.00

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILIN	G DUE DATE
Jepsen 2010								
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name Wood	First Name  Adam		MI	Cash	contribution:    X   Personal Cl	neck 10	ontribution ID #	Amount of Contribution
Residential Street Address 2600 France St		City Rocky Hill		State CT	Zip Code <b>06067</b>		eceived L <b>9/2010</b>	
Principal Occupation  Chief of Staff Mayor's Office		Name of Employer  City of Bridgeport		•	Is this contribution associa fundraising event listed in If yes, list Event # <b>Q61</b>		X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$100.00	\$100.00
Last Name <del>Wood</del>	First Name Adam		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	neck 00	ontribution ID #	Amount of Contribution
Residential Street Address <del>2600 France St</del>		City Rocky Hill		State CT	Zip Code <del>06067</del>		eceived <del>9/2010</del>	
Principal Occupation  Chief of Staff — Mayor's Office		Name of Employer  City of Bridgeport			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$200.00	\$ <del>100.00</del>
Last Name McCarthy	First Name Thomas		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	neck 10	ontribution ID #	Amount of Contribution
Residential Street Address 135 Harlem Ave		City  Bridgeport		State CT	Zip Code <b>06606</b>		eceived	
Principal Occupation  Deputy Director of Labor Relations		Name of Employer  City of Bridgeport			Is this contribution associa fundraising event listed in If yes, list Event # <b>061</b>	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate (	Contributions \$100.00	\$100.00
Last Name McCarthy	First Name Thomas		MI	Cash	contribution:	neck 00	ontribution ID #	Amount of Contribution
Residential Street Address  135 Harlem Ave		City Bridgeport		State <del>CT</del>	Zip Code <del>06606</del>		eceived <del>9/2010</del>	
Principal Occupation  Deputy Director of Labor Relations	,	Name of Employer City of Bridgeport			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate (	Contributions \$200.00	\$ <del>100.00</del>

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
		B. Itemized Contribu	itions fron	ı Individu	ıals			
Last Name Graustein	First Name William		MI	Cash	contribution:    X   Personal C y Order	heck 0011	tion ID#	Amount of Contribution
Residential Street Address 250 Dyer St		City New Haven		State CT	Zip Code 06511	Date Receive 06/19/20		
Principal Occupation  None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes  No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00
Last Name DiNardo	First Name Betty		MI L	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0037	ition ID#	Amount of Contribution
Residential Street Address 1883 Fairfield Beach Rd		City Fairfield		State CT	Zip Code 06824	Date Receive 06/19/20		
Principal Occupation  Information Requested		Name of Employer Information Requested			Is this contribution associa fundraising event listed in If yes, list Event # 061	Section J1?	X Yes	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00
Last Name DiNardo	First Name Salvatore	e	MI	Cash	contribution:    X   Personal C y Order	heck <b>1055</b>	tion ID#	Amount of Contribution
Residential Street Address 323 North Ave		City <b>Bridgeport</b>		State CT	Zip Code <b>06606</b>	Date Receive		
Principal Occupation  Partner		Name of Employer  Peter DiNardo Enterpris	es	•	Is this contribution association fundraising event listed in If yes, list Event # 06:	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contri	butions 100.00	\$100.00
Last Name DiNardo	First Name Leonard		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 1056	ition ID#	Amount of Contribution
Residential Street Address 323 North Ave		City Bridgeport		State CT	Zip Code <b>06606</b>	Date Receive <b>06/19/2</b>		
Principal Occupation  Partner		Name of Employer  Peter DiNardo Enterpris	es	•	Is this contribution associa fundraising event listed in If yes, list Event # 06:	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contri	butions	\$100.00

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name <del>DiNardo</del>	First Name Salvatore		MI	Cash	contribution:   X Personal Cl  Order Credit/Debi	heck 003	ribution ID #	Amount of Contribution
Residential Street Address  323 North Ave		City Bridgeport		State <del>CT</del>	Zip Code <del>06606</del>	Date Reco		
Principal Occupation  Partner		Name of Employer  Peter DiNardo Enterprises			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	ntributions <del>\$200.00</del>	\$ <del>100.00</del>
Last Name <del>DiNardo</del>	First Name Leonard		MI	Cash	contribution:  X Personal Cl  Order Credit/Debi	heck 004	ribution ID #	Amount of Contribution
Residential Street Address <del>323 North Ave</del>		City Bridgeport		State <del>CT</del>	Zip Code <del>06606</del>	Date Reco		
Principal Occupation  Partner		Name of Employer  Peter DiNardo Enterprises			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	ntributions \$200.00	<del>\$100.00</del>
Last Name <del>DiNardo</del>	First Name  Melissa		MI	Cash	contribution:   X Personal Cl  Order Credit/Debi	heck 003	ribution ID#	Amount of Contribution
Residential Street Address  123 Governor Trumbull Way		City Trumbull		State <del>CT</del>	Zip Code <del>06611</del>	Date Reco		
Principal Occupation  Information Requested		Name of Employer  Information Requested		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	stributions \$200.00	<del>\$100.00</del>
Last Name DiNardo	First Name Melissa		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	heck 105	ribution ID#	Amount of Contribution
Residential Street Address  123 Governor Trumbull Way		City Trumbull		State CT	Zip Code <b>06611</b>	Date Reco		
Principal Occupation  Information Requested		Name of Employer Information Requested	_		Is this contribution associa fundraising event listed in If yes, list Event # <b>Q61</b>	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	ntributions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILIN	G DUE DATE
Jepsen 2010								
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name Flynn	First Name Thomas		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 0024	oution ID #	Amount of Contribution
Residential Street Address 254 Olde Stage Rd		City Glastonbury		State CT	Zip Code 06033	Date Recei		
Principal Occupation  Lawyer		Name of Employer Shipman & Goodwin, LLP			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$100.00	\$100.00
Last Name Bosco	First Name <del>David</del>		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 0027	oution ID #	Amount of Contribution
Residential Street Address  14 South Ln		City Redding Ridge		State <del>CT</del>	Zip Code <del>06876</del>	Date Recei		
Principal Occupation  Union Rep		Name of Employer FourC's SEIU Local 1973		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$200.00	<del>\$100.00</del>
Last Name Bosco	First Name  David		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck <b>104</b> 4	oution ID #	Amount of Contribution
Residential Street Address  14 South Ln		City Redding Ridge		State CT	Zip Code <b>06876</b>	Date Recei		
Principal Occupation Union Rep		Name of Employer FourC's SEIU Local 1973			Is this contribution associa fundraising event listed in If yes, list Event # <b>061</b>	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Con	tributions \$100.00	\$100.00
Last Name Jortner	First Name Frederick		MI	Cash	contribution:    X   Personal Cl	heck 0054	oution ID#	Amount of Contribution
Residential Street Address 76 Schultz Rd		City Kensington		State CT	Zip Code 06037	Date Recei		
Principal Occupation Retired		Name of Employer None	_	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Con	tributions \$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
		B. Itemized Contrib	outions from	n Individu	ıals			
Last Name Blank	First Name Terry		MI	Cash	contribution:    X   Personal C	heck 0052	ution ID#	Amount of Contribution
Residential Street Address 99 Gutzon Borglum Rd		City Stamford		State CT	Zip Code 06903	Date Receiv 06/20/20		
Principal Occupation  Dentist		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	outor a lobbyis at child of a lob Yes	byist?	Aggregate Conti	\$25.00	\$25.00
Last Name DiNardo	First Name Peter		MI	Cash	contribution:  X Personal C  y Order Credit/Deb	heck <b>1057</b>	ution ID#	Amount of Contribution
Residential Street Address  1883 Fairfield Beach Rd		City Fairfield		State CT	Zip Code <b>06824</b>	Date Receiv		
Principal Occupation  Partner		Name of Employer Peter DiNardo Enterpri	ises	•	Is this contribution associa fundraising event listed in If yes, list Event # <b>Q6</b> :	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Conti	ibutions	\$100.00
Last Name <del>DiNardo</del>	First Name Peter		MI	Cash	contribution:  X Personal C  y Order Credit/Deb	heck 0041	ution ID#	Amount of Contribution
Residential Street Address  1883 Fairfield Beach Rd		City Fairfield	•	State CT	Zip Code <del>06824</del>	Date Receiv		
Principal Occupation  Partner		Name of Employer  Peter DiNardo Enterprises	<del>5</del>		Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No	depender	outor a lobbyis at child of a lob Yes	byist?	Aggregate Conti	ibutions <del>\$200.00</del>	<del>\$100.00</del>
Last Name Foster	First Name  Mary Jane	e	MI	Cash	contribution:	heck 0044	ution ID#	Amount of Contribution
Residential Street Address  40 Anchorage Dr		City Bridgeport		State CT	Zip Code <del>06605</del>	Date Receiv		
Principal Occupation  Admin.		Name of Employer  University of Bridgeport		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depender	outor a lobbyis at child of a lob Yes	byist?	Aggregate Conti	ibutions <del>\$200.00</del>	<del>\$100.00</del>

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILING	DUE DATE
Jepsen 2010								
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name Foster	First Name  Mary Jan	e	MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	neck 100	ntribution ID #	Amount of Contribution
Residential Street Address 40 Anchorage Dr		City  Bridgeport		State CT	Zip Code <b>06605</b>	Date Rec 06/20	ceived 0/2010	
Principal Occupation  Admin.		Name of Employer University of Bridgeport		•	Is this contribution associa fundraising event listed in If yes, list Event # <b>061</b>		X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	ontributions \$100.00	\$100.00
Last Name <del>Grogins</del>	First Name Auden		MI	Cash	contribution:	neck 004	ntribution ID#	Amount of Contribution
Residential Street Address  155 Brewster St Apt 5L		City  Bridgeport		State <del>CT</del>	Zip Code 06605-3111	Date Rec <del>06/20/</del>		
Principal Occupation  Attorney		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	ontributions \$100.00	<del>\$50.00</del>
Last Name Grogins	First Name Auden		MI	Cash	contribution:    X   Personal Cl	neck 10!	stribution ID #	Amount of Contribution
Residential Street Address 155 Brewster St Apt 5L		City  Bridgeport		State CT	Zip Code <b>06605-3111</b>	Date Rec 06/20	ceived <b>0/2010</b>	
Principal Occupation Attorney		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # <b>Q61</b>	Section J1?	X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	ontributions \$50.00	\$50.00
Last Name Stone	First Name Michael		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	neck 100	ntribution ID #	Amount of Contribution
Residential Street Address  12 Howard Pl		City Melville		State <b>NY</b>	Zip Code <b>11747</b>	Date Rec <b>06/20</b>	ceived <b>0/2010</b>	
Principal Occupation  Real Estate Development  Exec.		Name of Employer  Bridgeport Landing Develo	opment		Is this contribution associa fundraising event listed in If yes, list Event # <b>061</b>	Section J1?	X Yes	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate Co	ontributions \$50.00	\$50.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contribution	ons from	Individu	ıals				
Last Name Stone	First Name  Michael			MI	Cash	contribution:    X   Personal C		Contributi	on ID#	Amount of Contribution
Residential Street Address  12 Howard Pl		City <del>Melville</del>			State NY	Zip Code <del>11747</del>		eate Received		
Principal Occupation  Real Estate Development Exec.		Name of En	nployer o <del>rt Landing Developm</del>	<del>ient</del>		Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contrib	utions <del>100.00</del>	<del>\$50.00</del>
Last Name <del>Longo</del>	First Name Audrey			MI	Cash	contribution:  X Personal C  y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address  154 Huntington St		City <del>Shelton</del>			State <del>CT</del>	Zip Code <del>06484</del>		ate Received		
Principal Occupation  Real Estate		Name of Er Self	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribi	utions	\$50.00
Last Name Longo	First Name Audrey			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 154 Huntington St		City Shelton			State CT	Zip Code <b>06484</b>		ate Received		
Principal Occupation  Real Estate		Name of Er	nployer			Is this contribution associ fundraising event listed in If yes, list Event # <b>06</b>		11? E	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu	utions 50.00	\$50.00
Last Name Niedert	First Name Pamela			MI	Cash	contribution:  X Personal C  y Order Credit/De		Contributi 0050	on ID#	Amount of Contribution
Residential Street Address 100 Songbird Ln		City Farmingt	on		State CT	Zip Code 06032		ate Received		
Principal Occupation  None		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contrib	utions \$25.00	\$25.00

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILIN	G DUE DATE
Jepsen 2010								
		B. Itemized Contribut	ions fron	ı Individu	ıals			
Last Name Jepsen	First Name Rita J.		MI	Cash	contribution:  X Personal Chry Order Credit/Debi	neck 005	ibution ID #	Amount of Contribution
Residential Street Address 400 Seabury Dr Apt 4148		City Bloomfield		State CT	Zip Code 06002	Date Rece 06/20/2		
Principal Occupation Retired		Name of Employer None			Is this contribution associat fundraising event listed in S If yes, list Event # 060		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cor	\$100.00	\$100.00
Last Name Papandrea	First Name David		MI	Cash	contribution:  X Personal Characteristics y Order Credit/Debi	neck 005	ibution ID #	Amount of Contribution
Residential Street Address 31 Old Boston Post Rd		City Old Saybrook		State CT	Zip Code 06475	Date Rece 06/20/2		
Principal Occupation  Manager		Name of Employer KBE Building Corp		•	Is this contribution associat fundraising event listed in S If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	stributions \$100.00	\$100.00
Last Name Warner	First Name Charles		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 005	ibution ID #	Amount of Contribution
Residential Street Address 121 Timberwood Rd		City Berlin		State CT	Zip Code 06037-2744	Date Rece 06/20/2		
Principal Occupation Registrar of Voters		Name of Employer Town of Berlin		•	Is this contribution associat fundraising event listed in S If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cor	s50.00	\$50.00
Last Name Uddin	First Name Naeem		MI	Cash	contribution:  X Personal Characteristics y Order Credit/Debi	neck 005	ibution ID #	Amount of Contribution
Residential Street Address 25 Clock Shop Dr		City Berlin		State CT	Zip Code 06037	Date Rece 06/20/2		
Principal Occupation Owner		Name of Employer Berlin Convenience Store		•	Is this contribution associat fundraising event listed in S If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	stributions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
		B. Itemized Contribut	ions from	Individu	ıals			
Last Name Lawrence	First Name John		MI	Cash	contribution:  X Personal Characteristics of the contribution:  Credit/Debi	neck 006	ribution ID #	Amount of Contribution
Residential Street Address 80 Fallview Dr		City Glastonbury		State CT	Zip Code 06033	Date Reco		
Principal Occupation Information Requested		Name of Employer Information Requested			Is this contribution associate fundraising event listed in the second of the second second in the second second second second second second second second second second second second second second second second second sec		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	stributions \$100.00	\$100.00
Last Name Koczarski	First Name Danielle		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 006	ribution ID #	Amount of Contribution
Residential Street Address 38 Maple Tree Ave Unit 5		City Stamford		State CT	Zip Code 06906	Date Reco 06/20/		
Principal Occupation  Information Requested		Name of Employer Information Requested		•	Is this contribution associal fundraising event listed in the second of the second second in the second sec		Yes  X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	ntributions \$25.00	\$25.00
Last Name newberg	First Name cecile		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 006	ribution ID #	Amount of Contribution
Residential Street Address  1A Punch Bowl Dr		City Westport		State CT	Zip Code 06880-2126	Date Rec 06/20/		
Principal Occupation volunteer		Name of Employer none			Is this contribution associal fundraising event listed in the second of the second second in the second sec		Yes X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	ntributions \$25.00	\$25.00
Last Name Salina	First Name Adam		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 005	ribution ID#	Amount of Contribution
Residential Street Address 95 Spicewood Ln		City Berlin		State CT	Zip Code 06037-2831	Date Reco 06/20/		
Principal Occupation Government Relations Federal		Name of Employer Kazak & Salina		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes  X No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	ntributions \$100.00	\$100.00

		I. MONETARY RI	ECEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILI	NG DUE DATE
Jepsen 2010								
		B. Itemized Contribu	tions fron	ı Individu	ıals		·	
Last Name Heller	First Name Adam		MI	Cash	contribution:		Contribution ID #	Amount of Contribution
Residential Street Address  116 Harlem Ave		City Bridgeport		State CT	Zip Code <del>06606-4661</del>		tte Received	
Principal Occupation  ##		Name of Employer  City of Bridgeport			Is this contribution associa fundraising event listed in If yes, list Event #		res	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggreg	ate Contributions \$20.00	\$10.00-
Last Name Hoffman	First Name <del>Maria</del>		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution ID #	Amount of Contribution
Residential Street Address  116 Harlem Ave		City Bridgeport		State CT	Zip Code <del>06606-4661</del>		te Received 5/20/2010	
Principal Occupation  Executive Assistant		Name of Employer  City of Bridgeport		•	Is this contribution associa fundraising event listed in If yes, list Event #		res	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggreg	gate Contributions \$20.00	\$10.00
Last Name Heller	First Name  Adam		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution ID #	Amount of Contribution
Residential Street Address  116 Harlem Ave		City Bridgeport		State CT	Zip Code <b>06606-4661</b>		te Received 5/20/2010	
Principal Occupation  IT		Name of Employer  City of Bridgeport		•	Is this contribution associa fundraising event listed in If yes, list Event # <b>06</b> :	Section J	1?	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	bbyist?	Aggreg	gate Contributions \$10.00	\$10.00
Last Name <b>Hoffman</b>	First Name Maria		MI	Cash	contribution:    X   Personal C y Order   Credit/Deb		Contribution ID #	Amount of Contribution
Residential Street Address  116 Harlem Ave		City Bridgeport		State CT	Zip Code <b>06606-4661</b>		tte Received 5/20/2010	
Principal Occupation  Executive Assistant		Name of Employer  City of Bridgeport		•	Is this contribution association fundraising event listed in If yes, list Event # 06:	Section J	1?	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggreg	gate Contributions \$10.00	\$10.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name Kozak	First Name David		MI	Cash	contribution:    X   Personal Cl	heck 00	ntribution ID#	Amount of Contribution		
Residential Street Address 31 Hunter's Rdg		City Rocky Hill		State CT	Zip Code 06067	Date Re-				
Principal Occupation Government Relations		Name of Employer Kozak & Salina			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	ontributions \$100.00	\$100.00		
Last Name FAVROW	First Name MARK		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 05	ntribution ID#	Amount of Contribution		
Residential Street Address 5 Hillcrest Hts		City Lebanon		State CT	Zip Code 06249-1413	Date Re-				
Principal Occupation ATTORNEY		Name of Employer SELF EMPLOYED		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	ontributions \$100.00	\$100.00		
Last Name BROUILLET	First Name NANCY		MI A	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 05	ntribution ID#	Amount of Contribution		
Residential Street Address 5 Hillcrest Heights Dr		City Lebanon		State CT	Zip Code 06249	Date Re-				
Principal Occupation ATTORNEY		Name of Employer STATE OF CONNECTICUT		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	ontributions \$100.00	\$100.00		
Last Name <del>Marsilio</del>	First Name <del>John</del>		MI	Cash	contribution:	heck 00-	ntribution ID#	Amount of Contribution		
Residential Street Address  596A Sioux Ln		City Stratford		State <del>CT</del>	Zip Code <del>06611</del>	Date Re-				
Principal Occupation  Director of Public Works		Name of Employer Town of Trumbull			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate C	ontributions \$100.00	<del>\$50.00</del> -		

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name Marsilio	First Name  John			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 596A Sioux Ln		City <b>Stratfor</b>	d		State CT	Zip Code <b>06611</b>		oate Received 06/20/20		
Principal Occupation  Director of Public Works		Name of E	mployer f Trumbull			Is this contribution associfundraising event listed in If yes, list Event #		<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contrib	utions <b>550.00</b>	\$50.00
Last Name McHugh	First Name Sean			MI	Cash	contribution:  X Personal ( y Order		Contributi 0049	on ID#	Amount of Contribution
Residential Street Address 42 Oak Hill Ter		City Haddam			State CT	Zip Code 06438		ate Received 6/20/201		
Principal Occupation  Lawyer		Name of E	mployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes		Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Salina	First Name Paul			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 167 Spicewood Ln		City Berlin			State CT	Zip Code 06037		Pate Received		
Principal Occupation Retired School Administrator		Name of E	mployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob		Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Annes	First Name Eric			МІ	Cash	contribution: Personal of y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 200 Thornton St		City Hamden			State CT	Zip Code 06517-1323		oate Received 6/21/201		
Principal Occupation  Lawyer		Name of E	mployer n, Volpe & Mckeon			Is this contribution assoc fundraising event listed in If yes, list Event #		I12 L	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es		Aggre	egate Contrib	utions \$5.00	\$5.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemized (	Contributio	ons from	Individu	ıals				
Last Name Cooper	First Name Harriet			MI	Cash	contribution: Personal of the property of the		Contribution 0546	on ID#	Amount of Contribution
Residential Street Address 189 Ford Rd		City Woodbridge			State CT	Zip Code 06525		ate Received 6/21/2010		
Principal Occupation  Real Estate Broker		Name of Employer Self				Is this contribution assoc fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Scarbrough	First Name Paul			MI	Cash	contribution:  X Personal of the property of t		Contribution 0088	on ID#	Amount of Contribution
Residential Street Address 30 Elmwood Ave		City Norwalk			State CT	Zip Code 06854		ate Received 6/21/2010		
Principal Occupation Acoustic Consultant		Name of Employer Akustiks, LLC				Is this contribution assoc fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Rudikoff	First Name Joel			MI	Cash	contribution: Personal ( y Order X Credit/De		Contribution 0552	on ID#	Amount of Contribution
Residential Street Address 31 Lancelot Dr		City North Haven			State CT	Zip Code 06473-1015		ate Received 6/21/2010		
Principal Occupation Attorney		Name of Employer State of Connection	cut			Is this contribution assoc fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Florin	First Name David			MI	Cash	contribution: Personal of the property of the		Contribution 0584	on ID#	Amount of Contribution
Residential Street Address 26 Temple Ct		City New Haven			State CT	Zip Code 06511		ate Received 6/21/2010		
Principal Occupation Attorney		Name of Employer Yale University		_	•	Is this contribution assoc fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legis	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Jepsen 2010										
		B. Itemized Contributi	ons from	Individu	ıals					
Last Name Goodbody	First Name Katharine		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 06	ntribution ID #	Amount of Contribution		
Residential Street Address 32 Marvel Rd		City New Haven		State CT	Zip Code 06515	Date Re 06/21	eceived L/2010			
Principal Occupation Attorney		Name of Employer Self			Is this contribution associat fundraising event listed in S If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	Contributions \$100.00	\$100.00		
Last Name Masheb	First Name Robin		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 06	ntribution ID #	Amount of Contribution		
Residential Street Address 31 Lancelot Dr		City North Haven		State CT	Zip Code 06473	Date Re 06/21	eceived L/2010			
Principal Occupation Psychologist		Name of Employer Yale University		•	Is this contribution associat fundraising event listed in S If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate C	Contributions \$100.00	\$100.00		
Last Name Bye	First Name Elizabeth		MI A	Cash	contribution:    X   Personal Character   Credit/Debi	neck 00	ntribution ID #	Amount of Contribution		
Residential Street Address 99 Outlook Ave		City West Hartford		State CT	Zip Code 06119-1432	Date Re 06/21	eceived L/2010			
Principal Occupation Legislator		Name of Employer State of Connecticut			Is this contribution associat fundraising event listed in S If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	Contributions \$50.00	\$50.00		
Last Name Geballe	First Name Shelley		MI	Cash	contribution:  X Personal Characteristics  y Order Credit/Debi	neck 10	ntribution ID #	Amount of Contribution		
Residential Street Address  19 Flying Point Rd		City Branford		State CT	Zip Code <b>06405-5703</b>	Date Re	eceived 1/2010			
Principal Occupation teacher		Name of Employer Yale University			Is this contribution associat fundraising event listed in S If yes, list Event # 061	Section J1?	X Yes			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate C	Contributions \$100.00	\$100.00		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ons from	ı Individu	ıals		•		
Last Name Geballe	First Name Gordon		MI	Cash	contribution:    X   Personal Characteristics   Personal Characteristics   Credit/Debit   Personal Characteristics   Personal Cha		Contribution 1098	ID#	Amount of Contribution
Residential Street Address  19 Flying Point Rd		City  Branford		State CT	Zip Code <b>06405-5703</b>		te Received 5/21/201	0	
Principal Occupation  Associate Dean		Name of Employer  Yale		•	Is this contribution associate fundraising event listed in If yes, list Event # <b>061</b>		? <u> </u>		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	ate Contributio		\$100.00
Last Name <del>Geballe</del>	First Name Gordon		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0070	ID#	Amount of Contribution
Residential Street Address  19 Flying Point Rd		City Branford		State <del>CT</del>	Zip Code <del>06405-5703</del>		te Received		
Principal Occupation  Associate Dean		Name of Employer <del>Yale</del>		•	Is this contribution associal fundraising event listed in S If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 1 <del>0.00</del>	<del>\$100.00</del>
Last Name Geballe	First Name Shelley		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0071	ID#	Amount of Contribution
Residential Street Address  19 Flying Point Rd		City Branford		State <del>CT</del>	Zip Code 06405-5703		te Received		
Principal Occupation teacher		Name of Employer  Yale University			Is this contribution associal fundraising event listed in the second of			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contributio	ons 1 <del>0.00</del>	<del>\$100.00</del>
Last Name Flatow	First Name Peter		MI	Cash	contribution:  Personal Cl y Order  X Credit/Debi		Contribution 0608	ID#	Amount of Contribution
Residential Street Address 3 Thomas Rd		City Westport		State CT	Zip Code 06880-4306		te Received 6/21/2010		
Principal Occupation retired		Name of Employer N/A			Is this contribution associal fundraising event listed in the second of the second second in the second sec			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributio	ons 10.00	\$100.00

		I. MONETARY	RECEIP	TS (Sectio	n A-I)			
NAME OF COMMITTEE							FIL	ING DUE DATE
Jepsen 2010								
		B. Itemized Contri	butions fro	om Individu	ıals			
Last Name Genga	First Name Henry		MI	Cash	contribution:    X   Personal C		Contribution ID #	# Amount of Contribution
Residential Street Address 5 Elaine Dr		City East Hartford		State CT	Zip Code 06118-3515		te Received /21/2010	
Principal Occupation State Rep.		Name of Employer State of Connecticut			Is this contribution associa fundraising event listed in If yes, list Event #		? Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative	-	tributor a lobbyis dent child of a lob Yes	byist?	Aggrega	ate Contributions \$25.0	\$25.00
Last Name Darling	First Name Alan		MI	Cash	contribution:  X Personal C  y Order Credit/Deb		Contribution ID #	4 Amount of Contribution
Residential Street Address 27 Cherryfield Dr		City West Hartford		State CT	Zip Code 06107-3363		te Received /21/2010	
Principal Occupation Instructor/Tutor		Name of Employer Capital Community Colle	ege		Is this contribution associa fundraising event listed in If yes, list Event #		? Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative		tributor a lobbyis dent child of a lob Yes	byist?	Aggrega	ate Contributions \$20.0	\$20.00
Last Name Wegele	First Name Shannon		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution ID #	Amount of Contribution
Residential Street Address 39 Lilley Rd		City West Hartford	•	State CT	Zip Code 06119-1334		te Received /21/2010	
Principal Occupation Policy Aide		Name of Employer House Dems			Is this contribution associa fundraising event listed in If yes, list Event #		? Yes X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative	Is con depend	tributor a lobbyis dent child of a lob Yes	byist?	Aggrega	ate Contributions \$50.0	\$50.00
Last Name <del>Bernard</del>	First Name David		MI	Cash	contribution:		Contribution ID #	# Amount of Contribution
Residential Street Address  59 Noorth Racebrook Rd		City <del>Woodbridge</del>		State <del>CT</del>	Zip Code <del>06505</del>		te Received	
Principal Occupation  Attorney		Name of Employer  Koskoff Koskoff & Biede	F		Is this contribution associa fundraising event listed in If yes, list Event #		? Yes	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative		tributor a lobbyis dent child of a lob	byist?	Aggrega	ate Contributions \$200.0	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FIL	ING DUE DATE
Jepsen 2010								
		B. Itemized Contributi	ons from	Individu	ıals			
Last Name Bernard	First Name  David		MI	Cash	contribution:    X   Personal Cl	heck	Contribution ID #	Amount of Contribution
Residential Street Address 59 Noorth Racebrook Rd		City Woodbridge		State CT	Zip Code <b>06505</b>		Received /21/2010	
Principal Occupation  Attorney		Name of Employer  Koskoff Koskoff & Bieder			Is this contribution associa fundraising event listed in If yes, list Event # <b>061</b>		X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyist child of a lob es	byist?	Aggregate	\$100.0	\$100.00
Last Name Levine	First Name Mark		MI	Cash	contribution:  X Personal Cl  / Order Credit/Debi	heck	Contribution ID #	Amount of Contribution
Residential Street Address  8 Dillon Rd		City Woodbridge		State CT	Zip Code <b>06525</b>		Received /21/2010	
Principal Occupation  Realtor		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # 061	Section J1?	X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyist child of a lob res	byist?	Aggregate	te Contributions \$50.00	\$50.00
Last Name Levine	First Name  Mark		MI	Cash	contribution:  X Personal Cl  / Order Credit/Debi	heck	Contribution ID #	Amount of Contribution
Residential Street Address  8 Dillon Rd		City <del>Woodbridge</del>		State <del>CT</del>	Zip Code <del>06525</del>		Received	
Principal Occupation  Realtor		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	child of a lob	byist?	Aggregate	e Contributions \$100.0	9- \$50.00-
Last Name <del>Levine</del>	First Name Sanford		MI	Cash	contribution:	heck	Contribution ID #	Amount of Contribution
Residential Street Address 61 Northrup Rd		City <del>Woodbridge</del>		State <del>CT</del>	Zip Code <del>06525</del>		Received <del>21/2010</del>	
Principal Occupation State Marshal		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyist child of a lob es	byist?	Aggregate	te Contributions \$200.0	9- \$100.00

		I. MONETARY REC	CEIPTS	S (Section	n A-I)		_		
NAME OF COMMITTEE								FILING	G DUE DATE
Jepsen 2010									
		B. Itemized Contribution	ons from	Individu	ıals				
Last Name Levine	First Name Sanford		MI	Cash	contribution:    X   Personal Cl		Contributio	on ID#	Amount of Contribution
Residential Street Address 61 Northrup Rd		City Woodbridge		State CT	Zip Code <b>06525</b>		ate Received 6/21/20	10	
Principal Occupation  State Marshal		Name of Employer Self	_	•	Is this contribution associa fundraising event listed in If yes, list Event # 061			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contribu	tions 00.00	\$100.00
Last Name Weiner	First Name Gerald		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 1096	on ID #	Amount of Contribution
Residential Street Address  15 Bishop Dr		City Woodbridge		State CT	Zip Code <b>06525-2301</b>		ate Received 6/21/20	10	
Principal Occupation  Lawyer		Name of Employer  Weinstein, Weiner Icna PC	:		Is this contribution associa fundraising event listed in If yes, list Event # 061	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	gate Contribu	tions 00.00	\$100.00
Last Name Weiner	First Name Gerald		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contributio	on ID #	Amount of Contribution
Residential Street Address  15 Bishop Dr		City <del>Woodbridge</del>		State <del>CT</del>	Zip Code <del>06525-2301</del>		te Received 6/21/2010	)	
Principal Occupation  Lawyer		Name of Employer  Weinstein, Weiner Icna PC			Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contribu <del>\$2</del>	tions	<del>\$100.00</del>
Last Name Daly	First Name John		MI F	Cash	contribution:    X   Personal Cl		Contribution	on ID#	Amount of Contribution
Residential Street Address 10 E Starkel Rd		City West Hartford		State CT	Zip Code 06117-2436		ate Received 6/21/2010	)	
Principal Occupation Attorney		Name of Employer Law offices of John F. Daly II:	I		Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribu	tions 520.00	\$20.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribu	tions fron	ı Individu	ıals					
Last Name Conroy	First Name Theresa		MI	Cash	contribution:    X   Personal C	heck 0079	ibution ID #	Amount of Contribution		
Residential Street Address 177 Skokorat St		City Seymour		State CT	Zip Code 06483-3024	Date Rece 06/21/2				
Principal Occupation  Legislator		Name of Employer State of Connecticut			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate Cor	\$50.00	\$50.00		
Last Name Gomes	First Name Edwin		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 0084	ibution ID #	Amount of Contribution		
Residential Street Address 243 Soundview Ave		City Bridgeport		State CT	Zip Code 06606-2530	Date Rece 06/21/2				
Principal Occupation State Senator		Name of Employer State of Connecticut		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cor	stributions \$100.00	\$100.00		
Last Name Paroly	First Name Murry		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 008	ibution ID #	Amount of Contribution		
Residential Street Address 22 Livingston Pl		City Greenwich		State CT	Zip Code 06830-5235	Date Rece 06/21/2				
Principal Occupation  Marketing		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cor	stributions \$5.00	\$5.00		
Last Name <del>Wirfel</del>	First Name Kenneth		MI	Cash	contribution:	heck 009:	ibution ID #	Amount of Contribution		
Residential Street Address  28 Minute Man HI		City <del>Westport</del>		State <del>CT</del>	Zip Code 06880-6522	Date Rece				
Principal Occupation  Attorney		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	utor a lobbyis child of a lob	byist?	Aggregate Cor	stributions \$200.00	<del>\$100.00</del>		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Jepsen 2010								
		B. Itemized Contributi	ons from	Individu	ıals			
Last Name Wirfel	First Name Kenneth		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi	neck 10	ontribution ID #	Amount of Contribution
Residential Street Address 28 Minute Man HI		City Westport		State CT	Zip Code <b>06880-6522</b>		eceived 21/2010	
Principal Occupation  Attorney		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event # 062		X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$100.00	\$100.00
Last Name Haberlandt	First Name Peter		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 00	ontribution ID#	Amount of Contribution
Residential Street Address 39 Concord St		City West Hartford		State CT	Zip Code 06119		eceived 1/2010	
Principal Occupation  Lawyer		Name of Employer COWDERY, ECKER & MURPH	Y, L.L.C.	•	Is this contribution associa fundraising event listed in If yes, list Event # 052	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00
Last Name Haberlandt	First Name Susan		MI M	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 00	ontribution ID #	Amount of Contribution
Residential Street Address 34 Cherryfield Dr		City West Hartford		State CT	Zip Code 06107		eceived 1/2010	
Principal Occupation Head of School		Name of Employer Prov. Country Day School			Is this contribution associa fundraising event listed in If yes, list Event # 052	Section J1?	X Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate (	Contributions \$100.00	\$100.00
Last Name <del>Skowronek</del>	First Name Stephen		MI	Cash	contribution:	neck 00	ontribution ID#	Amount of Contribution
Residential Street Address  168 Rimmon Rd		City <del>Woodbridge</del>		State <del>CT</del>	Zip Code <del>06525</del>		eceived <del>1/2010</del>	
Principal Occupation  Professor		Name of Employer <del>Yale University</del>			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate (	Contributions \$200.00	<del>\$100.00</del> -

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
		B. Itemized Contribut	ions fron	Individu	ıals			
Last Name <del>Jacobs</del>	First Name Susan		MI	Cash	contribution:   X Personal Cl  / Order Credit/Deb	heck 0073	ition ID#	Amount of Contribution
Residential Street Address  168 Rimmon Rd		City <del>Woodbridge</del>		State <del>CT</del>	Zip Code <del>06525</del>	Date Receive		
Principal Occupation  Attorney		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contri	butions \$200.00	\$100.00
Last Name Skowronek	First Name Stephen		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 1100	ition ID#	Amount of Contribution
Residential Street Address  168 Rimmon Rd		City Woodbridge		State CT	Zip Code <b>06525</b>	Date Receive <b>06/21/2</b>		
Principal Occupation  Professor		Name of Employer Yale University			Is this contribution associa fundraising event listed in If yes, list Event # 061	Section J1?	X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions 100.00	\$100.00
Last Name Jacobs	First Name Susan		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 1101	tion ID#	Amount of Contribution
Residential Street Address  168 Rimmon Rd		City <b>Woodbridge</b>		State CT	Zip Code <b>06525</b>	Date Receive		
Principal Occupation  Attorney		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event # <b>063</b>	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contri	butions 100.00	\$100.00
Last Name Strong	First Name Selina		MI	Cash	contribution:  X Personal Cl  / Order Credit/Deb	heck 0074	tion ID#	Amount of Contribution
Residential Street Address 1185 Stillson Rd		City Fairfield		State CT	Zip Code 06824	Date Receive 06/21/20		
Principal Occupation Information Requested		Name of Employer Information Requested		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J19	Yes X No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate Contri	butions \$100.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILI	NG DUE DATE
Jepsen 2010								
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name Lawlor	First Name Michael		MI P	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 0!	ontribution ID#	Amount of Contribution
Residential Street Address 560 Silver Sands Rd Unit 412		City East Haven		State CT	Zip Code 06512-4658		Received 1/2010	
Principal Occupation Professor		Name of Employer University of New Haven			Is this contribution associate fundraising event listed in the state of the state o		Yes  X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	Contributions \$100.00	\$100.00
Last Name Gilmore	First Name Thomas		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 0	ontribution ID#	Amount of Contribution
Residential Street Address 3 Hyer Dr		City Simsbury		State CT	Zip Code 06070		Received 1/2010	
Principal Occupation Insurance Sales		Name of Employer Self			Is this contribution associate fundraising event listed in 1 If yes, list Event # 060		X Yes	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$50.00	\$50.00
Last Name Sheehy	First Name Edward		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 0	ontribution ID #	Amount of Contribution
Residential Street Address 7 Bunker Hill Rd		City Woodbridge		State CT	Zip Code 06525		Received 1/2010	
Principal Occupation Attorney		Name of Employer Self			Is this contribution associate fundraising event listed in the state of the state o		Yes  X No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	Contributions \$100.00	\$100.00
Last Name <del>Jepsen</del>	First Name George		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi	neck \varTheta	ontribution ID#	Amount of Contribution
Residential Street Address  31 Barnum Pl		City Ridgefield		State CT	Zip Code <del>06877</del>		Received <del>21/2010</del>	
Principal Occupation  Attorney		Name of Employer  COWDERY, ECKER & MURI	чү,	•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	Contributions \$0.00	- <del>\$100.00</del> -

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name Paroly	First Name Jessica		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 008	ibution ID #	Amount of Contribution		
Residential Street Address 22 Livingston Pl		City Greenwich		State CT	Zip Code 06830	Date Reco				
Principal Occupation Retired Teacher		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$10.00	\$10.00		
Last Name Ciarleglio	First Name Stephani	ie	MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 109	ribution ID #	Amount of Contribution		
Residential Street Address  166 Center Rd		City Woodbridge		State CT	Zip Code <b>06525</b>	Date Reco				
Principal Occupation  Town Clerk		Name of Employer  Town of Woodbridge		•	Is this contribution associa fundraising event listed in If yes, list Event # <b>061</b>	Section J1?	X Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	ntributions \$100.00	\$100.00		
Last Name Ciarleglio	First Name Stephanic	<del>2</del>	MI	Cash	contribution:   X Personal Cl y Order Credit/Deb	heck 006	ibution ID #	Amount of Contribution		
Residential Street Address  166 Center Rd		City <del>Woodbridge</del>		State <del>CT</del>	Zip Code <del>06525</del>	Date Reco				
Principal Occupation  Town Clerk		Name of Employer  Town of Woodbridge			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis t child of a lob Yes	byist?	Aggregate Co	stributions	<del>\$100.00</del>		
Last Name Weiner	First Name Tina		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 006	ribution ID #	Amount of Contribution		
Residential Street Address 15 Bishop Dr		City Woodbridge		State CT	Zip Code 06525	Date Reco				
Principal Occupation Publisher		Name of Employer Yale		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	stributions \$100.00	\$100.00		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							Fl	ILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ons from	ı Individu	ıals				
Last Name Nardello	First Name Vittorina		MI	Cash	contribution:    X   Personal Character   Credit/Debi	neck 0	Contribution II	D#	Amount of Contribution
Residential Street Address 8 Laurel Ln		City Prospect		State CT	Zip Code 06712		Received 21/2010		
Principal Occupation  Legislator		Name of Employer State of Connecticut			Is this contribution associate fundraising event listed in St. If yes, list Event #		X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	e Contributions		\$50.00
Last Name Fontana	First Name Steve		MI	Cash	contribution:  X Personal Ch  Order Credit/Debi	neck 0	Contribution IE	D#	Amount of Contribution
Residential Street Address 23 Angel Pl		City North Haven		State CT	Zip Code 06473		Received 21/2010		
Principal Occupation Title Examiner		Name of Employer Self		•	Is this contribution associate fundraising event listed in St. If yes, list Event #		X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	e Contributions		\$100.00
Last Name Wilson	First Name Tracey		MI	Cash	contribution:  X Personal Ch  / Order	neck 0	Contribution IE	D#	Amount of Contribution
Residential Street Address 99 Outlook Ave		City West Hartford		State CT	Zip Code 06119		Received 21/2010		
Principal Occupation Teacher		Name of Employer Town of Hartford			Is this contribution associate fundraising event listed in St. If yes, list Event #		X No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	e Contributions		\$25.00
Last Name Rinker	First Name Robert		MI	Cash	contribution:  X Personal Ch / Order Credit/Debi	neck C	Contribution IE	D#	Amount of Contribution
Residential Street Address 49 Hearthstone Dr		City South Windsor		State CT	Zip Code 06074		Received 21/2010		
Principal Occupation Executive Director		Name of Employer CSEA SEIU Local 2001			Is this contribution associat fundraising event listed in S If yes, list Event #		X No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	e Contribution: \$50		\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Blackford	First Name Vivian		MI	Cash	contribution:  X Personal Characteristics of the contribution:  y Order Credit/Debi	neck 009	ribution ID#	Amount of Contribution		
Residential Street Address 10 Hamburg Rd		City East Haddam		State CT	Zip Code 06423	Date Rec 06/22/				
Principal Occupation Family Business Consultant		Name of Employer Self			Is this contribution associal fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	\$100.00	\$100.00		
Last Name Finn	First Name Vaughan		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 009	ribution ID #	Amount of Contribution		
Residential Street Address 54 Uplands Dr		City West Hartford		State CT	Zip Code 06107	Date Rec 06/22/				
Principal Occupation Attorney		Name of Employer Shipman & Goodwin, LLP		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Co	sntributions \$100.00	\$100.00		
Last Name Griffin	First Name Timothy		MI	Cash	contribution:  Personal Ch y Order X Credit/Debi	neck 057	ribution ID#	Amount of Contribution		
Residential Street Address 26 Cherry Hill St		City Bellows Falls		State VT	Zip Code 05101-1305	Date Rec 06/22/				
Principal Occupation  Director Labor Relations		Name of Employer FirstGroup America		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	sntributions \$100.00	\$100.00		
Last Name Crump	First Name Gary		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 050	ribution ID#	Amount of Contribution		
Residential Street Address 11 Shailor Hill Rd		City Colchester		State CT	Zip Code 06415-2510	Date Rec 06/22/				
Principal Occupation Winery		Name of Employer Priam Vineyards			Is this contribution associal fundraising event listed in S If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	sntributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FIL	ING DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name Walsh	First Name Julie		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0	Contribution ID #	Amount of Contribution		
Residential Street Address 18 Pent Rd		City Bloomfield		State CT	Zip Code 06002-1519		Received 23/2010			
Principal Occupation College Professor		Name of Employer  AIC College			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	e Contributions \$100.00	\$100.00		
Last Name Walsh	First Name Michael		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 0	Contribution ID#	Amount of Contribution		
Residential Street Address 18 Pent Rd		City Bloomfield		State CT	Zip Code 06002-1519		Received 23/2010			
Principal Occupation Trial Attorney		Name of Employer Moukawsher & Walsh		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	e Contributions \$100.00	\$100.00		
Last Name Moukawsher	First Name Thomas		MI G	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 0	Contribution ID#	Amount of Contribution		
Residential Street Address 1130 River Rd		City Mystic		State CT	Zip Code 06355-1224		Received 23/2010			
Principal Occupation Attorney		Name of Employer Moukawsher & Walsh, LLC		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	e Contributions \$100.00	\$100.00		
Last Name Gordon	First Name Michael		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0	Contribution ID#	Amount of Contribution		
Residential Street Address 104 Clapboard Hill Rd		City Westport		State CT	Zip Code 06880-6325		Received 23/2010			
Principal Occupation PR		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	e Contributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribu	tions fron	ı Individu	ıals					
Last Name Archie	First Name Elam		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 05	ntribution ID #	Amount of Contribution		
Residential Street Address 38 Merriland Rd		City Stamford		State CT	Zip Code 06903-1717	Date Re 06/23				
Principal Occupation  Management Consulting		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	contributions \$100.00	\$100.00		
Last Name McClutchy	First Name Todd		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 05	ntribution ID #	Amount of Contribution		
Residential Street Address 25 Putnam Park		City Greenwich		State CT	Zip Code 06830-5772	Date Re 06/23				
Principal Occupation  Developer		Name of Employer The Richman Group		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	Contributions \$100.00	\$100.00		
Last Name Tyma	First Name Alan		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 00	ntribution ID #	Amount of Contribution		
Residential Street Address 184 Ansonia Rd		City Woodbridge		State CT	Zip Code 06525	Date Re 06/23				
Principal Occupation Attorney		Name of Employer Ryan & Tyma		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	Contributions \$100.00	\$100.00		
Last Name Watson	First Name John		MI S	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 05	ntribution ID#	Amount of Contribution		
Residential Street Address 4117 San Carlos St		City Dallas		State TX	Zip Code 75205-2047	Date Re 06/23	eceived /2010			
Principal Occupation Banker		Name of Employer UBS		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate C	Contributions \$100.00	\$100.00		

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name Watson	First Name Kelly			MI M	Cash	contribution: Personal C y Order X Credit/De		Contribution 0582	n ID#	Amount of Contribution
Residential Street Address 4117 San Carlos St		City Dallas			State TX	Zip Code 75205-2047		Date Received 06/23/2010		
Principal Occupation homemaker		Name of E homema				Is this contribution associ fundraising event listed in If yes, list Event #		<sub>J1?</sub> $f lue{}$	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggre	egate Contribut \$10	ions 00.00	\$100.00
Last Name McClutchy	First Name John			MI H	Cash	contribution: Personal C y Order X Credit/De		Contribution 0511	n ID#	Amount of Contribution
Residential Street Address 11 Molly Ln		City Darien			State CT	Zip Code 06820-2929		Date Received 06/23/2010		
Principal Occupation  Real Estate Developer		Name of E The JHM	<sup>mployer</sup> 1 Group of Companie	s	•	Is this contribution associ fundraising event listed in If yes, list Event #		J1? ''	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$10	ions 00.00	\$100.00
Last Name McClutchy	First Name Janet			MI D	Cash	contribution: Personal C y Order X Credit/De		Contribution 0537	n ID#	Amount of Contribution
Residential Street Address 11 Molly Ln		City Darien			State CT	Zip Code 06820-2929		Date Received 06/23/2010		
Principal Occupation Retired		Name of E The JHM	<sup>mployer</sup> 1 Group of Companie	s	•	Is this contribution associ fundraising event listed in If yes, list Event #		J1? 브	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$1	ions 00.00	\$100.00
Last Name Ramsey	First Name Anne			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution	n ID#	Amount of Contribution
Residential Street Address 74 Sky View Cir		City Hamden			State CT	Zip Code 06514-1523		Date Received 06/23/2010		
Principal Occupation Unemployed		Name of E Unemple			•	Is this contribution associ fundraising event listed in If yes, list Event #		J1? ''	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut	ions \$5.00	\$5.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemiz	zed Contributio	ons from	Individu	ıals				
Last Name Hoopes	First Name David			MI	Cash	contribution:  X Personal y Order Credit/De		Contribution 0098	on ID#	Amount of Contribution
Residential Street Address 81 Juniper Ln		City Glastonbury			State CT	Zip Code 06033		ate Received		
Principal Occupation  Lawyer		Name of Employe Mayo Crone,				Is this contribution assoc fundraising event listed i If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Musumeci	First Name  Joseph			MI	Cash	contribution:  X Personal y Order Credit/De		Contribution 1068	on ID#	Amount of Contribution
Residential Street Address  148 Kenyon St		City <b>Hartford</b>			State CT	Zip Code <b>06105</b>		ate Received		
Principal Occupation  State Marshal		Name of Employe	er			Is this contribution assoc fundraising event listed i If yes, list Event # Of			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 00.00	\$100.00
Last Name Musumeci	First Name Joseph			MI	Cash	contribution:   X Personal  y Order Credit/De		Contribution 0102	on ID#	Amount of Contribution
Residential Street Address  148 Kenyon St		City Hartford			State <del>CT</del>	Zip Code <del>06105</del>		ate Received		
Principal Occupation  State Marshal		Name of Employe	er			Is this contribution assoc fundraising event listed i If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu \$2	utions <del>200.00</del>	<del>\$100.00</del>
Last Name <del>Brody</del>	First Name Paul			MI	Cash	contribution:  X Personal y Order Credit/De		Contribution 0099	on ID#	Amount of Contribution
Residential Street Address <del>205 Storrs Rd</del>		City <del>Mansfield Cer</del>	<del>iter</del>		State <del>CT</del>	Zip Code <del>06250</del>		ate Received		
Principal Occupation <del>VP</del>		Name of Employe	er <del>oal Gaming Auth</del>	<del>ority</del>	•	Is this contribution assoc fundraising event listed i If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions 200.00	\$ <del>100.00</del>

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	G DUE DATE
Jepsen 2010									
		B. Itemized Contribution	ons from	ı Individu	ıals				
Last Name Brody	First Name Paul		MI	Cash	contribution:    X   Personal Cl		Contributio	on ID#	Amount of Contribution
Residential Street Address 205 Storrs Rd		City  Mansfield Center		State CT	Zip Code <b>06250</b>		ate Received 6/24/20	10	
Principal Occupation  VP		Name of Employer  Mohegan Tribal Gaming Authority	_	•	Is this contribution associa fundraising event listed in If yes, list Event # 062			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contribu	oo.00	\$100.00
Last Name Homicki	First Name Anthony		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contributio	on ID#	Amount of Contribution
Residential Street Address 201 Cumberland Ave		City Wethersfield		State CT	Zip Code 06109-1603		nte Received 5/24/2010	)	
Principal Occupation ASSESSOT		Name of Employer Town of Darien		•	Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contribu \$1	ons.00.00	\$100.00
Last Name Shaw	First Name Jeff		MI	Cash	contribution: Personal Cl y Order X Credit/Debi		Contribution	on ID#	Amount of Contribution
Residential Street Address 28 Primrose Ln		City Fairfield		State CT	Zip Code 06825-2358		ate Received 5/24/2010	)	
Principal Occupation CGA		Name of Employer alpinejeff@aol.com			Is this contribution associa fundraising event listed in If yes, list Event #		12	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contribu	itions 510.00	\$10.00
Last Name Melley	First Name William		MI	Cash	contribution:		Contribution	on ID #	Amount of Contribution
Residential Street Address <del>290 Palisado Ave</del>		City Windsor		State <del>CT</del>	Zip Code <del>06095</del>		nte Received 5/24/2010	<del>)</del>	
Principal Occupation  Lawyer		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribu	tions 200.00	\$100.00-

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contributi	ons fron	Individu	ıals		<u> </u>			
Last Name Melley	First Name William		MI	Cash	contribution:    X   Personal Character   Credit/Debi	neck 10	ontribution ID #	Amount of Contribution		
Residential Street Address 290 Palisado Ave		City Windsor		State CT	Zip Code <b>06095</b>		Received 24/2010			
Principal Occupation  Lawyer		Name of Employer Self		•	Is this contribution associate fundraising event listed in State of the If yes, list Event # 062		X Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$100.00	\$100.00		
Last Name Josephson	First Name Benjamii	n	MI	Cash	contribution:  X Personal Ch / Order Credit/Debi	neck 10	ontribution ID #	Amount of Contribution		
Residential Street Address  141 Blake St		City Newtonville		State MA	Zip Code <b>02460</b>		Received 24/2010			
Principal Occupation  VP		Name of Employer O'Neill & Associates			Is this contribution associat fundraising event listed in S If yes, list Event # 062	Section J1?	X Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate (	Contributions \$100.00	\$100.00		
Last Name <del>Josephson</del>	First Name Benjamin		MI	Cash	contribution:  X Personal Ch  / Order Credit/Debi	neck 0:	ontribution ID #	Amount of Contribution		
Residential Street Address  141 Blake St		City Newtonville		State MA	Zip Code <del>02460</del>		Received 4/2010			
Principal Occupation <del>VP</del>		Name of Employer  O'Neill & Associates		•	Is this contribution associate fundraising event listed in State of the If yes, list Event #		Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$200.00	<del>\$100.00</del>		
Last Name  McQueen	First Name Patricia		MI	Cash	contribution:   X Personal Ch  Order Credit/Debi	eck 0:	ontribution ID #	Amount of Contribution		
Residential Street Address <del>28 Rundelane</del>		City  Bloomfield		State <del>CT</del>	Zip Code <del>06002</del>		Received <del>4/2010</del>			
Principal Occupation  Public Relations Consultant		Name of Employer Self			Is this contribution associate fundraising event listed in State of the If yes, list Event #		Yes No			
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate (	Contributions \$200.00	<del>\$100.00</del>		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemized Co	ntributio	ons from	Individu	ıals				
Last Name McQueen	First Name Patricia			MI	Cash	contribution:  X Personal C  Order Credit/De		Contribution 1070	on ID#	Amount of Contribution
Residential Street Address 28 Rundelane		City Bloomfield			State CT	Zip Code <b>06002</b>		ate Received		
Principal Occupation  Public Relations Consultant		Name of Employer Self				Is this contribution associ fundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	x No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	oo.oo	\$100.00
Last Name <del>O'Neill</del>	First Name Colin			MI	Cash	contribution:  X Personal ( / Order Credit/De		Contribution 0100	on ID#	Amount of Contribution
Residential Street Address  109 Autumn St		City <del>Manchester</del>			State <del>CT</del>	Zip Code 06040-5518		ate Received		
Principal Occupation  Support Enforcement Officer		Name of Employer State of Connecticu	<del>t Judicia</del>	<del>sl</del>		Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	itions	\$ <del>25.00</del>
Last Name O'Neill	First Name Colin			MI	Cash	contribution:    X   Personal C		Contribution 1066	on ID#	Amount of Contribution
Residential Street Address  109 Autumn St		City Manchester			State CT	Zip Code <b>06040-5518</b>		ate Received		
Principal Occupation  Support Enforcement Officer		Name of Employer  State of Connection	cut Jud	icial		Is this contribution associ fundraising event listed in If yes, list Event # 06	n Section J	1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legislar	X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribu	ations 25.00	\$25.00
Last Name Roy	First Name Whitney			MI	Cash	contribution: Personal ( / Order		Contribution 0579	on ID#	Amount of Contribution
Residential Street Address 71 Central Ave		City Groton			State CT	Zip Code 06340-5937		ate Received 6/24/201		
Principal Occupation  Home Maker		Name of Employer Self				Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legislar	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions 100.00	\$100.00

		I. MO	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Iter	nized Contributio	ons from	Individu	ıals				
Last Name McAusher	First Name Edward			MI	Cash	contribution: Personal C y Order X Credit/Del		Contributi 0597	on ID#	Amount of Contribution
Residential Street Address 71 Central Ave		City Groton			State CT	Zip Code 06340-5937		Date Received		
Principal Occupation Legal Assistant		Name of Emp Moukawsh	oloyer ner & Walsh LLC			Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribi	utions 100.00	\$100.00
Last Name Goode	First Name Burwell			MI	Cash	contribution: Personal C y Order X Credit/Del		Contributi 0564	on ID#	Amount of Contribution
Residential Street Address 32 Old Orchard Dr		City Weston			State CT	Zip Code 06883-1309		Oate Received 06/24/201		
Principal Occupation retired		Name of Emp	loyer			Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	utions \$25.00	\$25.00
Last Name Clark	First Name Marjorie			MI	Cash	contribution:  Personal C y Order X Credit/Del		Contributi 0561	on ID#	Amount of Contribution
Residential Street Address 113 Dunn Rd		City Hamden			State CT	Zip Code 06518-1504		Date Received		
Principal Occupation Web Designer		Name of Emp Little Fish	•			Is this contribution associ- fundraising event listed in If yes, list Event #		<sub>J1?</sub> L	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contrib	s10.00	\$10.00
Last Name Kashden	First Name Ron			MI	Cash	contribution: Personal C y Order X Credit/Del		Contributi 0535	on ID#	Amount of Contribution
Residential Street Address 305 Olmstead Hill Rd		City Wilton			State CT	Zip Code 06897-2108		ate Received 06/24/201		
Principal Occupation  President - software company		Name of Emp TKS Soluti	-			Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contrib	utions \$50.00	\$50.00

		I. MONETAR	RY RECE	IPTS	(Section	n A-I)				
NAME OF COMMITTEE								I	FILING	DUE DATE
Jepsen 2010										
		B. Itemized Cor	tributions	from	Individu	als				
Last Name Franklin	First Name Kelly		MI	I	Method of c Cash Money	contribution: Personal C Order X Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 305 Olmstead Hill Rd		City Wilton			State CT	Zip Code 06897-2108		ate Received 6/24/2010		
Principal Occupation Web designer		Name of Employer Self-employed				Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Yes Executive Legislativ	dej		tor a lobbyist shild of a lobb	byist?	Aggre	gate Contributio \$50	ons 0.00	\$50.00
Last Name Hausman	First Name Matthew		MI	I	Method of c Cash Money	Personal C		Contribution I	ID#	Amount of Contribution
Residential Street Address 799 Silver Ln		City Trumbull			State CT	Zip Code 06611-5301		ate Received 6/25/2010		
Principal Occupation Attorney		Name of Employer Self		·		Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Yes Executive Legislativ	dej		tor a lobbyist shild of a lobb	oyist?	Aggre	gate Contributio \$100	ons 0.00	\$100.00
Last Name Cukier	First Name Mark		MI	I	Method of o	contribution: Personal C Order X Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 3846 Poplar Ave		City Brooklyn			State NY	Zip Code 11224-1302		ate Received 6/25/2010		
Principal Occupation  Real Estate Owner		Name of Employer Self		·		Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Yes Executive Legislativ	der		tor a lobbyist shild of a lobb	pyist?	Aggre	gate Contributio \$100	ons 0.00	\$100.00
Last Name McWeeny	First Name Tucker		MI	I	Method of cash Cash Money	contribution:  Personal C Order X Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 184 Webster Hill Blvd		City West Hartford			State CT	Zip Code 06107-3749		ate Received 6/25/2010		
Principal Occupation Attorney		Name of Employer Silvester & Daly		•		Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Yes Legislativ	dep		tor a lobbyist	oyist?	Aggre	gate Contributio \$100	ons 0.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ite	emized Contribution	ons from	Individu	ıals				
Last Name Weisenberg	First Name Saadia			MI	Cash	contribution: Personal C y Order X Credit/Del		Contributi 0565	on ID#	Amount of Contribution
Residential Street Address 79 Royce Rd		City Marlborou	ıgh		State MA	Zip Code 01752-2729		ate Received		
Principal Occupation Property Mgmt		Name of Em Self	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Fischer	First Name Sam			MI	Cash	contribution:  Personal C y Order X Credit/Del		Contributi 0601	on ID#	Amount of Contribution
Residential Street Address 80 Baros St		City Fairfield			State CT	Zip Code 06824-4140		ate Received 6/25/201		
Principal Occupation Retired		Name of Em None	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Barber	First Name Kenneth			MI	Cash	contribution:    X   Personal C		Contributi	on ID#	Amount of Contribution
Residential Street Address 39 Daly Rd		City East Han	npton		State CT	Zip Code <b>06424</b>		ate Received		
Principal Occupation  Attorney		Name of Em Barber &	nployer & Roberts			Is this contribution associ fundraising event listed in If yes, list Event # 06	Section J	11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contrib	utions .00.00	\$100.00
Last Name <del>Barber</del>	First Name Kenneth			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contributi	on ID#	Amount of Contribution
Residential Street Address <del>39 Daly Rd</del>		City <del>East Ham</del>	<del>pton</del>		State <del>CT</del>	Zip Code <del>06424</del>		ate Received		
Principal Occupation  Attorney		Name of Em			•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribi	utions <del>200.00</del>	<del>\$100.00-</del>

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Cahill	First Name Philip		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 0108	ution ID#	Amount of Contribution		
Residential Street Address  7 Fencove Ct		City <del>Old Saybrook</del>		State <del>CT</del>	Zip Code <del>06475</del>	Date Receiv 06/25/20				
Principal Occupation  Executive		Name of Employer  Mohegan Tribe			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Conti	ibutions <del>\$200.00</del>	<del>\$100.00</del>		
Last Name Cahill	First Name Philip		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck <b>1074</b>	ution ID#	Amount of Contribution		
Residential Street Address 7 Fencove Ct		City Old Saybrook		State CT	Zip Code <b>06475</b>	Date Receiv				
Principal Occupation  Executive		Name of Employer  Mohegan Tribe			Is this contribution associa fundraising event listed in If yes, list Event # 062		X Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Conti	ibutions	\$100.00		
Last Name Loranger	First Name Heather		MI	X Cash	contribution: Personal Cl	heck <b>1071</b>	ution ID#	Amount of Contribution		
Residential Street Address 54 Stancliff Rd		City Glastonbury		State CT	Zip Code <b>06033</b>	Date Receiv				
Principal Occupation  Real Estate		Name of Employer  Century 21 Classic Homes	<b>5</b>	•	Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Conti	ibutions	\$100.00		
Last Name <del>Loranger</del>	First Name Heather		MI	X Cash	contribution: Personal Cl	heck 0105	ution ID#	Amount of Contribution		
Residential Street Address  54 Stancliff Rd		City <del>Glastonbury</del>		State <del>CT</del>	Zip Code <del>06033</del>	Date Receiv				
Principal Occupation  Real Estate		Name of Employer  Century 21 Classic Homes		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Conti	ibutions <del>\$200.00</del>	<del>\$100.00</del>		

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ito	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Etess	Mitchell				Cash	y Order Personal C		0109		Contribution
Residential Street Address	<u> </u>	City			State	Zip Code		ate Received		
9 Joshua Valley Rd		East Lym	e		CT	06333		6/25/201		
Principal Occupation		Name of En	nplover			Is this contribution associ	ated with	а Г	Yes	İ
President & CEO		Mohegar				fundraising event listed in	Section .	J1?   X	No No	
				_		If yes, list Event #	_			
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		outor a lobbyis t child of a lob		Aggre	egate Contrib		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	\ \ \ \ \ \ \ \	res 🗶	No		<del>\$</del> ;	200.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	•	Contributi	on ID#	Amount of
Etess	Mitchell				Cash	X Personal C		1075		Contribution
	<u> </u>	T			<del>                                     </del>	y Order Credit/De				-
Residential Street Address  9 Joshua Valley Rd		City East Lyn	ne		State	Zip Code <b>06333</b>		ate Received 06/25/20		
Principal Occupation		Name of En			1	Is this contribution associ	_		Yes	İ
President & CEO		Mohega				fundraising event listed in		J1?	No res	
				_		If yes, list Event # 06	1	<u>va</u>		
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		outor a lobbyis t child of a lob	-	Aggre	egate Contrib		
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	-		\$1	.00.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Ljungquist	Tammy				Cash Money	y Order X Personal C		1078		Contribution
Residential Street Address		City			State	Zip Code	Е	ate Received		
53 Railroad Ave		Beacon I	Falls		СТ	06403	0	6/25/20	10	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in		a x	Yes	
Property Manager		Oakbrid	ge Management			If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	outor a lobbyis	t, spouse, or	Aggre	egate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of					t child of a lob	•		-	.00.00	\$100.00
government the contract is with:		Executive	Legislative	L \	res X	No		1		<u> </u>
Last Name  Ljungquist	First Name Tammy			MI	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution
Ejungquise	Taniniy					y Order Credit/De		<del>0112</del>		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
53 Railroad Ave		Beacon F	<del>alls</del>		<del>CT</del>	<del>06403</del>	- 0	6/25/201	0	ļ
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in			Yes	
Property Manager		<del>Oakbridg</del>	<del>je Management</del>			If yes, list Event #	i becuoii .	, X	No No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	outor a lobbyis	t, spouse, or	Aggra	egate Contrib	utions	†
state contractor? Is yes, indicate which branch or branches of				dependent	t child of a lob	byist?	118810	-	200.00-	\$100.00
government the contract is with:	Ш	Executive	Legislative		res 🗶	No				

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ite	emized Contributi	ons from	Individu	ıals				
Last Name F	First Name			MI	Method of	contribution:		Contributi	on ID #	Amount of
<del>Leckowicz</del>	Walter				Cash Money	Personal C		<del>0116</del>		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
729 Prospect		Wethersfi	<del>eld</del>		CT	<del>06109</del>	9	6/25/201	<del>0</del>	
Principal Occupation  Dentist		Name of En	nployer		•	Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor or state contractor? Is yes, indicate which branch or branches of government the contract is with:	prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	utions 100.00	\$200.00
Last Name	First Name			MI	Method of	contribution:	•	Contributi	on ID #	Amount of
Leckowicz	Walter				Cash Money	Y Order X Personal C		1081		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
729 Prospect		Wethers	field		СТ	06109	0	6/25/20	10	_
Principal Occupation  Dentist		Name of En	nployer			Is this contribution associ- fundraising event listed in If yes, list Event # 06	Section .	<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor or state contractor? Is yes, indicate which branch or branches of government the contract is with:	prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribu <b>\$2</b>	utions	\$200.00
Last Name F	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Callahan F	Francis				Cash Money	/ Order Personal C		0120		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
100 River Rd		Stratford			СТ	06614	0	6/25/201	0	<u> </u>
Principal Occupation Property Manager		Name of En WC+F Re Corp.	nployer eal Estate & Develop	ment		Is this contribution associ fundraising event listed in If yes, list Event # 06.	Section I	<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor or state contractor? Is yes, indicate which branch or branches of	prospective		Yes X No		utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	utions	\$100.00
government the contract is with:		Executive	Legislative	L Y	res x	No				
	First Name Timothy			MI	Cash	contribution:  X Personal C  Order Credit/Del		Contribution 0121	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code		ate Received		
255 Shady Hill Rd		Fairfield			СТ	06824		6/25/201		
Principal Occupation		Name of En	nployer		•	Is this contribution associ		1^	Yes	İ
Real Estate Apraisal		Bowley M	1oore Appraisal			fundraising event listed in  If yes, list Event # 06.		J1?	No	
Is contributor a principal of a state contractor or	prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	
state contractor?  Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$3	100.00	\$100.00
government the contract is with:				:			1			1

		I. MONE	TARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemized	Contribution	ons from	Individu	ıals				
Last Name Donadeo	First Name Susan			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution 0122	on ID#	Amount of Contribution
Residential Street Address 672 Cedar Grv		City Orange			State CT	Zip Code 06477		ate Received		
Principal Occupation  Real Estate		Name of Employer Self				Is this contribution associfundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Leguire	x No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Shapiro	First Name Susan			MI	Cash	contribution:  X Personal of the Credit/De		Contribution 0124	on ID#	Amount of Contribution
Residential Street Address 480 Old Oaks Rd		City Fairfield			State CT	Zip Code 06825		ate Received		
Principal Occupation Appraiser		Name of Employer Bowley Moore A	ppraisal		•	Is this contribution associfundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Le	x No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name Berger	First Name Ben			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution 0125	on ID#	Amount of Contribution
Residential Street Address 55 Mariner Way		City Wesley Hills			State NY	Zip Code 10952		ate Received		
Principal Occupation  Rabbi		Name of Employer Talmundic Instit	cute of Connec	cticut		Is this contribution association fundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Leguire	x No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Fruchthandler	First Name Ephraim			MI	Cash	contribution:  X Personal of the Credit/De		Contribution 0126	on ID#	Amount of Contribution
Residential Street Address 1107 E 17th St		City Brooklyn			State NY	Zip Code 11230		ate Received		
Principal Occupation  Real Estate		Name of Employer Empire State Pa	yroll Svc.			Is this contribution associfundraising event listed in If yes, list Event # 06	n Section J		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Leg	x No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00

		I. Mo	ONETARY REC	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ite	mized Contributio	ons from	Individu	ıals				
Last Name Mintz	First Name Abraham			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 342 Midlock Rd		City Fairfield			State CT	Zip Code 06824		ate Received		
Principal Occupation  Doctor		Name of Emp	ployer		-	Is this contribution associ fundraising event listed in If yes, list Event # 06		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Epstein	First Name Helen			MI	Cash	contribution:  X Personal ( y Order		Contributi 0128	on ID#	Amount of Contribution
Residential Street Address 1400 E 18th St		City Brooklyn			State NY	Zip Code 11230		ate Received		
Principal Occupation  None		Name of Emp None	ployer			Is this contribution associ fundraising event listed in If yes, list Event # 06		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Epstein	First Name Donneal			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi 0129	on ID#	Amount of Contribution
Residential Street Address 1400 E 18th St		City Brooklyn			State NY	Zip Code 11230		eate Received		
Principal Occupation  Rabbi		Name of Emp Union of (	ployer Orthodox Rabbis			Is this contribution association fundraising event listed in If yes, list Event # 06		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name Epstein	First Name Susan			MI	Cash	contribution:  X Personal ( y Order		Contributi 0130	on ID#	Amount of Contribution
Residential Street Address 20 Wits End		City New Hemp	pstead		State NY	Zip Code 10977		ate Received 6/25/201		
Principal Occupation Nutritionist		Name of Emp	ployer			Is this contribution associfundraising event listed in If yes, list Event # 06	n Section J	11? E	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	G DUE DATE	
Jepsen 2010									
		B. Itemized Contributi	ions fron	ı Individu	ıals				
Last Name Epstein	First Name Reuven		MI	Cash	contribution:    X   Personal Character   Credit/Debi	neck 013	tribution ID #	Amount of Contribution	
Residential Street Address 20 Wits End		City New Hempstead		State NY	Zip Code 10977	Date Rec 06/25/			
Principal Occupation  Lawyer		Name of Employer Self			Is this contribution associal fundraising event listed in If yes, list Event # 062		X Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	s100.00	\$100.00	
Last Name Chiarelli	First Name Maria		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	neck 011	tribution ID#	Amount of Contribution	
Residential Street Address 2714 Whitney Ave		City Hamden		State CT	Zip Code 06518	Date Rec 06/25/			
Principal Occupation Attorney		Name of Employer Chiarelli Law Firm, LLC		-	Is this contribution associate fundraising event listed in St. If yes, list Event # 062	Section J1?	X Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	ontributions \$100.00	\$100.00	
Last Name Nesteriak	First Name Bryan		MI	Cash	contribution:  X Personal Ch  / Order Credit/Debi	neck 011	tribution ID#	Amount of Contribution	
Residential Street Address  11 Chucta Rd		City Seymour		State CT	Zip Code <del>06483</del>	Date Rec <del>06/25/</del>			
Principal Occupation  Engineer		Name of Employer <del>Oak Management</del>		•	Is this contribution associate fundraising event listed in State of the If yes, list Event #		Yes  No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis t child of a lob Yes	byist?	Aggregate Co	sontributions \$200.00	<del>\$100.00</del>	
Last Name Nesteriak	First Name Bryan		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	neck 107	tribution ID #	Amount of Contribution	
Residential Street Address  11 Chucta Rd		City Seymour		State CT	Zip Code <b>06483</b>	Date Rec <b>06/25</b>	eived 5/2010		
Principal Occupation  Engineer		Name of Employer  Oak Management		· —	Is this contribution associal fundraising event listed in If yes, list Event # 062	Section J1?	X Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	ontributions \$100.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FIL	ING DUE DATE		
Jepsen 2010										
		B. Itemized Contribution	ons from	Individu	ıals					
Last Name Woods	First Name Helga		MI	Cash	contribution:  X Personal Ch  Order Credit/Debi	neck 1	Contribution ID#	Amount of Contribution		
Residential Street Address  14 Hill Rd		City Old Saybrook		State CT	Zip Code <b>06475</b>		Received 25/2010			
Principal Occupation  Attorney		Name of Employer  Mohegan Tribe		•	Is this contribution associate fundraising event listed in State of the If yes, list Event # 062		X Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyist child of a lob Yes	byist?	Aggregate	\$100.00	\$100.00		
Last Name <del>Woods</del>	First Name Helga		MI	Cash	contribution:   X Personal Ch  / Order	neck E	Contribution ID#	Amount of Contribution		
Residential Street Address  14 Hill Rd		City Old Saybrook		State <del>CT</del>	Zip Code <del>06475</del>		Received 25/2010			
Principal Occupation  Attorney		Name of Employer  Mohegan Tribe			Is this contribution associat fundraising event listed in S If yes, list Event #		Yes No			
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyist child of a lob es x	byist?	Aggregate	e Contributions <del>\$200.0</del> (	\$100.00		
Last Name Valentino	First Name Charles		MI	Cash	contribution:    X   Personal Ch	neck C	Contribution ID#	Amount of Contribution		
Residential Street Address 76 Waverly Pl		City Bridgeport		State CT	Zip Code 06610		Received 25/2010			
Principal Occupation State Marshall		Name of Employer State of Connecticut			Is this contribution associate fundraising event listed in St. If yes, list Event # 062	Section J1?	X Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyist child of a lob	byist?	Aggregate	e Contributions \$100.00	\$100.00		
Last Name McBride	First Name <b>Ryan</b>		MI	Cash	contribution:  X Personal Ch  Order Credit/Debi	neck 1	Contribution ID#	Amount of Contribution		
Residential Street Address 27 Red Rock Cir		City Newington		State CT	Zip Code <b>06111</b>		Received 25/2010			
Principal Occupation  IOLDP Participant		Name of Employer  Travelers Insurance			Is this contribution associat fundraising event listed in S If yes, list Event # 062	Section J1?	X Yes			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyist	byist?	Aggregate	e Contributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	ı Individu	ıals		•			
Last Name McBride	First Name Ryan		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	heck 0107	bution ID #	Amount of Contribution		
Residential Street Address  27 Red Rock Cir		City Newington		State <del>CT</del>	Zip Code <del>06111</del>	Date Recei				
Principal Occupation  IOLDP Participant		Name of Employer  Travelers Insurance			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions \$200.00	<del>\$100.00</del>		
Last Name Bunnell	First Name <del>Eva</del>		MI	Cash	contribution:  ** Personal Cl y Order	heck 0114	bution ID#	Amount of Contribution		
Residential Street Address  496 Town St		City <del>East Haddam</del>		State <del>CT</del>	Zip Code <del>06423</del>	Date Recei				
Principal Occupation  Homemaker		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$200.00	\$ <del>100.00</del>		
Last Name Bunnell	First Name Charles		MI	Cash	contribution:   X Personal Cl y Order Credit/Debi	heck 0115	bution ID #	Amount of Contribution		
Residential Street Address 496 Town St		City <del>East Haddam</del>		State <del>CT</del>	Zip Code <del>06423</del>	Date Recei				
Principal Occupation  Chief of Staff		Name of Employer  Mohegan Tribe		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions <del>\$200.00</del>	<del>\$100.00</del>		
Last Name  Bunnell	First Name <b>Eva</b>		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi	heck 1079	bution ID#	Amount of Contribution		
Residential Street Address 496 Town St		City  East Haddam		State CT	Zip Code <b>06423</b>	Date Recei				
Principal Occupation  Homemaker		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Yes No			
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Con	tributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							F	ILING	DUE DATE	
Jepsen 2010										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name  Bunnell	First Name Charles		MI	Cash	contribution:    X   Personal Cl	neck	Contribution II	D#	Amount of Contribution	
Residential Street Address 496 Town St		City  East Haddam		State CT	Zip Code <b>06423</b>		Received /25/2010			
Principal Occupation  Chief of Staff		Name of Employer  Mohegan Tribe			Is this contribution associa fundraising event listed in If yes, list Event # 062		1 1			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregat	\$100.		\$100.00	
Last Name Ambrosey	First Name Leon		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	neck	Contribution II	D#	Amount of Contribution	
Residential Street Address 464 Hammertown Rd		City Monroe		State CT	Zip Code 06468		Received 25/2010			
Principal Occupation Owner		Name of Employer Cross Hill Citgo		•	Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Ye			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contributions		\$100.00	
Last Name Epstein	First Name Anne		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi	neck	Contribution II	D#	Amount of Contribution	
Residential Street Address 245 Wilson St		City Fairfield		State CT	Zip Code 06825		Received 25/2010			
Principal Occupation Attorney		Name of Employer Adelman Law Office			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Yo			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregat	te Contributions		\$100.00	
Last Name Epstein	First Name Roslyn		MI	Cash	contribution:    X   Personal Cl	neck	Contribution II	D#	Amount of Contribution	
Residential Street Address 462 Westfield Ave		City Bridgeport		State CT	Zip Code 06606		Received 25/2010			
Principal Occupation None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Y			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregat	te Contribution: \$100		\$100.00	

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Epstein	Mosha				Cash Money	y Order  X Personal Credit/D	Check ebit Card	0133		Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
462 Westfield Ave		Bridgepo	rt		СТ	06606	c	06/25/201	0	
Principal Occupation Retired		Name of Er None	nployer			Is this contribution asso fundraising event listed If yes, list Event # 0		<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	utor a lobbyis		Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 <sup>-</sup>	child of a lob	•		-	100.00	\$100.00
government the contract is with:  Last Name	First Name			I —	1	contribution:				
Epstein	Juda			IVII	Cash	X Personal	Check ebit Card	Contributi 0134	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code		Date Received		
462 Westfield Ave		Bridgepo	rt		CT	06606		06/25/201		
Principal Occupation		Name of Er	mployer		•	Is this contribution asso		1.2	Yes	
Attorney		Law Offic	ces of Juda J. Epstei	n		fundraising event listed  If yes, list Event # 0			No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	•	Contributi	on ID#	Amount of
Ventura	Dan				Cash Money	y Order	Check ebit Card	0118		Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
3543 Main St		Bridgepo	rt		СТ	06606	c	06/25/201	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution asso			Yes	
Office Manager		Law Offic	ces of Juda J. Epstei	n		fundraising event listed If yes, list Event # 0			No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lob	-		-	100.00	\$100.00
Last Name	First Name			MI	1	contribution:		Contributi	on ID#	
Cowden	Edward			S	Cash	Personal	Check ebit Card	0829	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	Г	Date Received		
3 Laurel Ln		Westport			СТ	06880-4914	c	06/27/201	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution asso	ciated with	a [	Yes	
IT Consultant		Intrasph	ere Technologies, In	c.		fundraising event listed If yes, list Event #	in Section .	J1? x	No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contrib	utions	
state contractor? Is yes, indicate which branch or branches of	_				child of a lob	-		-	\$10.00	\$10.00
government the contract is with:	Ш	Executive	Legislative	Y	res X	No				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	IG DUE DATE		
Jepsen 2010										
		B. Itemized Contributi	ons fron	Individu	ıals					
Last Name Maria	First Name Cowden		MI J	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 09	ontribution ID #	Amount of Contribution		
Residential Street Address 3 Laurel Ln		City Westport		State CT	Zip Code 06880-4914		eceived 7/2010			
Principal Occupation Registrar of Voters		Name of Employer Town of Westport/CT Voters			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$10.00	\$10.00		
Last Name Cappiali	First Name Paul		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 06	ontribution ID #	Amount of Contribution		
Residential Street Address 28 Hartford Ave		City Greenwich		State CT	Zip Code 06830-5935	Date Re 06/27	eceived 7/2010			
Principal Occupation Sales		Name of Employer Empire Mercahnts Llc		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate (	Contributions \$100.00	\$100.00		
Last Name Aaron	First Name Bayer		MI S	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 06	ontribution ID #	Amount of Contribution		
Residential Street Address 215 Mountain Rd		City Glastonbury		State CT	Zip Code 06033-1512		eceived 8/2010			
Principal Occupation Attorney		Name of Employer Wiggin and Dana			Is this contribution associa fundraising event listed in If yes, list Event #		Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate (	Contributions \$100.00	\$100.00		
Last Name Burnham	First Name Paul		MI	Cash	contribution:    X   Personal Cl	neck 06	ontribution ID#	Amount of Contribution		
Residential Street Address 239 Thunder Lake Rd		City Wilton		State CT	Zip Code 06897-1338		eceived 8/2010			
Principal Occupation Attorney		Name of Employer Rucci, Burnham Casta & Curn	ello LLP		Is this contribution associa fundraising event listed in If yes, list Event #		Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate (	Contributions \$10.00	\$10.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contribution	ons from	ı Individu	ıals				
Last Name Devine	First Name Susan			MI	Cash	contribution:    X   Personal C y Order		Contributi 0635	on ID#	Amount of Contribution
Residential Street Address 31 Watchaug Rd		City Somers			State CT	Zip Code 06071		Date Received 06/28/201		
Principal Occupation Optometrist		Name of E Self	mployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Prucker	First Name Brian			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributi 0636	on ID#	Amount of Contribution
Residential Street Address 510 Buckley Hwy		City Stafford	Springs		State CT	Zip Code 06076		Date Received 06/28/201		
Principal Occupation  Lawyer		Name of E Self	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Vercelli	First Name Barbara			MI	Cash	contribution:    X   Personal C		Contributi 0638	on ID#	Amount of Contribution
Residential Street Address 100 Davenport Rd		City West Ha	rtford		State CT	Zip Code 06110-1703		Date Received 06/28/201		
Principal Occupation Retired		Name of E None	mployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contrib	s5.00	\$5.00
Last Name Meyer	First Name Edward			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributi 0641	on ID#	Amount of Contribution
Residential Street Address 407 Mulberry Point Rd		City Guilford			State CT	Zip Code 06437-3204		Date Received 06/28/201		
Principal Occupation State Senator		Name of E Connect	mployer cicut General Assembl	у		Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Iter	nized Contributio	ons from	Individu	uals				
Last Name Schweitzer	First Name Burton			MI	Cash	contribution:  X Personal of the property of t		Contributi 0642	on ID#	Amount of Contribution
Residential Street Address 17 Hammick Rd		City West Hartf	ord		State CT	Zip Code 06107		ate Received		
Principal Occupation Adjunct Professor		Name of Emp U. of H.	oloyer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	obyist?	Aggre	gate Contrib	ations \$20.00	\$20.00
Last Name Lopez	First Name Rafael			MI	Cash	contribution:  X Personal of the property of t		Contributi 0643	on ID#	Amount of Contribution
Residential Street Address 31 Woodland St Apt 2J		City Hartford			State CT	Zip Code 06105		ate Received 6/28/201		
Principal Occupation Assistant		Name of Emp HBE	lloyer		•	Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	-	Aggre	gate Contrib	utions \$25.00	\$25.00
Last Name McCrory	First Name Douglas			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi 0644	on ID#	Amount of Contribution
Residential Street Address 235 Blue Hills Ave		City Hartford			State CT	Zip Code 06112-1821		ate Received		
Principal Occupation Administrator		Name of Emp HBOE	lloyer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es		Aggre	gate Contrib	stions \$50.00	\$50.00
Last Name Rodrigues	First Name Alice			MI	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 24 Ridgewood Dr		City Rocky Hill			State CT	Zip Code 06067		ate Received		
Principal Occupation Teacher		Name of Emp Hartford B	oloyer Soard of Ed			Is this contribution assoc fundraising event listed in If yes, list Event #		I1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	-	Aggre	gate Contrib	ations \$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILIN	G DUE DATE	
Jepsen 2010									
		B. Itemized Contribut	ions fron	ı Individu	ıals		•		
Last Name Heft	First Name Martin		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 06	ontribution ID #	Amount of Contribution	
Residential Street Address 38 W Main St		City Chester		State CT	Zip Code 06412		eceived 8/2010		
Principal Occupation  Executive Assistant		Name of Employer State of Connecticut			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$25.00	\$25.00	
Last Name Moukawsher	First Name Paul		MI J	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 08	ontribution ID#	Amount of Contribution	
Residential Street Address 425 Benjamin Dr		City Vernon Hills		State IL	Zip Code 60061-1581	Date Re 06/28	eceived 8/2010		
Principal Occupation  Demand Planner	Name of Employer Kraft Foods		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00	
Last Name Atkins	First Name David		MI P	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 08	ontribution ID #	Amount of Contribution	
Residential Street Address 3 Valley Field Rd S		City Sandy Hook		State CT	Zip Code 06482-1093		eceived 8/2010		
Principal Occupation Attorney		Name of Employer Pullman & Comley LLC			Is this contribution associa fundraising event listed in If yes, list Event #		Yes		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (	Contributions \$50.00	\$50.00	
Last Name Seligman	First Name Steven		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 08	ontribution ID#	Amount of Contribution	
Residential Street Address 381 Simsbury Rd		City Bloomfield		State CT	Zip Code 06002-2217		eceived 8/2010		
Principal Occupation lawyer		Name of Employer Katz & Seligman		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00	

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Ite	emized Contributi	ons fron	ı Individu	ıals				
Last Name Arrando	First Name Angelo			MI S	Cash	contribution: Personal C		Contribution 0873	ID#	Amount of Contribution
Residential Street Address 85 Great Plain Rd		City Danbury			State CT	Zip Code 06811-3927		Pate Received 06/28/2010		
Principal Occupation Clergy	rgy self-employed						ated with Section		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributio	ons 75.00	\$75.00
Last Name Taborsak	First Name Julia			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0897	ID#	Amount of Contribution
Residential Street Address 2 Docs Way		City New Milfo	ord		State CT	Zip Code 06776-2375		Pate Received 06/28/2010		
Principal Occupation Name of Employer Teacher New Milford Board of Education					Is this contribution associated with a fundraising event listed in Section J1 If yes, list Event #				Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  Yes X No				ons 25.00	\$25.00
Last Name Consoli	First Name Mary			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0639	ID#	Amount of Contribution
Residential Street Address 42 Tamanny Trl		City Danbury			State CT	Zip Code 06811		Pate Received 06/28/2010		
Principal Occupation President		Name of En Danbury	nployer Nurses Union		•	Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribution \$5	ons 50.00	\$50.00
Last Name Bartles	First Name Thaddeus			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0633	ID#	Amount of Contribution
Residential Street Address 266 Scott Swamp Rd		City Farmingto	on		State CT	Zip Code 06032		Pate Received 16/28/2010		
Principal Occupation Optometrist		Name of En Self	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	t, spouse, or byist?	Aggre	egate Contribution	ons 00.00	\$100.00					

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										
Jepsen 2010										
		B. Itemized Contribut	ions fron	ı Individu	ıals		•			
Last Name Edgar	First Name Kenneth		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	heck 0640	oution ID #	Amount of Contribution		
Residential Street Address 6 Wedges Fld	•	City Weston	•	State CT	Zip Code 06883	Date Recei 06/28/2				
Principal Occupation Information Requested		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	ributions \$10.00	\$10.00		
Last Name Bourns	First Name Courtney		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	heck 0843	oution ID#	Amount of Contribution		
Residential Street Address 24 Saddle Ridge Dr		City West Hartford		State CT	Zip Code 06117-2330	Date Recei 06/28/2				
Principal Occupation Attorney	embo,	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	ributions \$50.00	\$50.00		
Last Name Isidro	First Name Lucas		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	heck 0870	oution ID#	Amount of Contribution		
Residential Street Address 46 Breezemont Ave		City Riverside		State CT	Zip Code 06878-1711	Date Recei 06/28/2				
Principal Occupation Retired		Name of Employer Retired		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	ributions \$100.00	\$100.00		
Last Name Lamont	First Name Edward		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	heck 0832	oution ID#	Amount of Contribution		
Residential Street Address 4 Ashton Dr		City Greenwich		State CT	Zip Code 06831-3762	Date Recei 06/28/2				
Principal Occupation Chairman		Name of Employer Lamont Digital Systems, Inc	: <b>.</b>	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	ributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING										
Jepsen 2010										
		B. Ite	mized Contribution	ons from	Individu	ıals				
Last Name Hoffstatter	First Name Edward			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 201 Deer Run Rd		City Wilton			State CT	Zip Code 06897-1211		eate Received		
Principal Occupation Teacher		Name of Em Wilton Pu	ployer Iblic Schools			Is this contribution associ fundraising event listed in If yes, list Event # 06		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contrib	utions \$25.00	\$25.00
Last Name Goncalves	First Name Gary			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 55 Lawrence Ave		City Danbury			State CT	Zip Code 06810		ate Received		
Principal Occupation Energy Supplier		Name of Em	ployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contrib	utions \$50.00	\$50.00
Last Name Mullarkey	First Name James			MI	Cash	contribution: Personal C y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 105 Bloomfield Ave		City Hartford			State CT	Zip Code 06105-1007		ate Received		
Principal Occupation VP		Name of Emp				Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Boehm	First Name Suzan			MI K	Cash	contribution: Personal G y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 17 Wallacks Ln		City Stamford			State CT	Zip Code 06902-7126		ate Received		
Principal Occupation Retired		Name of Emp	ployer			Is this contribution associ fundraising event listed in If yes, list Event #		I1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	G DUE DATE	
Jepsen 2010									
		B. Itemized Contribut	ions fron	Individu	ıals				
Last Name Boehm	First Name Lincoln		MI A	Cash	contribution: Personal Cl  Order X Credit/Debi	heck 0909	ibution ID#	Amount of Contribution	
Residential Street Address 17 Wallacks Ln		City Stamford		State CT	Zip Code 06902-7126	Date Rece 06/29/2			
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Con	stributions \$100.00	\$100.00	
Last Name Willis	First Name Kerri		MI	Cash	contribution:  X Personal Cl  Order Credit/Debi	heck 0648	ibution ID#	Amount of Contribution	
Residential Street Address <del>77 Palmer Martin Rd</del>		City <del>East Haddam</del>		State <del>CT</del>	Zip Code <del>06423-1352</del>	Date Rece			
Principal Occupation  Lawyer		Name of Employer		Is this contribution associated with a fundraising event listed in Section J1?  If yes, list Event #					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Con	stributions	<del>\$50.00</del>	
Last Name <del>Budzik</del>	First Name Matthew		MI	Cash	contribution:   X Personal Cl  / Order	heck 0649	ibution ID#	Amount of Contribution	
Residential Street Address  77 Palmer Martin Rd		City East Haddam		State <del>CT</del>	Zip Code <del>06423-1352</del>	Date Rece			
Principal Occupation  Attorney		Name of Employer  State of Connecticut		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Con	stributions \$100.00	<del>\$50.00</del> -	
Last Name Willis	First Name <b>Kerri</b>		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	heck <b>108</b>	ibution ID#	Amount of Contribution	
Residential Street Address 77 Palmer Martin Rd		City  East Haddam		State CT	Zip Code <b>06423-1352</b>	Date Rece <b>06/29</b>			
Principal Occupation  Lawyer		Name of Employer UTC			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Yes		
Is contributor a principal of a state contractor or prospective								\$50.00	

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribution	ons from	Individu	ıals				
Last Name Budzik	First Name  Matthew		MI	Cash	contribution:    X   Personal Cl		Contribution	n ID#	Amount of Contribution
Residential Street Address 77 Palmer Martin Rd		City East Haddam		State CT	Zip Code <b>06423-1352</b>		nte Received 6/29/201	10	
Principal Occupation  Attorney		Name of Employer  State of Connecticut		•	Is this contribution associa fundraising event listed in If yes, list Event # 062			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contribut	ions 50.00	\$50.00
Last Name Garfunkel	First Name Andrew		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution	n ID#	Amount of Contribution
Residential Street Address 41 Beau St		City Norwalk		State CT	Zip Code 06850-2410		ate Received 5/29/2010		
Principal Occupation  Town Clerk		Name of Employer Town of Norwalk			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	gate Contribut \$.	ions 25.00	\$25.00
Last Name <del>Cohen</del>	First Name Marvin		MI	Cash	contribution:   X Personal Cl y Order Credit/Debi		Contribution	n ID#	Amount of Contribution
Residential Street Address  1 Elderberry Ln		City Ridgefield		State <del>CT</del>	Zip Code <del>06877</del>		te Received 5/29/2010		
Principal Occupation  Information Requested		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		12 L	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	gate Contribut \$	ions <del>50.00</del>	<del>\$25.00</del>
Last Name Hume	First Name <del>Joan</del>		MI	Cash	contribution:       Personal Cl  y Order Credit/Debi		Contribution	n ID#	Amount of Contribution
Residential Street Address  1 Elderberry Ln		City Ridgefield		State <del>CT</del>	Zip Code <del>06877</del>		ate Received 5/29/2010		
Principal Occupation  Librarian		Name of Employer  Westport Public Library			Is this contribution associa fundraising event listed in If yes, list Event #		1? <u> </u>	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribut	ions <del>50.00</del> -	<del>\$25.00 -</del>

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribution	ons from	Individu	ıals				
Last Name Cohen	First Name  Marvin		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contribution	n ID#	Amount of Contribution
Residential Street Address  1 Elderberry Ln		City Ridgefield		State CT	Zip Code <b>06877</b>		te Received 5/29/201	10	
Principal Occupation  Information Requested		Name of Employer Self		•	Is this contribution associal fundraising event listed in 1 If yes, list Event # 062			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contribut	ions 25.00	\$25.00
Last Name Hume	First Name Joan		MI	Cash	contribution:  X Personal Characteristics of the contribution:  X Credit/Debi		Contribution	n ID#	Amount of Contribution
Residential Street Address  1 Elderberry Ln		City Ridgefield		State CT	Zip Code <b>06877</b>		te Received 5/29/201	10	
Principal Occupation  Librarian	Is this contribution associated with fundraising event listed in Section  If yes, list Event # 062720:			Section J1	ı? ഥ	Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggreg	gate Contribut \$2	ions 25.00	\$25.00
Last Name Coster	First Name  Doris		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contribution	n ID#	Amount of Contribution
Residential Street Address  123 River Rd		City East Haddam		State CT	Zip Code <b>06423</b>		te Received 5/29/201	10	
Principal Occupation  Retired		Name of Employer None			Is this contribution associate fundraising event listed in If yes, list Event # 062	Section J1		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggreg	gate Contribut \$2	ions 25.00	\$25.00
Last Name <del>Coster</del>	First Name <del>Doris</del>		MI	Cash	contribution:		Contribution 0653	n ID#	Amount of Contribution
Residential Street Address  123 River Rd		City East Haddam		State <del>CT</del>	Zip Code <del>06423</del>		te Received 5/29/2010		
Principal Occupation  Retired		Name of Employer None			Is this contribution associal fundraising event listed in S If yes, list Event #		ı? <u>'</u>	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribut	ions <del>50.00</del> -	<del>\$25.00</del>

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	G DUE DATE	
Jepsen 2010									
		B. Itemized Contr	ibutions fr	om Individu	ıals				
Last Name Ryder-Munet	First Name		MI	Cash	contribution:  X Personal Contribution:  Y Order Credit/Deb	0652	ion ID#	Amount of Contribution	
Residential Street Address 41 Lookout Dr		City <del>Colchester</del>	•	State CT	Zip Code 06415-5120	Date Received 06/29/201			
Principal Occupation  Psychotherapist		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative		tributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contrib	sutions \$50.00	<del>\$25.00</del>	
Last Name  Ryder-Munet	First Name Linda		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	1088	ion ID#	Amount of Contribution	
Residential Street Address 41 Lookout Dr		City Colchester		State CT	Zip Code <b>06415-5120</b>	Date Received 06/29/20			
Principal Occupation  Psychotherapist			Is this contribution association fundraising event listed in If yes, list Event # 062	Section J1?	Yes No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative		atributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contrib	outions \$25.00	\$25.00	
Last Name DaSilva	First Name Linda		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	0681	ion ID#	Amount of Contribution	
Residential Street Address 157 Kohanza St		City Danbury	·	State CT	Zip Code 06811-4409	Date Received 06/29/201			
Principal Occupation Retired		Name of Employer None		·	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative	Is con depend	tributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contrib	stons \$50.00	\$50.00	
Last Name Taborsak	First Name Joseph		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	0682	ion ID#	Amount of Contribution	
Residential Street Address 37 Clearview Ave		City Danbury		State CT	Zip Code 06811-3332	Date Received 06/29/201			
Principal Occupation State Rep.		Name of Employer State of Connecticut		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X N  Executive Legislative		tributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contrib	outions 100.00	\$100.00	

		I. MO	ONETARY REC	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ite	mized Contributio	ons from	Individu	ıals				
Last Name Boerst	First Name Claudia			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributi 0657	on ID#	Amount of Contribution
Residential Street Address 25 Eversley Ave		City Norwalk			State CT	Zip Code 06851		Date Received		
Principal Occupation  Clown		Name of Emp	ployer			Is this contribution associ fundraising event listed in If yes, list Event # 06		<sub>J1?</sub> [2	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contrib	utions \$10.00	\$10.00
Last Name Taborsak	First Name Kelly			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi 0684	on ID#	Amount of Contribution
Residential Street Address 37 Clearview Ave		City Danbury			State CT	Zip Code 06811		Date Received 06/29/201		
Principal Occupation  Planner/Customer Support  Name of Employer  HSML Lithography					•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	utions \$50.00	\$50.00
Last Name Duleep	First Name Annapurn	na		MI	Cash	contribution:    X   Personal C		Contributi 0669	on ID#	Amount of Contribution
Residential Street Address 3 Briarwood Rd		City Norwalk			State CT	Zip Code 06850-1206		Date Received		
Principal Occupation Teacher		Name of Emp Self (d/b/ Coaching)	'a Duleep Education	al .	•	Is this contribution associ fundraising event listed in If yes, list Event # 06	Section .	л Л1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contrib	s5.00	\$5.00
Last Name Eppinger	First Name Dianne			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi 0690	on ID#	Amount of Contribution
Residential Street Address 3 Fox Den Rd		City Danbury			State CT	Zip Code 06811-3424		Date Received 06/29/201		
Principal Occupation Retired		Name of Emp	ployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contrib	utions \$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individ	uals				
Last Name Hutchinson	First Name Alice			MI	Cash	contribution:  X Personal of the Credit/December 1 Credit/December 2 Credit/December		Contributi 0686	on ID#	Amount of Contribution
Residential Street Address 153 Rockwell Rd		City Bethel			State CT	Zip Code 06801-3005		eate Received		
Principal Occupation  None		Name of E	mployer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res		Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Greenberg	First Name Steven			MI	Cash	contribution:  X Personal of the property of t		Contributi 0692	on ID#	Amount of Contribution
Residential Street Address 11 Wellington Ct		City Danbury			State CT	Zip Code 06811	1	ate Received		
Principal Occupation Name of Employer Banker Wells Fargo					•	Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	-	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Donohue	First Name Christoph	er		MI	Cash	contribution:  X Personal ( by Order Credit/De		Contributi 0687	on ID#	Amount of Contribution
Residential Street Address 3 Fawnwood Rd		City Sandy Ho	ook		State CT	Zip Code 06482	1	ate Received		
Principal Occupation Attorney		Name of En Riefberg NeJame	, Smart, Donohue, a	nd	•	Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x		Aggre	gate Contrib	utions 100.00	\$100.00
Last Name <del>Eichbaum</del>	First Name  June			MI	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address  28 Minute Man Hl		City Westport	ŧ		State CT	Zip Code <del>06880</del>		ate Received		
Principal Occupation None		Name of E	mployer			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	-	Aggre	gate Contrib	utions <del>100.00</del>	<del>\$50.00</del> -

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemiz	ed Contribution	ons from	Individu	ıals				
Last Name Eichbaum	First Name June			MI	Cash	contribution:  X Personal y Order Credit/D	Check ebit Card	Contributi	on ID#	Amount of Contribution
Residential Street Address  28 Minute Man HI		City Westport			State CT	Zip Code <b>06880</b>		Oate Received		
Principal Occupation  None		Name of Employe	er			Is this contribution associated fundraising event listed If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribi	ations 50.00	\$50.00
Last Name  Ide	First Name Joel			MI	Cash	contribution:  X Personal y Order Credit/D	Check ebit Card	Contributi	on ID#	Amount of Contribution
Residential Street Address 324 Town St		City East Haddam	n		State CT	Zip Code <b>06423</b>		Date Received		
Principal Occupation  Contracts Admin		Name of Employe State of Con				Is this contribution associated fundraising event listed If yes, list Event #	in Section .	<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribu	utions	\$100.00
Last Name Ide	First Name			MI	Cash	contribution:   X Personal  y Order Credit/D	Check ebit Card	Contributi	on ID#	Amount of Contribution
Residential Street Address  324 Town St		City East Haddam			State <del>CT</del>	Zip Code <del>06423</del>		Date Received		
Principal Occupation  Contracts Admin		Name of Employe				Is this contribution assoc fundraising event listed If yes, list Event #		<sub>J1?</sub> L	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribi \$7	utions <del>200.00</del>	<del>\$100.00</del>
Last Name DaSilva	First Name Joseph			MI	Cash	contribution:  X Personal y Order Credit/D	Check ebit Card	Contributi 0680	on ID#	Amount of Contribution
Residential Street Address 157 Kohanza St		City Danbury			State CT	Zip Code 06811		Date Received		
Principal Occupation Retired		Name of Employe	er	_		Is this contribution assoc fundraising event listed If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	utions \$50.00	\$50.00

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Ite	mized Contributi	ons from	Individu	ıals				
Last Name Karr	First Name John			MI E	Cash	contribution:    X   Personal C		Contribution 0676	ı ID#	Amount of Contribution
Residential Street Address 191 Smith Ridge Rd		City New Cana	ian		State CT	Zip Code 06840		ate Received 6/29/2010		
Principal Occupation Partner		Name of Em Ernst & Y	ployer oung, LLP			Is this contribution association fundraising event listed in If yes, list Event # 062	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contributi \$10	ions 00.00	\$100.00
Last Name Gibbs	First Name Elizabeth			MI	Cash	contribution:  X Personal C  Order Credit/Deb		Contribution 0663	ı ID#	Amount of Contribution
Residential Street Address 32 Allen Rd		City Norwalk			State CT	Zip Code 06851		ate Received 6/29/2010		
Principal Occupation Retired		Name of Em None	ployer		•	Is this contribution association fundraising event listed in If yes, list Event # 062			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contributi \$5	ions 50.00	\$50.00
Last Name Collins	First Name William			MI	Cash	contribution:  X Personal C  Order Credit/Deb		Contribution 0664	ı ID#	Amount of Contribution
Residential Street Address 32 Allen Rd		City Norwalk			State CT	Zip Code 06851		eate Received 6/29/2010		
Principal Occupation Writer		Name of Em Institute	ployer for Policy Studies		•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$5	ions 50.00	\$50.00
Last Name Marcus	First Name Mark			МІ	Cash	contribution:    X   Personal C		Contribution	ı ID#	Amount of Contribution
Residential Street Address  15 Oakwood Ln		City Westport	t		State CT	Zip Code <b>06880</b>		ate Received 6/29/201	.0	
Principal Occupation  None		Name of Em	ployer		•	Is this contribution association fundraising event listed in If yes, list Event # 06	Section J		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contributi \$10	ions 0.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ions from	ı Individu	ıals				
Last Name Marcus	First Name  Mark		MI	Cash	contribution:		Contribution I	ID#	Amount of Contribution
Residential Street Address  15 Oakwood Ln		City <del>Westport</del>		State <del>CT</del>	Zip Code <del>06880</del>		te Received <del>/29/2010</del>		
Principal Occupation  None		Name of Employer  None			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contribution <del>\$200</del>	ons <del>0.00-</del>	<del>\$100.00</del>
Last Name Hamilton	First Name Taber		MI	X Cash	contribution: Personal Cl y Order Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 5 Overlook Rd		City Norwalk		State CT	Zip Code 06851		te Received /29/2010		
Principal Occupation Sales		Name of Employer Flm Sodi		•	Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1	? ☐:		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution	ons 5.00	\$5.00
Last Name Francocur	First Name		MI	Cash	contribution:		Contribution I	ID#	Amount of Contribution
Residential Street Address  5 Nutmeg Ln		City <del>Westport</del>		State <del>CT</del>	Zip Code <del>06880</del>		te Received		
Principal Occupation  None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contribution <del>\$100</del>	ons 0.00-	<del>\$50.00</del>
Last Name Francoeur	First Name Luisa		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address  5 Nutmeg Ln		City Westport		State CT	Zip Code <b>06880</b>		te Received 5/29/2010	<b>)</b>	
Principal Occupation  None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1	?     · ?		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contribution	ons <b>D.00</b>	\$50.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	G DUE DATE	
Jepsen 2010									
		B. Itemized Con	tributions fr	om Individu	ıals				
Last Name Bram	First Name Jessica		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	1021	ion ID#	Amount of Contribution	
Residential Street Address 32 Webb Rd		City Westport		State CT	Zip Code <b>06880</b>	Date Received <b>06/29/2</b> 0			
Principal Occupation  Writer/Teacher		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	depend	tributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contrib	outions 100.00	\$100.00	
Last Name Brom	First Name <del>Jessica</del>		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	<del>0695</del>	ion ID#	Amount of Contribution	
Residential Street Address <del>32 Webb Rd</del>		City <del>Westport</del>		State <del>CT</del>	Zip Code <del>06880</del>	Date Received 06/29/201			
Principal Occupation  Writer/Teacher		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislative	depend	tributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contrib	outions 200.00	\$ <del>100.00</del>	
Last Name Mobilia	First Name Anthony		MI	Cash	contribution:  X Personal C y Order Credit/Deb	0662	ion ID#	Amount of Contribution	
Residential Street Address 47 Allen Rd		City Norwalk		State CT	Zip Code 06851	Date Received 06/29/201			
Principal Occupation  Information Requested		Name of Employer None		·	Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	depend	tributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contrib	sutions \$20.00	\$20.00	
Last Name Bloom	First Name Anne		MI	Cash	contribution:  X Personal City Order Credit/Deb	I 0667	ion ID#	Amount of Contribution	
Residential Street Address 5 Fifth St		City Norwalk		State CT	Zip Code 06855	Date Received 06/29/201			
Principal Occupation Office Manager		Name of Employer Select Plastics, LLC		•	Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	depend	tributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contrib	sutions \$10.00	\$10.00	

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	G DUE DATE	
Jepsen 2010									
		B. Itemized Contrib	outions fro	n Individu	ıals				
Last Name Taborsak	First Name Robert		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0685	ution ID#	Amount of Contribution	
Residential Street Address 110 Hayestown Rd		City Danbury		State CT	Zip Code 06810	Date Receiv 06/29/20			
Principal Occupation Retired Teacher		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depende	butor a lobbyis nt child of a lob Yes	byist?	Aggregate Contr	sibutions \$100.00	\$100.00	
Last Name Farrow	First Name Charles		МІ	Cash	contribution:  X Personal C y Order Credit/Deb	heck 1092	ution ID#	Amount of Contribution	
Residential Street Address  1 Cold Spring Rd		City  East Haddam		State CT	Zip Code <b>06423</b>	Date Receiv 06/29/2			
Principal Occupation  Retired		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event # <b>06</b> 2	Section J1?	X Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No	depende	butor a lobbyis nt child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00	
Last Name Farrow	First Name Charles		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0656	ution ID#	Amount of Contribution	
Residential Street Address  1 Cold Spring Rd		City East Haddam	•	State <del>CT</del>	Zip Code <del>06423</del>	Date Receiv 06/29/20			
Principal Occupation  Retired		Name of Employer  None			Is this contribution associa fundraising event listed in If yes, list Event #	Section J12	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depende	butor a lobbyis nt child of a lob Yes	byist?	Aggregate Contr	sbutions \$200.00	<del>\$100.00</del>	
Last Name Sturges	First Name Jean		MI A	Cash	contribution: Personal C y Order X Credit/Deb	heck 0851	ution ID#	Amount of Contribution	
Residential Street Address 12 Ermine St		City Fairfield		State CT	Zip Code 06824-5109	Date Receiv 06/29/20			
Principal Occupation Accountant		Name of Employer Retired		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes		
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depende	butor a lobbyis nt child of a lob Yes	byist?	Aggregate Contr	ibutions \$40.00	\$40.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contr	ibutions f	from Individu	uals		•			
Last Name Ogden	First Name Robert		MI	Cash	contribution:  Personal C y Order X Credit/Deb	heck 0863	tion ID#	Amount of Contribution		
Residential Street Address 8 Sleepy Hollow Dr		City Danbury		State CT	Zip Code 06810-5360	Date Receive 06/29/20				
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X		endent child of a lob	obyist?	Aggregate Contri	butions \$25.00	\$25.00		
Last Name May	First Name Lyn		MI	Cash	contribution:  Personal Contribution:  y Order X Credit/Deb	heck 0844	tion ID#	Amount of Contribution		
Residential Street Address 25 Beebe Rd		City East Haddam		State CT	Zip Code 06423-1011	Date Receive 06/29/20				
Principal Occupation Communications		Name of Employer Retired		·	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X		contributor a lobbyis endent child of a lob Yes	-	Aggregate Contri	butions \$50.00	\$50.00		
Last Name DaSilva	First Name Joseph		MI	Cash	contribution:  Personal C y Order X Credit/Deb	heck 0845	tion ID#	Amount of Contribution		
Residential Street Address 17 Mountainville Ave		City Danbury		State CT	Zip Code 06810-7931	Date Receive 06/29/20				
Principal Occupation Attorney		Name of Employer DePanfilis & Vallerie LL0	C	•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X !  Executive Legislative	No Is co	contributor a lobbyis endent child of a lob Yes		Aggregate Contri	butions \$50.00	\$50.00		
Last Name Moukawsher	First Name Elizabeth		MI	Cash	contribution: Personal C y Order X Credit/Deb	heck 0846	tion ID#	Amount of Contribution		
Residential Street Address 328 Mitchell St		City Groton		State CT	Zip Code 06340-4435	Date Receive 06/29/20				
Principal Occupation Town Clerk		Name of Employer Town of Groton		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X		endent child of a lob	-	Aggregate Contri	butions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	G DUE DATE	
Jepsen 2010									
		B. Itemized Contributi	ions fron	Individu	ıals				
Last Name Alt	First Name		MI	Cash	contribution:  X Personal Cl  / Order	l <del>0651</del>	tion ID#	Amount of Contribution	
Residential Street Address  241 E Shore Dr		City <del>Colchester</del>		State <del>CT</del>	Zip Code <del>06415</del>	Date Receive 06/29/20:			
Principal Occupation  Registrar of Voters		Name of Employer  Town of East Haddam			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contri	butions <del>\$50.00</del>	<del>\$25.00</del>	
Last Name Alt	First Name		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	1087	tion ID#	Amount of Contribution	
Residential Street Address  241 E Shore Dr		City Colchester		State CT	Zip Code <b>06415</b>	Date Receive <b>06/29/2</b>			
Principal Occupation  Registrar of Voters		Name of Employer  Town of East Haddam			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$25.00	\$25.00	
Last Name Beinfield	First Name  Marjorie		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi	1029	tion ID #	Amount of Contribution	
Residential Street Address 61 Cross Hwy		City Westport		State CT	Zip Code <b>06880</b>	Date Receive <b>06/29/2</b>			
Principal Occupation  Retired		Name of Employer  None		•	Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contri	\$25.00	\$25.00	
Last Name Beinfield	First Name Marjorie		MI	Cash	contribution:	<del>0704</del>	tion ID#	Amount of Contribution	
Residential Street Address  61 Cross Hwy		City <del>Westport</del>		State <del>CT</del>	Zip Code <del>06880</del>	Date Receive 06/29/20:			
Principal Occupation Retired		Name of Employer None		-	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob ves	byist?	Aggregate Contri	stations \$50.00	<del>\$25.00</del> -	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contributi	ions from	Individu	ıals					
Last Name <del>Parker</del>	First Name Bradley		MI	× Cash	contribution:  Personal Cl  Order Credit/Deb	heck 0646	tion ID#	Amount of Contribution		
Residential Street Address  318 Town St		City <del>East Haddam</del>		State <del>CT</del>	Zip Code <del>06423-1428</del>	Date Receive 06/29/20				
Principal Occupation Realtor		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contri	butions <del>\$60.00</del>	<del>\$30.00</del>		
Last Name Parker	First Name Bradley		MI	x Cash	contribution: Personal Cl / Order Credit/Deb	heck 1082	tion ID#	Amount of Contribution		
Residential Street Address 318 Town St		City  East Haddam		State CT	Zip Code <b>06423-1428</b>	Date Receive <b>06/29/2</b>				
Principal Occupation  Realtor		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions \$30.00	\$30.00		
Last Name Sharr	First Name Sandra		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 1083	tion ID#	Amount of Contribution		
Residential Street Address 91 Cypress Rd		City Newington		State CT	Zip Code <b>06111</b>	Date Receive <b>06/29/2</b>				
Principal Occupation  Attorney		Name of Employer  State of Connecticut			Is this contribution associa fundraising event listed in If yes, list Event # <b>062</b>	Section J1?	X Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	\$50.00	\$50.00		
Last Name Sharr	First Name Sandra		MI	Cash	contribution:	heck 0647	tion ID#	Amount of Contribution		
Residential Street Address  91 Cypress Rd		City Newington		State <del>CT</del>	Zip Code <del>06111</del>	Date Receive 06/29/20				
Principal Occupation  Attorney		Name of Employer  State of Connecticut	_	•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No			
Is contributor a principal of a state contractor a state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contri	butions \$100.00	<del>\$50.00</del>		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ite	emized Contribution	ons from	Individu	uals				
Last Name Govert	First Name Peter			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contribution 0654	on ID#	Amount of Contribution
Residential Street Address  24 Cedar Meadow Rd		City <del>Moodus</del>			State <del>CT</del>	Zip Code 06469-1154		eate Received		
Principal Occupation  Teacher		Name of En	nployer <del>Academy</del>			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	obyist?	Aggre	egate Contribu	utions \$30.00-	<del>\$15.00</del>
Last Name Govert	First Name Peter			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contribution 1090	on ID#	Amount of Contribution
Residential Street Address  24 Cedar Meadow Rd		City <b>Moodus</b>			State CT	Zip Code <b>06469-1154</b>		ate Received		
Principal Occupation  Teacher		Name of En	nployer n Academy			Is this contribution associ fundraising event listed in If yes, list Event # 06	n Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	obyist?	Aggre	egate Contribu	utions 15.00	\$15.00
Last Name Armond	First Name Paul			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution 1091	on ID#	Amount of Contribution
Residential Street Address  168 Mountain Archer Rd		City <b>Lyme</b>			State CT	Zip Code <b>06371</b>		ate Received		
Principal Occupation  Retired		Name of En	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #	n Section J		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	obyist?	Aggre	gate Contribu <b>\$1</b>	utions .00.00	\$100.00
Last Name Armond	First Name Paul			MI	Cash	contribution:  X Personal of the property of t		Contribution 0655	on ID#	Amount of Contribution
Residential Street Address  168 Mountain Archer Rd		City <del>Lyme</del>			State <del>CT</del>	Zip Code <del>06371</del>		ate Received		
Principal Occupation Retired		Name of En	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	obyist?	Aggre	gate Contribu \$2	utions <del>200.00</del>	\$ <del>100.00</del>

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name Atkin	First Name John			MI	Cash	contribution:    X   Personal C		Contributi 0658	on ID#	Amount of Contribution
Residential Street Address 122 Silvermine Ave		City Norwalk			State CT	Zip Code 06850-2033		Date Received 06/29/201		
Principal Occupation  Marketer		Name of E Self	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event # 06		<sub>J1?</sub> [2	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contrib	stions \$50.00	\$50.00
Last Name Robert	First Name John			MI	X Cash	contribution: Personal C y Order Credit/De		Contributi 0659	on ID#	Amount of Contribution
Residential Street Address 8 Ferris Ave		City Norwalk			State CT	Zip Code 06854		Date Received 06/29/201		
Principal Occupation Programmer		Name of E General	mployer Reinsurance		•	Is this contribution associ fundraising event listed in If yes, list Event # 06	n Section .	<sub>J1?</sub> [2	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contrib	utions \$40.00	\$40.00
Last Name Frank	First Name John			MI	Cash	contribution:    X   Personal C		Contributi 0660	on ID#	Amount of Contribution
Residential Street Address 15 E Meadow Ln		City Norwalk			State CT	Zip Code 06854		Date Received		
Principal Occupation None		Name of E None	mployer			Is this contribution associ fundraising event listed in If yes, list Event # 06		<sub>J1?</sub> [2	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contrib	ations \$25.00	\$25.00
Last Name Jaeger	First Name David			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributi 0666	on ID#	Amount of Contribution
Residential Street Address 10 Prospect Ave Unit 6		City Norwalk			State CT	Zip Code 06850-3227		Date Received 06/29/201		
Principal Occupation Banker		Name of E People's	mployer United Bank			Is this contribution associ fundraising event listed in If yes, list Event # 06	n Section .	<sub>J1?</sub> [2	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contrib	ations \$10.00	\$10.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemized Con	tributions	s from	Individu	als				
Last Name Duff	First Name Robert		М	11	Method of o	contribution:    X   Personal C		Contribution 0668	on ID #	Amount of Contribution
Residential Street Address 50 Toilsome Ave		City Norwalk			State CT	Zip Code 06851-2425		ate Received 6/29/2010	)	
Principal Occupation Legislator		Name of Employer State of Connecticut				Is this contribution associ fundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislativ	de		tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	tions 525.00	\$25.00
Last Name Burgess	First Name Thomas		М	ſI	Method of o	contribution:  X Personal C Order Credit/De		Contribution	on ID #	Amount of Contribution
Residential Street Address 7 Glen Hill Ln		City Wilton			State CT	Zip Code 06897-2419		ate Received 6/29/2010	)	
Principal Occupation Teacher		Name of Employer SW BOCES		•		Is this contribution associ fundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X	de		tor a lobbyist	byist?	Aggre	gate Contribu	tions 325.00	\$25.00
Last Name Franklin	First Name Daisy		М	ſI	Method of o	contribution: Personal C		Contribution 0671	on ID#	Amount of Contribution
Residential Street Address 82 S Main 2 Apt F		City Norwalk			State CT	Zip Code 06854		ate Received 6/29/2010	)	
Principal Occupation Information Requested		Name of Employer Harrel Inc.		•		Is this contribution associ fundraising event listed in If yes, list Event # 06	Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X	de		tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	tions 510.00	\$10.00
Last Name Russo	First Name Patricia		М	1I	Method of o	contribution:    X   Personal C		Contribution 0674	on ID #	Amount of Contribution
Residential Street Address 191 Smith Ridge Rd .		City New Canaan			State CT	Zip Code 06840		ate Received 6/29/2010	)	
Principal Occupation None		Name of Employer Information Requests	ed	•		Is this contribution associ fundraising event listed in If yes, list Event # 06	Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X	de		tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	.00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							1	FILING	DUE DATE	
Jepsen 2010										
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name Ferreira	First Name Robert		MI	Cash	contribution:    X   Personal C	heck	Contribution	ID#	Amount of Contribution	
Residential Street Address 27 Birch Rd		City West Hartford		State CT	Zip Code 06119		te Received /29/2010			
Principal Occupation Investor		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 5.00	\$75.00	
Last Name Tower	First Name John		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck	Contribution	ID#	Amount of Contribution	
Residential Street Address 27 Stephanie Dr		City New Milford		State CT	Zip Code 06776		te Received /29/2010			
Principal Occupation Attorney		Name of Employer Cramer & Anderson LLP		•	Is this contribution associa fundraising event listed in If yes, list Event #		?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio \$10	ons 0.00	\$100.00	
Last Name Saadi	First Name Thomas		MI	Cash	contribution:    X   Personal C	heck	Contribution	ID#	Amount of Contribution	
Residential Street Address 24 Tobins Ct		City Danbury		State CT	Zip Code 06810-7090		e Received /29/2010			
Principal Occupation Attorney		Name of Employer State of Connecticut			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$100.00	
Last Name Barabas	First Name Jennifer		MI	x Cash	contribution:  Personal Ci y Order Credit/Deb	heck	Contribution	ID#	Amount of Contribution	
Residential Street Address 37 Griffing Ave		City Danbury		State CT	Zip Code 06810		te Received /29/2010			
Principal Occupation Paralegal		Name of Employer Riefberg, Smart, Donohue 8	. Negame	•	Is this contribution associa fundraising event listed in If yes, list Event #		?	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$20.00	

		I. MONETARY RE	CEIPTS	S (Section	n A-I)		_		
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name Smart	First Name Steven		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 0688	ı ID#	Amount of Contribution
Residential Street Address 9 Edna Ct		City Brookfield		State CT	Zip Code 06804-3704		te Received 5/29/2010		
Principal Occupation Attorney		Name of Employer Riefberg, Smart, Donohue &	Negame		Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	ate Contribution	ions 00.00	\$100.00
Last Name Eriquez	First Name Gene		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution	ı ID#	Amount of Contribution
Residential Street Address 78 Starrs Plain Rd		City Danbury		State CT	Zip Code 06810-8335		te Received 5/29/2010		
Principal Occupation Vice President		Name of Employer Union Savings Bank			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution	ions 00.00	\$100.00
Last Name <del>Doran</del>	First Name  Deirdre		MI	Cash	contribution:		Contribution 0693	ı ID#	Amount of Contribution
Residential Street Address  242 Weston Rd		City <del>Weston</del>		State <del>CT</del>	Zip Code 06883-2124		te Received		
Principal Occupation  Teacher		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contribution	ions 50.00	<del>\$25.00</del>
Last Name Doran	First Name  Deirdre		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution	ı ID#	Amount of Contribution
Residential Street Address 242 Weston Rd		City Weston		State CT	Zip Code <b>06883-2124</b>		te Received 5/29/201	.0	
Principal Occupation  Teacher		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributi	ions 2 <b>5.00</b>	\$25.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	DUE DATE			
Jepsen 2010											
		B. Itemized Contribu	ıtions fron	Individu	ıals						
Last Name Voris	First Name Patricia		MI	x Cash	contribution: Personal Ch Order Credit/Debi	1020	tion ID#	Amount of Contribution			
Residential Street Address 48 North Ave		City Westport		State CT	Zip Code <b>06880-2718</b>	Date Receive <b>06/29/2</b>					
Principal Occupation  None		Name of Employer None		•	Is this contribution associate fundraising event listed in State of the If yes, list Event # 062	Section J1?	Yes No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyist child of a lob es x	byist?	Aggregate Contrib	s10.00	\$10.00			
Last Name <del>Voris</del>	First Name Patricia		MI	× Cash	contribution: Personal Ch Order Credit/Debi	I <del>0694</del>	tion ID#	Amount of Contribution			
Residential Street Address  48 North Ave		City <del>Westport</del>		State <del>CT</del>	Zip Code <del>06880-2718</del>	Date Receive 06/29/201					
Principal Occupation  None		Name of Employer None			Is this contribution associate fundraising event listed in the second of the second se	Section J1?	Yes No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyist	byist?	Aggregate Contrib	sutions \$20.00	\$10.00			
Last Name <del>Gluckman</del>	First Name Carol		MI	Cash	contribution:   X Personal Ch  Order Credit/Debi	l <del>0698</del>	tion ID#	Amount of Contribution			
Residential Street Address  31 Greanlea Ln		City <del>Westport</del>	•	State <del>CT</del>	Zip Code <del>06880</del>	Date Receive 06/29/201					
Principal Occupation  None		Name of Employer None			Is this contribution associate fundraising event listed in St. If yes, list Event #	Section J1?	Yes No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyist child of a lob es x	byist?	Aggregate Contrib	\$50.00	<del>\$25.00</del>			
Last Name Gluckman	First Name Carol		MI	Cash	contribution:  X Personal Ch Order Credit/Debi	l 1024	tion ID#	Amount of Contribution			
Residential Street Address 31 Greanlea Ln		City Westport		State CT	Zip Code <b>06880</b>	Date Receive 06/29/2					
Principal Occupation None		Name of Employer None			Is this contribution associal fundraising event listed in 1 If yes, list Event # 062	Section J1?	X Yes No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyist	byist?	Aggregate Contrit	outions \$25.00	\$25.00			

		I. MONETARY REC	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribution	ons from	Individu	ıals		•		
Last Name Mioli	First Name Joseph		MI	Cash	contribution:    X   Personal C		Contributio	n ID#	Amount of Contribution
Residential Street Address 90 Main St Unit 6		City Westport		State CT	Zip Code <b>06880-3411</b>	- 1	nte Received 6/29/20:	10	
Principal Occupation  State Rep.		Name of Employer  State of Connecticut		-	Is this contribution associa fundraising event listed in If yes, list Event # 062		1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contribut	tions	\$100.00
Last Name <del>Mioli</del>	First Name <del>Joseph</del>		MI	Cash	contribution:		Contributio	n ID#	Amount of Contribution
Residential Street Address  90 Main St Unit 6		City Westport		State <del>CT</del>	Zip Code 06880-3411	- 1	ate Received 5/29/2010		
Principal Occupation State Rep.		Name of Employer  State of Connecticut			Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	gate Contribut	tions 00.00	\$100.00
Last Name Schwartz	First Name M.B.		MI	Cash	contribution:   X Personal Contribution:  y Order Credit/Deb		Contributio	n ID#	Amount of Contribution
Residential Street Address  3 Crestwood Rd		City Westport		State <del>CT</del>	Zip Code <del>06880</del>		ate Received 5/29/2010		
Principal Occupation  None		Name of Employer None	_		Is this contribution associa fundraising event listed in If yes, list Event #		12	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	gate Contribut <del>\$1</del>	tions <del>00.00</del>	<del>\$50.00</del>
Last Name Schwartz	First Name M.B.		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb		Contributio	n ID#	Amount of Contribution
Residential Street Address  3 Crestwood Rd		City Westport		State CT	Zip Code <b>06880</b>		ate Received 6/29/20:	10	
Principal Occupation  None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J	1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribut	tions 50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Jepsen 2010											
		B. Itemized Contribution	ons from	Individu	ıals						
Last Name Ross Beres	First Name Jill		MI W	Cash	contribution:    X   Personal Cl	heck 070	ntribution ID#	Amount of Contribution			
Residential Street Address 5 Sprucewood Ln		City Westport		State CT	Zip Code 06880	Date Red 06/29/					
Principal Occupation None		Name of Employer None		-	Is this contribution associa fundraising event listed in If yes, list Event # 062		X Yes				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	child of a lob	byist?	Aggregate C	ontributions \$25.00	\$25.00			
Last Name Ford	First Name <del>Marilyn</del>		MI	Cash	contribution:	heck 070	ntribution ID #	Amount of Contribution			
Residential Street Address  162 Hoyt Farm Rd		City New Canaan		State <del>CT</del>	Zip Code <del>06840</del>	Date Rec <del>06/29,</del>					
Principal Occupation  Law Professor		Name of Employer  Quinnipiac			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Co	Contributions \$200.00	<del>\$100.00</del>			
Last Name Ford	First Name Marilyn		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 10	ntribution ID #	Amount of Contribution			
Residential Street Address  162 Hoyt Farm Rd		City New Canaan		State CT	Zip Code <b>06840</b>	Date Rec 06/29	eceived 9/2010				
Principal Occupation  Law Professor		Name of Employer <b>Quinnipiac</b>			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Yes				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate C	contributions \$100.00	\$100.00			
Last Name Wertheim	First Name Marion		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 10	ntribution ID#	Amount of Contribution			
Residential Street Address 1216 Meadow Rdg		City Redding		State CT	Zip Code <b>06896</b>	Date Rec <b>06/29</b>	eceived 9/2010				
Principal Occupation  Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Yes				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	Contributions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	DUE DATE	
Jepsen 2010											
		B. Itemiz	ed Contribution	ons from	Individu	ıals					
Last Name Wertheim	First Name Marion			MI	Cash	contribution:    X   Personal C		Contribution 0706	on ID#	Amount of Contribution	
Residential Street Address  1216 Meadow Rdg		City Redding			State <del>CT</del>	Zip Code <del>06896</del>		te Received 5/29/2010			
Principal Occupation Retired		Name of Employe None	т			Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	gate Contribu <del>\$2</del>	ntions 200.00	<del>\$100.00</del>	
Last Name <del>Lautenberg</del>	First Name Ellen			MI	Cash	contribution:  X Personal C y Order Credit/De		Contribution 0708	on ID#	Amount of Contribution	
Residential Street Address  10 Woody Ln		City <del>Westport</del>			State <del>CT</del>	Zip Code 06880	1	ate Received 5/29/2010	Ð		
Principal Occupation  None		Name of Employe	er			Is this contribution associ fundraising event listed in If yes, list Event #		1? <b>_</b>	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	gate Contribu <del>\$2</del>	ntions 200.00	\$100.00	
Last Name Lautenberg	First Name Ellen			MI	Cash	contribution:    X   Personal C		Contributio	on ID#	Amount of Contribution	
Residential Street Address  10 Woody Ln		City Westport			State CT	Zip Code <b>06880</b>		ate Received	10		
Principal Occupation  None		Name of Employe	r			Is this contribution associ fundraising event listed in If yes, list Event #		1? <b>_</b>	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contribu <b>\$1</b>	utions 00.00	\$100.00	
Last Name Mcfadden	First Name  Deborah			MI	Cash	contribution:    X   Personal C		Contribution 1034	on ID #	Amount of Contribution	
Residential Street Address  109 Westport Rd		City <b>Wilton</b>			State CT	Zip Code <b>06897-4528</b>		ate Received			
Principal Occupation  Director of Communications		Name of Employe Self	r		-	Is this contribution associ fundraising event listed in If yes, list Event # 06	Section J	1? <b>-</b>	Yes No		
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	gate Contribu	25.00	\$25.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Jepsen 2010											
		B. Itemized Contributi	ions fron	ı Individu	ıals						
Last Name <del>Mcfadden</del>	First Name Deborah		MI	Cash	contribution:   X Personal Cl y Order Credit/Debi	l <del>0709</del>	tion ID#	Amount of Contribution			
Residential Street Address  109 Westport Rd		City <del>Wilton</del>		State <del>CT</del>	Zip Code 06897-4528	Date Receive 06/30/20					
Principal Occupation <del>Director of Communications</del>		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions <del>\$50.00</del>	<del>\$25.00-</del>			
Last Name <del>Williams</del>	First Name <del>Donald</del>		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	<del>0711</del>	tion ID#	Amount of Contribution			
Residential Street Address  41 Malbone Ln		City Brooklyn		State <del>CT</del>	Zip Code 06234-1563	Date Receive 06/30/20					
Principal Occupation  State Senator		Name of Employer  State of Connecticut		•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions	<del>\$100.00</del>			
Last Name Williams	First Name  Donald		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	1036	tion ID #	Amount of Contribution			
Residential Street Address 41 Malbone Ln		City Brooklyn		State CT	Zip Code <b>06234-1563</b>	Date Receive <b>06/30/2</b>					
Principal Occupation  State Senator		Name of Employer  State of Connecticut		•	Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes X	byist?	Aggregate Contril	butions 100.00	\$100.00			
Last Name Hauhuth	First Name Jen		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	1037	tion ID#	Amount of Contribution			
Residential Street Address  1260 Merritt St		City Fairfield		State CT	Zip Code <b>06825</b>	Date Receive <b>06/30/2</b>					
Principal Occupation Attorney		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1?	X Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$40.00	\$40.00			

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name Hauhuth	First Name  Jen		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	neck 0712	ition ID#	Amount of Contribution
Residential Street Address  1260 Merritt St		City Fairfield		State <del>CT</del>	Zip Code <del>06825</del>	Date Receive 06/30/20		
Principal Occupation  Attorney		Name of Employer Self		•	Is this contribution associate fundraising event listed in State of the If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contr	butions \$80.00	<del>\$40.00</del>
Last Name Hauhuth	First Name Martha		MI	Cash	contribution:	neck 0713	ition ID#	Amount of Contribution
Residential Street Address  31 Ostend Ave		City <del>Westport</del>		State <del>CT</del>	Zip Code <del>06880</del>	Date Receive		
Principal Occupation  Non-Profit CEO		Name of Employer  Positive Directions			Is this contribution associal fundraising event listed in S If yes, list Event #	Section J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	butions \$50.00	<del>\$25.00</del>
Last Name Hauhuth	First Name Martha		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck <b>1038</b>	ition ID#	Amount of Contribution
Residential Street Address 31 Ostend Ave		City Westport		State CT	Zip Code <b>06880</b>	Date Receive <b>06/30/2</b>		
Principal Occupation  Non-Profit CEO		Name of Employer  Positive Directions			Is this contribution associate fundraising event listed in If yes, list Event # 062	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contr	butions <b>\$25.00</b>	\$25.00
Last Name Rieder	First Name M.		MI	x Cash	contribution: Personal Cl	neck <b>1039</b>	ition ID#	Amount of Contribution
Residential Street Address  10 Plumkett Pl		City Westport		State CT	Zip Code <b>06880</b>	Date Receive <b>06/30/2</b>		
Principal Occupation  None		Name of Employer  None			Is this contribution associal fundraising event listed in 1 If yes, list Event # 062	Section J1?	X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contr	butions	\$100.00

		I. MONETARY RE	ECEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
		B. Itemized Contribut	ions fron	Individu	ıals			
Last Name <del>Rieder</del>	First Name  M.		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck 0714	oution ID#	Amount of Contribution
Residential Street Address  10 Plumkett Pl		City <del>Westport</del>		State <del>CT</del>	Zip Code <del>06880</del>	Date Recei		
Principal Occupation None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Cont	ributions \$200.00	<del>\$100.00</del>
Last Name Herman	First Name <del>Barbara</del>		MI	Cash	contribution:	neck 0715	oution ID#	Amount of Contribution
Residential Street Address  761 Merwins Ln		City Fairfield		State <del>CT</del>	Zip Code <del>06824</del>	Date Recei <del>06/30/2</del>		
Principal Occupation  Retired		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Cont	ributions \$100.00	<del>\$50.00</del>
Last Name Herman	First Name Barbara		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1040	oution ID #	Amount of Contribution
Residential Street Address 761 Merwins Ln		City Fairfield	•	State CT	Zip Code <b>06824</b>	Date Recei <b>06/30/</b>		
Principal Occupation  Retired		Name of Employer  None			Is this contribution associa fundraising event listed in If yes, list Event # 062		X Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es X	byist?	Aggregate Cont	ributions \$50.00	\$50.00
Last Name Reiner	First Name Mark		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 0719	oution ID #	Amount of Contribution
Residential Street Address 18 Engle St Apt 3U		City Tenafly		State NJ	Zip Code 07670	Date Recei 06/30/2		
Principal Occupation  Analyst		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Conf	ributions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE								FILING	DUE DATE		
Jepsen 2010											
		B. Itemized Contributi	ions fron	ı Individu	ıals		•				
Last Name Constant	First Name June		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0721	ID#	Amount of Contribution		
Residential Street Address 1510 Acher Rd Apt Mh		City Bronx		State NY	Zip Code 10462		e Received /30/2010				
Principal Occupation  Bookkeeper		Name of Employer Cable Holdings Inc			Is this contribution associate fundraising event listed in State If yes, list Event #			Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00		
Last Name Baldassi	First Name Josephine	2	MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0725	ID#	Amount of Contribution		
Residential Street Address 6044 Bleecker St		City Ridgewood		State NY	Zip Code 11385		e Received /30/2010				
Principal Occupation  Executive Assistant		Name of Employer Cable Holdings Inc			Is this contribution associal fundraising event listed in S If yes, list Event #		?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contribution	ons 00.00	\$100.00		
Last Name Smith	First Name Susan		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contribution 0728	ID#	Amount of Contribution		
Residential Street Address 80 High St		City New Haven		State CT	Zip Code 06511		te Received /30/2010				
Principal Occupation Arts Administrator		Name of Employer Creative Arts Workshop			Is this contribution associated fundraising event listed in the state of the state			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution \$10	ons 10.00	\$100.00		
Last Name Baudro	First Name Jacquelyn	1	MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0730	ID#	Amount of Contribution		
Residential Street Address 69 Stoddards Wharf Rd		City Ledyard		State CT	Zip Code 06339		te Received /30/2010				
Principal Occupation Human Resources Assistant		Name of Employer Dime Bank			Is this contribution associal fundraising event listed in the second of the second second in the second sec		?	Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Jepsen 2010											
		B. Ito	emized Contributi	ons from	ı Individu	ıals					
Last Name Porto	First Name Carl			MI	Cash	contribution:  X Personal of the property of t		Contribution 0734	on ID#	Amount of Contribution	
Residential Street Address 47 Oakwood Ln		City Hamden			State CT	Zip Code 06518		ate Received 6/30/2010			
Principal Occupation Attorney		Name of En Parrett, I	nployer Porto, Parese & Colw	ell	•	Is this contribution assoc fundraising event listed i If yes, list Event # 06		1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu \$1	itions	\$100.00	
Last Name Walker	First Name Toni			MI	Cash	contribution:  X Personal of the property of t		Contribution 0739	on ID #	Amount of Contribution	
Residential Street Address 1643 Ella T Grasso Blvd		City New Have	en		State CT	Zip Code 06511-2801		ate Received 6/30/2010	0		
Principal Occupation Social Worker		Name of En New Hav	nployer ren Adult Ed			Is this contribution assoc fundraising event listed i If yes, list Event # 06	n Section J	1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu	itions \$50.00	\$50.00	
Last Name Pacowta	First Name Michael			MI	Cash	contribution:  X Personal of the property of t		Contribution 0740	on ID#	Amount of Contribution	
Residential Street Address 166 River Rd		City Shelton			State CT	Zip Code 06484-4444		ate Received 6/30/2010			
Principal Occupation Financial Planner		Name of En			-	Is this contribution assoc fundraising event listed i  If yes, list Event # 06	n Section J	1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	itions \$50.00	\$50.00	
Last Name Shariff	First Name Teja			MI	Cash	contribution:  X Personal of the Credit/Decoration of the Credit/Decora		Contribution 0751	on ID#	Amount of Contribution	
Residential Street Address 388 E Main St		City Branford			State CT	Zip Code 06405		ate Received 6/30/2010			
Principal Occupation CPA		Name of En Rallett S				Is this contribution assoc fundraising event listed i If yes, list Event #		1?	Yes No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu \$1	utions	\$100.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FIL	NG DUE DATE			
Jepsen 2010											
B. Itemized Contributions from Individuals											
Last Name Burke	First Name Edward		MI	Cash	contribution:    X   Personal Cl	neck 0	ontribution ID #	Amount of Contribution			
Residential Street Address 16 Highland Dr		City Branford		State CT	Zip Code 06405		Received 80/2010				
Principal Occupation Accountant		Name of Employer Shoat, Burke et al			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$100.00	\$100.00			
Last Name Rubrich	First Name John		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 0	ontribution ID #	Amount of Contribution			
Residential Street Address 8 Trumbull St		City West Haven		State CT	Zip Code 06516		Received 80/2010				
Principal Occupation Attorney		Name of Employer Marcus Law Firm			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$100.00	\$100.00			
Last Name Fischbach	First Name Nancy		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 0	ontribution ID #	Amount of Contribution			
Residential Street Address 401 River Rd		City Deep River		State CT	Zip Code 06417-2121		Received 80/2010				
Principal Occupation Volunteer		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	Contributions \$50.00	\$50.00			
Last Name Michael	First Name Maureen		MI	Cash	contribution:    X   Personal Cl y Order   Credit/Debi	neck 0	ontribution ID#	Amount of Contribution			
Residential Street Address 4213 Avalon Dr E		City New Canaan		State CT	Zip Code 06840		Received 80/2010				
Principal Occupation Information Requested		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate	Contributions \$10.00	\$10.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							1	FILING	DUE DATE		
Jepsen 2010											
		B. Itemized Contributi	ons fron	ı Individu	ıals		•				
Last Name Hines	First Name Sally		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 0768	ID#	Amount of Contribution		
Residential Street Address 924 N Wilton Rd		City New Canaan		State CT	Zip Code 06840		te Received /30/2010				
Principal Occupation  Member, Board of Selectmen		Name of Employer Town of New Canaan			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggrega	ate Contributio	ons 0.00	\$10.00		
Last Name Penner	First Name Harry		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 0770	ID#	Amount of Contribution		
Residential Street Address 6 White Pine Dr		City Guilford		State CT	Zip Code 06437		e Received /30/2010		ı		
Principal Occupation CEO/Chair		Name of Employer  New Haven Phamaceuticals		•	Is this contribution associa fundraising event listed in If yes, list Event #		? <b>x</b>	Yes No	L		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contribution	ons 0.00	\$100.00		
Last Name Maxwell	First Name Leslie-Anı	ne	MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 0773	ID#	Amount of Contribution		
Residential Street Address 973 Little Meadow Rd		City Guilford		State CT	Zip Code 06437		te Received /30/2010				
Principal Occupation Attorney		Name of Employer Cantor Colburn			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggrega	ate Contributio	ons -0.00	\$40.00		
Last Name Hall	First Name Christoph	er	MI	Cash	contribution:  X Personal Cl y Order Credit/Deb		Contribution 0774	ID#	Amount of Contribution		
Residential Street Address 29 Highview Rd		City Darien		State CT	Zip Code 06820		te Received /30/2010				
Principal Occupation None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 062	Section J1	1 1				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggrega	ate Contributio	ons 10.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name Hall	First Name Britt			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 27 Highview Rd		City Darien			State CT	Zip Code 06820		Pate Received		
Principal Occupation  None		Name of E None	mployer			Is this contribution association fundraising event listed in If yes, list Event # 06		<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es X	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Kemp	First Name Judith			MI	Cash	contribution:  X Personal ( y Order		Contributi 0776	on ID#	Amount of Contribution
Residential Street Address 20 Seagate Rd		City Darien			State CT	Zip Code 06820		ate Received 6/30/201		
Principal Occupation Retired		Name of E None	mployer		•	Is this contribution associfundraising event listed in If yes, list Event # 06		<sub>J1?</sub> [2	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es X		Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Haranzo	First Name Mark			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 48 Tulip Tree Ln		City Darien			State CT	Zip Code 06820		Pate Received 06/30/201		
Principal Occupation  Lawyer		Name of E Wiggin 8	mployer & Dana LLP			Is this contribution assoc fundraising event listed in If yes, list Event # 06	n Section J	<sub>J1?</sub> [2	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob yes		Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Brooks	First Name Torrey			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 3 Hillcrest Park Rd		City Old Gree	enwich		State CT	Zip Code 06870		oate Received 6/30/201		
Principal Occupation Real Estate		Name of E Brooks,	mployer Torrey & Scott, Inc.			Is this contribution associfundraising event listed in If yes, list Event # 06	n Section J	<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Devereaux	Kathryn				Cash Money	x Personal C y Order Credit/Del		0767		Contribution
Residential Street Address		City		<u> </u>	State	Zip Code	D	ate Received		1
43 St John Pl		New Can	aan		CT	06840		6/30/2010		
Principal Occupation		Name of E	mployer			Is this contribution associa			Yes	ĺ
Retired		None				fundraising event listed in If yes, list Event #	Section J	x	No	
Is contributor a principal of a state contractor	or prospective	-	Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 °	child of a lob	,		\$	\$50.00	\$15.00
government the contract is with:  Last Name	l <sub>E: 4</sub> X	Laccurve	Eegistative	I <sub>MI</sub>	1	contribution:	<u> </u>	1		
Price	First Name Larry			MI	Cash	Personal C	Check	Contribution 0864	on ID #	Amount of Contribution
					Money	y Order X Credit/Deb	oit Card	0004		
Residential Street Address		City			State	Zip Code		ate Received	_	
24 Bainton Rd		West Ha	rtford		СТ	06117-2809		6/30/2010	)	<u> </u>
Principal Occupation		Name of E				Is this contribution association fundraising event listed in		J1?	Yes	
Attorney		Brown P	aindiris & Scott			If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	itions	Ī
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$	\$50.00	\$50.00
government the contract is with:	<u></u>	Executive	Legislative	+ =	I		<u> </u>	1		<u> </u>
Last Name Lanzit	First Name Rusty			MI	Cash	contribution:  Personal C	Check	Contributio	on ID #	Amount of Contribution
	,				_	y Order X Credit/Del	oit Card	0865		Commodulon
Residential Street Address		City			State	Zip Code		ate Received		
36 Morey Rd		Chaplin			СТ	06235-2224	0	6/30/2010	)	
Principal Occupation		Name of E	mployer			Is this contribution association fundraising event listed in			Yes	
Insurance		EFP				If yes, list Event #		x	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	ıtions	
state contractor? Is yes, indicate which branch or branches of			П		child of a lob	-		\$	\$50.00	\$50.00
government the contract is with:	<u> </u>	Executive	Legislative	<del>                                     </del>	res X	No	<u> </u>	1		1
Last Name Ellis	First Name Susan			MI	Method of Cash	contribution:	`heck	Contributio	on ID #	Amount of Contribution
EIIIS	Susan					y Order X Credit/Del		0837		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
23 Shore Acre Dr		Old Gree	nwich		СТ	06870-2107	0	6/30/2010	0	]
Principal Occupation		Name of E	mployer			Is this contribution association fundraising event listed in			Yes	
Retired		None				If yes, list Event #	Section 1	<u>x</u>	No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	ıtions	İ
state contractor? Is yes, indicate which branch or branches of	_				child of a lob	-		-	100.00	\$100.00
government the contract is with:		Executive	Legislative		res X	No	<u> </u>			

		I. MO	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Iter	mized Contributi	ons from	Individu	ıals				
Last Name Holmes	First Name Christi			MI	Cash	contribution:    X   Personal C		Contribution 0750	on ID#	Amount of Contribution
Residential Street Address 274 Church St		City Guilford			State CT	Zip Code 06437		Pate Received 06/30/2010	)	
Principal Occupation Director of Education		Name of Emp CT State N	oloyer Medical Society			Is this contribution associ- fundraising event listed in If yes, list Event # 06.	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu \$	tions 40.00	\$40.00
Last Name Gibbons	First Name Kathleen			MI	Cash	contribution:  Personal C  y Order X Credit/Del		Contribution 0831	on ID#	Amount of Contribution
Residential Street Address 3600 Bent Branch Ct		City Falls Churc	ch		State VA	Zip Code 22041-1006		ate Received 6/30/2010	)	
Principal Occupation  Real Estate Broker		Name of Emp McEnearne	·		•	Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu \$	tions 50.00	\$50.00
Last Name Shufrin	First Name David			MI	Cash	contribution: Personal C		Contribution 0834	n ID#	Amount of Contribution
Residential Street Address 62 Angelus Dr		City Greenwich		•	State CT	Zip Code 06831-3634		Pate Received	)	
Principal Occupation  Law Student		Name of Emp None	oloyer			Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	-	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu \$1	tions 00.00	\$100.00
Last Name Shufrin	First Name Eric			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0905	on ID#	Amount of Contribution
Residential Street Address 62 Angelus Dr		City Greenwich			State CT	Zip Code 06831-3634		Pate Received	)	
Principal Occupation None		Name of Emp None	oloyer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu \$1	tions .00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemized	l Contributio	ons from	Individu	ıals				
Last Name Slossberg	First Name David			MI	Cash	contribution: Personal C		Contributi 0902	on ID#	Amount of Contribution
Residential Street Address  14 Honeysuckle Ln		City Milford			State CT	Zip Code 06461-1671		ate Received		
Principal Occupation Attorney		Name of Employer Hurwitz Sagarir	ı Slossberg &	Knuff		Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive Le	s X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name raymond	First Name jan			MI	Cash	contribution: Personal C y Order X Credit/De		Contributi 0904	on ID#	Amount of Contribution
Residential Street Address 11 Waverly Rd		City Darien			State CT	Zip Code 06820-5736		ate Received 6/30/201		
Principal Occupation artist		Name of Employer self			•	Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive Le	s X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name woodard	First Name lincoln			MI	Cash	contribution: Personal C y Order X Credit/De		Contributi 0912	on ID#	Amount of Contribution
Residential Street Address 525 Chestnut Hill Rd		City Glastonbury			State CT	Zip Code 06033-4105		ate Received		
Principal Occupation attorney		Name of Employer moukawsher &	walsh, Ilc			Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		s X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Brown	First Name Elizabeth			MI	Cash	contribution: Personal C y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 225 Alexander Ave		City Waterbury			State CT	Zip Code 06705-3105		ate Received		
Principal Occupation None		Name of Employer None				Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		s X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name Nussbaum	First Name Consuelo			MI M	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0874	ı ID#	Amount of Contribution
Residential Street Address 27 Blueberry Ln		City Darien			State CT	Zip Code 06820-2510		Date Received 06/30/2010		
Principal Occupation Retired		Name of Er	nployer	_		Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Gogliettino	First Name John			MI	Cash	contribution:  Personal C  y Order X Credit/Del		Contribution 0887	n ID#	Amount of Contribution
Residential Street Address 129 Lake Pl S		City Danbury			State CT	Zip Code 06810-7260		Date Received 06/30/2010		
Principal Occupation Insurance Broker		Name of Er Self	nployer		•	Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name campanella	First Name constance			MI	Cash	contribution: Personal C		Contribution 0893	n ID#	Amount of Contribution
Residential Street Address 8408 Brewster Dr		City Alexandr	ia		State VA	Zip Code 22308-2108		Pate Received 06/30/2010		
Principal Occupation executive		Name of Er stateside	nployer e associates			Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Himes	First Name James			MI A	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0861	ı ID#	Amount of Contribution
Residential Street Address 197 Valley Rd		City Cos Cob			State CT	Zip Code 06807-2212		Date Received 06/30/2010		
Principal Occupation Representative		Name of Er US Hous	nployer e of Representatives	;		Is this contribution associ fundraising event listed in If yes, list Event #				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	utor a lobbyis t child of a lob	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Seidman	Lon				Cash Money	y Order X Credit/Del		0896		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
76 Bushy Hill Rd		Ivoryton			СТ	06442-1108	0	6/30/2010	0	
Principal Occupation Partner		Name of Er Safety Z				Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	itions	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Creeth	Richard			F	Cash Money	y Order		0855		Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
250 Catalpa Rd		Wilton			СТ	06897-2021	0	6/30/2010	0	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ			Yes	
Consultant		QueBIT (	Consulting, LLC			fundraising event listed in If yes, list Event #	i section .	x	No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu	itions \$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID#	Amount of
Morante	Rosemary	,			Cash Money	y Order		0880		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
28 Welch St		Plainville			СТ	06062-2119	0	6/30/2010	)	
Principal Occupation		Name of En				Is this contribution associ fundraising event listed in			Yes	
Administrator		Windsor	Public Schools			If yes, list Event #		х	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	, 1	Aggre	gate Contribu	itions	
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 —	child of a lob	-		\$	\$25.00	\$25.00
government the contract is with:  Last Name	First Name	Executive	Legislative	I MI	1	contribution:	<u> </u>			
Lubin	Andrew			MI	Cash	y Order Personal C		Contribution 0748	on ID#	Amount of Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
55 Killian Ave		Trumbull			СТ	06611	0	6/30/2010	0	
Principal Occupation		Name of Er	nployer	_		Is this contribution associ		1^	Yes	
Attorney		Neu				fundraising event listed in  If yes, list Event # 06			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	itions	
Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$	\$50.00	\$50.00
government the contract is with:							1			l

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Avallone	First Name Brenda		MI	Cash	contribution:    X   Personal Cl	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address  1 Ashford Ct		City Wallingford		State CT	Zip Code 06492		Received 730/2010		
Principal Occupation  Nurse		Name of Employer Bradley Home		•	Is this contribution associa fundraising event listed in If yes, list Event # 063		X Y		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution \$100		\$100.00
Last Name Stanback	First Name Anne		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 44 Wright Dr		City Avon		State CT	Zip Code 06001-2106		Received 30/2010		
Principal Occupation  Executive Director		Name of Employer N/A			Is this contribution associa fundraising event listed in If yes, list Event #		X   N	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution		\$100.00
Last Name Berg	First Name Peter		MI E	Cash	contribution: Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 28 Dandy Dr		City Cos Cob		State CT	Zip Code 06807-2203		Received 730/2010		
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution \$25	ns 5.00	\$25.00
Last Name Berg	First Name Judith		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck	Contribution I 0894	ID#	Amount of Contribution
Residential Street Address 28 Dandy Dr		City Cos Cob		State CT	Zip Code 06807-2203		Received 30/2010		
Principal Occupation Teacher		Name of Employer Greenwich Public Schools			Is this contribution associa fundraising event listed in If yes, list Event #		X N	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggregat	te Contribution	ns 5.00	\$25.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ito	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Gertzoff	Arline			Р	Cash Money	Personal C  y Order X Credit/Deb		0833		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
6 Fillow St		Westport			СТ	06880-1217		6/30/2010	)	
Principal Occupation		Name of En	nployer			Is this contribution associa	ated with	a	Yes	†
education		self-emp	loyed			fundraising event listed in If yes, list Event #	Section .	J1? <b>x</b>	No	
T						-	1			<del> </del>
Is contributor a principal of a state contractor of state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob		Aggre	gate Contribu	tions \$10.00	\$10.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No		4	510.00	\$10.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Aasen	Martha				Cash Money	Personal C  y Order  X Credit/Del		0860		Contribution
Residential Street Address		City		1	State	Zip Code	D	ate Received		
31 Ellery Ln		Westport			СТ	06880-5203	0	6/30/2010	)	
Principal Occupation		Name of En	nployer		•	Is this contribution associa			Yes	Ī
Retired		None				fundraising event listed in If yes, list Event #	Section .	J1?	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contribu	itions	†
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative		child of a lob	-		\$	50.00	\$50.00
government the contract is with:		Executive	Legislative	+-	I		<u> </u>	1		
Last Name Aasen	First Name Larry			MI	Cash	contribution: Personal C	heck	Contributio	on ID #	Amount of Contribution
	,	1			Money	y Order X Credit/Deb	oit Card	0877		
Residential Street Address		City			State	Zip Code		ate Received		
31 Ellery Ln		Westport			СТ	06880-5203	0	6/30/2010	)	<u> </u>
Principal Occupation		Name of En	nployer			Is this contribution association fundraising event listed in		J1?	Yes	
Retired		None				If yes, list Event #		x	No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	İ
state contractor? Is yes, indicate which branch or branches of		F	Legislative		child of a lob	•		\$	50.00	\$50.00
government the contract is with:		Executive	Legislative	+ -	I		<u> </u>	1		
Last Name  Barnett	First Name  Margaret	:		MI	Method of Cash	contribution:	heck	Contributio	on ID #	Amount of Contribution
						y Order Credit/Deb	oit Card	1035		
Residential Street Address		City			State	Zip Code		ate Received		
125 S Compo Rd		Westpor	t		СТ	06880	_	6/30/20	10	
Principal Occupation		Name of En	nployer			Is this contribution association fundraising event listed in		1^	Yes	
Retired		None				If yes, list Event # 06			No	
Is contributor a principal of a state contractor of	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu	itions	Ì
state contractor? Is yes, indicate which branch or branches of		Б	□	dependent	child of a lob	-		\$1	00.00	\$100.00
government the contract is with:	Ц	Executive	Legislative		res 🔼	NO	<u> </u>			<u> </u>

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE								1	FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	ıals		<u> </u>		
Last Name Barnett	First Name Margaret			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0710	ID#	Amount of Contribution
Residential Street Address  125 S Compo Rd		City <del>Westport</del>	÷		State <del>CT</del>	Zip Code <del>06880</del>		Date Received 06/30/2010		
Principal Occupation  Retired		Name of Er None	mployer			Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributio	ons 1 <del>0.00</del>	<del>\$100.00</del>
Last Name Silverman	First Name Phyllis			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0742	ID#	Amount of Contribution
Residential Street Address 15 High Hill Rd		City Bloomfie	ld		State CT	Zip Code 06002		Pate Received 06/30/2010		
Principal Occupation  Legislative Aide		Name of Er State of	mployer Connecticut			Is this contribution associ fundraising event listed in If yes, list Event # 06		J1? 🗀		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributio	ons 60.00	\$50.00
Last Name Cusick	First Name Karen			MI T	Cash	contribution:  Personal C y Order X Credit/Del		Contribution 0839	ID#	Amount of Contribution
Residential Street Address 6 Diana Dr		City Woodbrid	dge		State CT	Zip Code 06525-1217		Date Received 06/30/2010		
Principal Occupation Administrator		Name of E				Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	L
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributio	ons 60.00	\$50.00
Last Name Feen	First Name Carl			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0738	ID#	Amount of Contribution
Residential Street Address 791 Tummel Ln		City West Hav	ven		State CT	Zip Code 06516		Date Received 06/30/2010		
Principal Occupation Financial Planner		Name of E	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event # 06	n Section J			L
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis t child of a lob	byist?	Aggre	egate Contributio	ons 10.00	\$100.00

		I. MC	ONETARY REC	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Iten	nized Contributio	ons from	Individu	ıals				
Last Name Davis-Rudd	First Name Arlene			MI	Cash	contribution:    X   Personal C		Contributi 0741	on ID#	Amount of Contribution
Residential Street Address 764 George St Fl 1		City New Haven	1		State CT	Zip Code 06511		ate Received		
Principal Occupation Writer		Name of Empl Self	loyer		•	Is this contribution associ fundraising event listed in If yes, list Event # 06		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Scalzi	First Name Isabelle			MI	Cash	contribution:  X Personal C  y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 46 Banta Ln		City Durham			State CT	Zip Code 06422		ate Received 6/30/201		
Principal Occupation  Business Development		Name of Empl Metro Taxi	-		•	Is this contribution associ fundraising event listed in If yes, list Event # 06		11? E	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Scalzi	First Name William			MI	Cash	contribution:    X   Personal C		Contributi	on ID#	Amount of Contribution
Residential Street Address 46 Banta Ln		City Durham			State CT	Zip Code 06422		ate Received		
Principal Occupation Business Owner		Name of Empl Metro Taxi	•			Is this contribution associ fundraising event listed in If yes, list Event # 06		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Agro	First Name Christoph	er		MI	Cash	contribution:  X Personal C  y Order Credit/De		Contributi 0759	on ID#	Amount of Contribution
Residential Street Address 6 Cartier Rd		City Enfield			State CT	Zip Code 06082		ate Received		
Principal Occupation Optometrist		Name of Empl Enfield Eye	loyer ecare Associates			Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	IG DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	tions from	ı Individu	ıals					
Last Name Cain	First Name Roland		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 07	ontribution ID #	Amount of Contribution		
Residential Street Address 21 Topping Rd	•	City Greenwich	•	State CT	Zip Code 06831		deceived 0/2010			
Principal Occupation  Executive Director		Name of Employer Alexcom Inc			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00		
Last Name Lanoe	First Name Christine		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 07	ontribution ID #	Amount of Contribution		
Residential Street Address 21 Topping Rd		City Greenwich		State CT	Zip Code 06831		deceived 0/2010			
Principal Occupation  Marketing Consultant		Name of Employer Alexander Realty Co.		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00		
Last Name Treibeck	First Name Alexisand	Ira	MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 07	ontribution ID #	Amount of Contribution		
Residential Street Address 21 Topping Rd		City Greenwich		State CT	Zip Code 06831		deceived 0/2010			
Principal Occupation Receptionist		Name of Employer Alexcom Inc		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00		
Last Name Treibick	First Name Richard		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 07	ontribution ID#	Amount of Contribution		
Residential Street Address 21 Topping Rd		City Greenwich		State CT	Zip Code 06831		deceived 0/2010			
Principal Occupation  Executive		Name of Employer Alexcom, Inc.		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate (	Contributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FIL	ING DUE DATE		
Jepsen 2010										
		B. Itemized Contributi	ions fron	ı Individu	ıals		·			
Last Name Marcus	First Name Shelley		MI	Cash	contribution:    X   Personal Cl	heck 0	ontribution ID #	Amount of Contribution		
Residential Street Address 16 Highland Ave		City Branford		State CT	Zip Code 06405		Received 30/2010			
Principal Occupation Attorney		Name of Employer The Marcus Law Firm			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$100.00	\$100.00		
Last Name May	First Name Albert		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 0	ontribution ID #	Amount of Contribution		
Residential Street Address 111 Spring Garden St		City Hamden		State CT	Zip Code 06517-1913		Received 60/2010			
Principal Occupation fundraiser		Name of Employer Christian Community Action		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	Contributions \$20.00	\$20.00		
Last Name Loughlin	First Name James		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0	ontribution ID #	Amount of Contribution		
Residential Street Address 216 High St		City Wallingford		State CT	Zip Code 06492		Received 0/2010			
Principal Occupation Attorney		Name of Employer Loughlin Fitzgerald		•	Is this contribution associa fundraising event listed in If yes, list Event # 063	Section J1?	X Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate	Contributions \$25.00	\$25.00		
Last Name Mayer	First Name George		MI W	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0	ontribution ID#	Amount of Contribution		
Residential Street Address 14 Bouton Cir		City Stamford		State CT	Zip Code 06907		Received 80/2010			
Principal Occupation Retired Police Officer		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemi	zed Contributio	ons from	Individu	ıals				
Last Name Griffith	First Name Myriam			MI	Cash	contribution:    X   Personal C		Contribution 0777	on ID#	Amount of Contribution
Residential Street Address 55 Dubois St		City Darien			State CT	Zip Code 06820-5224		ate Received 6/30/201		
Principal Occupation  Consultant		Name of Employ Self	ver .			Is this contribution associ fundraising event listed in If yes, list Event # 06			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Barton	First Name Nancy			MI	Cash	contribution:  X Personal C y Order Credit/De		Contribution 0769	on ID#	Amount of Contribution
Residential Street Address 7 Meadow Pl		City Old Greenwic	ch		State CT	Zip Code 06870		ate Received 6/30/201		
Principal Occupation Attorney		Name of Employ Retired	ver			Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Neubert	First Name Deborah			MI	Cash	contribution:    X   Personal C		Contribution 0744	on ID#	Amount of Contribution
Residential Street Address 38 Cromwell Rd		City North Haven			State CT	Zip Code 06473		ate Received		
Principal Occupation Attorney		Name of Employ Neubert, Pep	er De & Monteith			Is this contribution associ fundraising event listed in If yes, list Event # 06	Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Neubert	First Name Michael			MI	Cash	contribution:  X Personal C y Order Credit/De		Contribution 0745	on ID#	Amount of Contribution
Residential Street Address 38 Cromwell Rd		City North Haven			State CT	Zip Code 06473		ate Received		
Principal Occupation Attorney		Name of Employ Neubert, Per	ver oe & Monteith	_		Is this contribution associ fundraising event listed in If yes, list Event # 06	Section J		Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ite	emized Contribution	ons from	Individu	uals				
Last Name Bettigole	First Name Robert			MI	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 60 Long Pond Rd		City Lakeville			State CT	Zip Code 06039		Date Received		
Principal Occupation  Venture Capital Investor		Name of Em Elm Stree	nployer et Venture Advisors			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	obyist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Serber	First Name Sari			MI	Cash	contribution:  X Personal y Order Credit/De		Contributi 0723	on ID#	Amount of Contribution
Residential Street Address 62 Angelus Dr		City Greenwick	h		State CT	Zip Code 06831		Date Received		
Principal Occupation Court Reporter		Name of Em	pployer			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	-	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Shufrin	First Name Harry			MI	Cash	contribution:  X Personal of the property of t		Contributi 0724	on ID#	Amount of Contribution
Residential Street Address 62 Angelus Dr		City Greenwick	h		State CT	Zip Code 06831		Date Received		
Principal Occupation CPA		Name of Em Shufrin a	nployer and Associates			Is this contribution assoc fundraising event listed i If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res		Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Schwartz	First Name Zachary			MI	Cash	contribution:  X Personal y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 62 Angelus Dr		City Greenwick	h		State CT	Zip Code 06831		Date Received 06/30/201		
Principal Occupation Student		Name of Em	pployer			Is this contribution assoc fundraising event listed i If yes, list Event #		J12 L	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	-	Aggre	egate Contrib	utions 100.00	\$100.00

		I. MO	NETARY REC	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Item	nized Contributio	ons from	Individu	ıals				
Last Name Creed	First Name Kevin			MI	Cash	contribution: Personal C  Order X Credit/Del		Contribution 0621	ı ID#	Amount of Contribution
Residential Street Address 39 Byrnes Ave		City Litchfield			State CT	Zip Code 06759-4113		eate Received 6/30/2010		
Principal Occupation US Army (Ret) & Attorney		Name of Emplo	-		-	Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	child of a lob	byist?	Aggre	gate Contribution \$5	ions 50.00	\$50.00
Last Name Samers	First Name Edith			MI	Cash	contribution: Personal C / Order X Credit/Del		Contribution 0881	ı ID#	Amount of Contribution
Residential Street Address 180 Big Oak Rd		City Stamford			State CT	Zip Code 06903-4608		ate Received 6/30/2010		
Principal Occupation  Marketing		Name of Emplo Shalom TV	oyer		•	Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob 'es	byist?	Aggre	gate Contributi \$2	ions 25.00	\$25.00
Last Name Barrett	First Name Susan			MI P	Cash	contribution: Personal C  Order X Credit/Del		Contribution 0888	ı ID#	Amount of Contribution
Residential Street Address 122 Wilton Rd		City Fairfield			State CT	Zip Code 06824-4043		eate Received 6/30/2010		
Principal Occupation Educator		Name of Emplo	oyer		•	Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribution \$10	ions 00.00	\$100.00
Last Name Needelman	First Name Marc			MI	Cash	contribution: Personal C  Order X Credit/Del		Contribution 0886	ı ID#	Amount of Contribution
Residential Street Address 5 Adams Rd		City Bloomfield			State CT	Zip Code 06002-1101		ate Received 6/30/2010		
Principal Occupation attorney		Name of Emplo	oyer			Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contributi \$2	ions 25.00	\$25.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribut	ions from	Individu	ıals				
Last Name Grady	First Name Susan		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck (	Contribution I	ID#	Amount of Contribution
Residential Street Address 25 Westlook Rd		City Wethersfield		State CT	Zip Code 06109-1459		Received 730/2010		
Principal Occupation teacher		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	te Contribution \$25	ns 5.00	\$25.00
Last Name Pollack	First Name Gerald.		MI A	Cash	contribution: Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 27 Irvine Rd		City Old Greenwich		State CT	Zip Code 06870-1830		Received 30/2010		
Principal Occupation retired		Name of Employer none		•	Is this contribution associa fundraising event listed in If yes, list Event #		X   N	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	te Contribution	ns 0.00	\$10.00
Last Name Saddlemire	First Name Richard		MI D	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck (	Contribution I	ID#	Amount of Contribution
Residential Street Address 235 Woodhaven Rd		City Glastonbury		State CT	Zip Code 06033-1919		Received 730/2010		
Principal Occupation Educator		Name of Employer Retired		•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	te Contribution \$50	ns 0.00	\$50.00
Last Name Saddlemire	First Name Patricia		MI M	Cash	contribution: Personal Cl y Order X Credit/Debi	neck (	Contribution I	ID#	Amount of Contribution
Residential Street Address 235 Woodhaven Rd		City Glastonbury		State CT	Zip Code 06033-1919		Received 30/2010		
Principal Occupation Educator		Name of Employer Retired			Is this contribution associa fundraising event listed in If yes, list Event #		X   N	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	te Contribution \$50	ns 0.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name Scheidl	First Name Constanze	e	MI	Cash	contribution:    X   Personal Cl	heck 0766	ution ID#	Amount of Contribution		
Residential Street Address 5 Cecil Pl		City New Canaan		State CT	Zip Code 06840-6404	Date Recei				
Principal Occupation  None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	sibutions \$10.00	\$10.00		
Last Name Spader	First Name Walter		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	heck 0758	ution ID#	Amount of Contribution		
Residential Street Address 15 Leighton Ct		City North Haven		State CT	Zip Code 06473	Date Recei				
Principal Occupation Attorney		Name of Employer Marcus Law Firm		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00		
Last Name Marcus	First Name Jill		MI	Cash	contribution:    X   Personal Cl	heck 0756	ution ID#	Amount of Contribution		
Residential Street Address 100 Stony Creek Rd		City Branford		State CT	Zip Code 06405-3236	Date Recei				
Principal Occupation Retired		Name of Employer Retired		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00		
Last Name Wallace	First Name Lewis		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi	heck 0760	ution ID#	Amount of Contribution		
Residential Street Address 2 Sylvan Rd		City Danbury		State CT	Zip Code 06811-4982	Date Recei				
Principal Occupation Sales		Name of Employer Commonfund			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$25.00	\$25.00		

		I. MON	NETARY REC	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemiz	zed Contributio	ons from	Individu	ıals				
Last Name Bayne	First Name David			MI	Cash	contribution:  X Personal C  y Order Credit/Det		Contribution	n ID#	Amount of Contribution
Residential Street Address 5 Windsor Rd		City Darien			State CT	Zip Code 06820-3228		ate Received 6/30/2010		
Principal Occupation Attorney		Name of Employ Kavanaugh N				Is this contribution association fundraising event listed in If yes, list Event # 062	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	child of a lob	byist?	Aggre	gate Contribut	ions 50.00	\$50.00
Last Name Avallone	First Name Vincent			MI	Cash	contribution:  X Personal C  / Order Credit/Del		Contribution 0736	n ID#	Amount of Contribution
Residential Street Address  1 Ashford Ct		City Wallingford			State CT	Zip Code 06492-5207		ate Received 6/30/2010		
Principal Occupation Attorney		Name of Employ Avallone & A			•	Is this contribution association fundraising event listed in If yes, list Event # 06.			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyist child of a lob es	byist?	Aggre	gate Contribut	ions 00.00	\$100.00
Last Name Porto	First Name Carl			MI	Cash	contribution:    X   Personal C		Contribution 0733	n ID#	Amount of Contribution
Residential Street Address 73 Autumn Ridge Rd		City Hamden			State CT	Zip Code 06514		ate Received 6/30/2010		
Principal Occupation Attorney		Name of Employ Parrett Porto	<sup>er</sup> Parese Colwell		•	Is this contribution association fundraising event listed in If yes, list Event # 06.	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	utor a lobbyist child of a lob es x	byist?	Aggre	gate Contribut	ions 00.00	\$100.00
Last Name Juliano	First Name James			MI	Cash	contribution:  X Personal C  Order Credit/Del		Contribution 0761	n ID#	Amount of Contribution
Residential Street Address 36 Hundred Acres Rd		City Newtown			State CT	Zip Code 06470-2409		ate Received 6/30/2010		
Principal Occupation Retired		Name of Employ None	er			Is this contribution association fundraising event listed in If yes, list Event #		11? <b>브</b>	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyist child of a lob	byist?	Aggre	gate Contribut	ions 00.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	ıals		•		
Last Name Giannaros	First Name Demetrio	5		MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0729	ı ID#	Amount of Contribution
Residential Street Address 56 Basswood Rd		City Farmingt	con		State CT	Zip Code 06032-1142		Date Received 06/30/2010		
Principal Occupation State Rep.		Name of E	mployer Connecticut			Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	outor a lobbyis t child of a lob Yes X	byist?	Aggre	egate Contributi \$5	ions 50.00	\$50.00
Last Name Watanabe	First Name Myrna			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0772	i ID#	Amount of Contribution
Residential Street Address 155 Woodchuck Ln		City Harwinto	on		State CT	Zip Code 06791-1512		Date Received 06/30/2010		
Principal Occupation  Consultant		Name of E	mployer		•	Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributi \$3	ions 30.00	\$30.00
Last Name Widlitz	First Name Patricia			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0737	ı ID#	Amount of Contribution
Residential Street Address 12 Island Bay Cir		City Guilford			State CT	Zip Code 06437-3058		Pate Received 06/30/2010		
Principal Occupation Legislator		Name of E	mployer Connecticut		•	Is this contribution associ- fundraising event listed in If yes, list Event # 06.	Section .	J1?		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Colinco	First Name Mary Jane	2		MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0717	ı ID#	Amount of Contribution
Residential Street Address 2559 Fish Ave		City Bronx			State NY	Zip Code 10469		Date Received 06/30/2010		
Principal Occupation  Market Analyst		Name of E	mployer oldings Company			Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ions from	ı Individu	ıals				
Last Name Greider	First Name George		MI	Cash	contribution:    X   Personal Cl	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 382 Town St		City East Haddam		State CT	Zip Code 06423-1371		e Received /30/2010		
Principal Occupation Retired		Name of Employer None		-	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution	5.00	\$25.00
Last Name Runde	First Name Robert		MI H	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 178 Idlewood Dr		City Stamford		State CT	Zip Code 06905-2409		e Received /30/2010		
Principal Occupation Financial Advisor		Name of Employer American Planning Group			Is this contribution associa fundraising event listed in If yes, list Event #		, X 1	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution		\$100.00
Last Name Murtha	First Name Robert		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 12 Jeremy Dr		City New Fairfield		State CT	Zip Code 06812-2110		e Received /30/2010		
Principal Occupation Business Manager		Name of Employer IBM			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution	ons 0.00	\$10.00
Last Name Murtha	First Name Holly		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 12 Jeremy Dr		City New Fairfield		State CT	Zip Code 06812-2110		e Received /30/2010		
Principal Occupation  Mother		Name of Employer none			Is this contribution associa fundraising event listed in If yes, list Event #		, <u> </u>	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggregat	te Contribution	ons 0.00	\$10.00

		I. MONETA	RY REC	EIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemized Co	ntribution	ns from	Individu	ıals				
Last Name Imbimbo	First Name Anthony		]	MI	Cash	contribution: Personal C  Order X Credit/Del		Contribution 0856	on ID#	Amount of Contribution
Residential Street Address 157 Mansfield Ave		City Darien			State CT	Zip Code 06820-3525		eate Received		
Principal Occupation Publishing		Name of Employer Self				Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legislat			ntor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	itions \$25.00	\$25.00
Last Name Jaff	First Name Jennifer		1	MI	Cash	contribution: Personal C  Order X Credit/Del		Contribution 0867	on ID#	Amount of Contribution
Residential Street Address 18 Timberline Dr		City Farmington			State CT	Zip Code 06032-1744		eate Received		
Principal Occupation Attorney		Name of Employer  Advocacy for Patien Illness	ts with Chro	onic		Is this contribution associ- fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Legislat		dependent	ator a lobbyis child of a lob es	byist?	Aggre	gate Contribu	itions L50.00	\$50.00
Last Name Staples	First Name Cameron		]	MI	Cash	contribution:    X   Personal C		Contributio	on ID#	Amount of Contribution
Residential Street Address 233 Edwards St		City New Haven			State CT	Zip Code 06511		eate Received	0	
Principal Occupation State Rep.		Name of Employer State of Connecticu	t .			Is this contribution associ fundraising event listed in If yes, list Event # 06.			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Legislat			ntor a lobbyis child of a lob es	byist?	Aggre	egate Contribu	ntions	\$100.00
Last Name Allentuch	First Name Simon		j	MI	Cash	contribution:    X   Personal C		Contribution 0749	on ID #	Amount of Contribution
Residential Street Address 266 W Elm St		City New Haven			State CT	Zip Code 06515		eate Received		
Principal Occupation Attorney		Name of Employer Neubert, Pepe & Mo	nteith			Is this contribution associ fundraising event listed in If yes, list Event # 06.	Section J		Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Legislat		dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribu	itions \$60.00	\$60.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name Pepe	First Name Gregory		MI	Cash	contribution:    X   Personal Characteristics   Personal Characteristics   Credit/Debit   Personal Characteristics   Personal Cha		Contribution 0746	ı ID#	Amount of Contribution
Residential Street Address 157 Santa Fe Ave		City Hamden		State CT	Zip Code 06517		te Received /30/2010		
Principal Occupation  Lawyer		Name of Employer Neubert, Pep & Monteith, P.C	<u>.</u>		Is this contribution associate fundraising event listed in If yes, list Event # 063			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributi	ions 00.00	\$100.00
Last Name Martone	First Name Michael		MI A	Cash	contribution: Personal Cl y Order X Credit/Debi		Contribution 0869	ı ID#	Amount of Contribution
Residential Street Address 32 Buttermilk Ln		City Branford		State CT	Zip Code 06405-2702		te Received /01/2010		
Principal Occupation Attorney		Name of Employer N/A		•	Is this contribution associate fundraising event listed in State of the If yes, list Event #		?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributi	ions 50.00	\$50.00
Last Name Urban	First Name Diana		MI S	Cash	contribution:  Personal Ch y Order X Credit/Debi		Contribution	ı ID#	Amount of Contribution
Residential Street Address 146 Babcock Rd		City North Stonington		State CT	Zip Code 06359-1334		te Received /01/2010		
Principal Occupation  legislator		Name of Employer Ct General Assembly			Is this contribution associate fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contributi	ions 50.00	\$50.00
Last Name Malloy	First Name William		MI F	Cash	contribution:  Personal Ch y Order  X Credit/Debi		Contribution 0836	ı ID#	Amount of Contribution
Residential Street Address 87 Glenbrook Rd		City Stamford		State CT	Zip Code 06902-2971		te Received /01/2010		
Principal Occupation owner		Name of Employer Wm. F. Malloy Agency, Inc.			Is this contribution associal fundraising event listed in S If yes, list Event #		?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributi \$10	ions 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Scheer	First Name David		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0878	ution ID#	Amount of Contribution		
Residential Street Address 2 Spring Rock Rd		City Branford		State CT	Zip Code 06405-5520	Date Receiv				
Principal Occupation President		Name of Employer Scheer & Co			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Conti	sibutions \$100.00	\$100.00		
Last Name Williams	First Name Dudley		MI N	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0900	ution ID#	Amount of Contribution		
Residential Street Address 101 Dogwood Ln		City Stamford		State CT	Zip Code 06903-4532	Date Receiv 07/01/20				
Principal Occupation  Manager		Name of Employer GE Asset Management		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	sibutions \$100.00	\$100.00		
Last Name Selkowitz	First Name Arthur		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 0853	ution ID#	Amount of Contribution		
Residential Street Address 262 Ocean Dr E		City Stamford		State CT	Zip Code 06902-8238	Date Receiv				
Principal Occupation Advertising		Name of Employer Retired			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Conti	sibutions \$100.00	\$100.00		
Last Name Mainville	First Name Henry		MI	Cash	contribution:    X   Personal Cl	neck 0787	ution ID#	Amount of Contribution		
Residential Street Address 133 Stamford Ave		City Stamford		State CT	Zip Code 06902	Date Receiv 07/01/20				
Principal Occupation Social Worker		Name of Employer Stamford Schools		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Conti	sibutions \$100.00	\$100.00		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	ILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ions fron	Individu	ıals		•		
Last Name Chiaramonte	First Name Frank		MI J	Cash	contribution: Personal Cl y Order X Credit/Debi	neck C	Contribution II	D#	Amount of Contribution
Residential Street Address 131 Burlington Rd		City Harwinton		State CT	Zip Code 06791-2025		Received 01/2010		
Principal Occupation First Selectman		Name of Employer Town of Harwinton			Is this contribution associa fundraising event listed in If yes, list Event #		X N	es Vo	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	e Contribution \$25		\$25.00
Last Name Feng	First Name Theodore		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck C	Contribution II	D#	Amount of Contribution
Residential Street Address 33 Inglenook Rd		City New Fairfield		State CT	Zip Code 06812		Received 01/2010		
Principal Occupation Organizer		Name of Employer UAW		•	Is this contribution associa fundraising event listed in If yes, list Event #		X N	es Vo	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	e Contribution \$50		\$50.00
Last Name Molito	First Name Justin		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck C	Contribution II	D#	Amount of Contribution
Residential Street Address 203 Middle River Rd		City Danbury		State CT	Zip Code 06811		Received 01/2010		
Principal Occupation Organizer		Name of Employer Writers Guild of America			Is this contribution associa fundraising event listed in If yes, list Event #		X N	es Io	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate	e Contribution \$50		\$50.00
Last Name Hall	First Name Caroline		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck C	Contribution II	D#	Amount of Contribution
Residential Street Address 6 Flirtation Dr		City Danbury		State CT	Zip Code 06810		Received 01/2010		
Principal Occupation Information Requested		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event #		X N	es Vo	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate	e Contribution \$25		\$25.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Jepsen 2010											
		B. Item	nized Contributio	ons from	Individu	ıals					
Last Name Pearwson	First Name Trish			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 0907	on ID#	Amount of Contribution	
Residential Street Address 281 Bittersweet Rd		City Orange			State CT	Zip Code 06477-2001		Pate Received			
Principal Occupation Insurance Agent		Name of Emplo	loyer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu	tions \$25.00	\$25.00	
Last Name Hirschhorn	First Name Ralph			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 0882	on ID#	Amount of Contribution	
Residential Street Address 107 Via Palacio		City Palm Beach	n Gardens		State FL	Zip Code 33418-6212		Pate Received			
Principal Occupation Orthopedic Surgeon		Name of Emplo	loyer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribu	utions 100.00	\$100.00	
Last Name Hirschhorn	First Name Madeleine			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 0892	on ID#	Amount of Contribution	
Residential Street Address 107 Via Palacio		City Palm Beach	n Gardens		State FL	Zip Code 33418-6212		Pate Received 07/01/201			
Principal Occupation attorney		Name of Employ	•			Is this contribution associ fundraising event listed in If yes, list Event #		<sub>112</sub> L	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu	utions 100.00	\$100.00	
Last Name Johnson	First Name Craig			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 0883	on ID#	Amount of Contribution	
Residential Street Address 77 Nod Hill Rd		City Wilton			State CT	Zip Code 06897-1711		ate Received			
Principal Occupation Attorney		Name of Emplo	loyer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	utions 100.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FII	LING DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name Frederick	First Name James		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 0	Contribution ID	# Amount of Contribution		
Residential Street Address 5 Nash Island Rd		City Darien		State CT	Zip Code 06820		Received 01/2010			
Principal Occupation  Real Estate Broker		Name of Employer Cassidy Turley			Is this contribution associate fundraising event listed in State If yes, list Event #		Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$100.0	\$100.00		
Last Name Kamford	First Name Daria		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0	Contribution ID	# Amount of Contribution		
Residential Street Address 90 Christie Hill Rd		City Darien		State CT	Zip Code 06820-3000		Received 01/2010			
Principal Occupation  Real Estate		Name of Employer Halstead Property		•	Is this contribution associal fundraising event listed in S If yes, list Event #		Yes			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$100.0	\$100.00		
Last Name Ferrucci III	First Name Stephen		MI R	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 0	Contribution ID :	# Amount of Contribution		
Residential Street Address 3 Yale Ave		City Middlebury		State CT	Zip Code 06762-2713		Received 01/2010			
Principal Occupation Union Representative		Name of Employer CSEA,SEIU Local 2001			Is this contribution associate fundraising event listed in St. If yes, list Event #		Yes			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggregate	Contributions \$50.0	\$50.00		
Last Name Walton	First Name Vilma		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0	Contribution ID	# Amount of Contribution		
Residential Street Address 70 Hubbard Dr		City Glastonbury		State CT	Zip Code 06033-2948		Received 01/2010			
Principal Occupation retired		Name of Employer retired			Is this contribution associal fundraising event listed in S If yes, list Event #		Yes			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggregate	Contributions \$25.0	\$25.00		

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							1	FILING	DUE DATE		
Jepsen 2010											
		B. Itemized Contribut	ions fron	Individu	ıals		·				
Last Name Guise-Clowes	First Name Diane		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck	Contribution	ID#	Amount of Contribution		
Residential Street Address 373 Saybrook Rd		City Higganum		State CT	Zip Code 06441-4110		te Received /01/2010				
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es X	byist?	Aggrega	ate Contributio	ons 5.00	\$25.00		
Last Name Crean	First Name Gerald		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck	Contribution	ID#	Amount of Contribution		
Residential Street Address 45 Rockwood Dr		City Southington		State CT	Zip Code 06489-4621		te Received /01/2010				
Principal Occupation N/A		Name of Employer N/A		•	Is this contribution associa fundraising event listed in If yes, list Event #		?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio \$50	ons 0.00	\$50.00		
Last Name Hertzberg	First Name Susan		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck	Contribution	ID#	Amount of Contribution		
Residential Street Address 25 Montrose Rd		City Scarsdale		State NY	Zip Code 10583-1129		e Received /01/2010				
Principal Occupation  Exec.		Name of Employer IPSOGEN			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contributio	ons 0.00	\$100.00		
Last Name Shulman	First Name Arthur		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck	Contribution	ID#	Amount of Contribution		
Residential Street Address 26 Crowne Pond Ln		City Wilton		State CT	Zip Code 06897-3029		te Received /01/2010				
Principal Occupation Executive		Name of Employer BKFK			Is this contribution associa fundraising event listed in If yes, list Event #		? <b>x</b> 1	Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributio	ons 0.00	\$10.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemized Co	ontributio	ns from	Individu	ıals				
Last Name Cappiali	First Name Paul			MI	Cash	contribution: Personal C		Contribution 0625	on ID#	Amount of Contribution
Residential Street Address 7 Spezzano Dr		City Riverside			State CT	Zip Code 06878-1320		ate Received 7/01/2010		
Principal Occupation retired		Name of Employer retired				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Cappiali	First Name Olive			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 0626	on ID#	Amount of Contribution
Residential Street Address 7 Spezzano Dr		City Riverside			State CT	Zip Code 06878-1320		ate Received 7/01/2010		
Principal Occupation  Yacht charter broker		Name of Employer Self				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggres	gate Contribu	utions 100.00	\$100.00
Last Name Lanza	First Name J. Paul			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 0868	on ID#	Amount of Contribution
Residential Street Address PO Box 64		City Simsbury			State CT	Zip Code 06070-0064		ate Received		
Principal Occupation Furniture Maker		Name of Employer Self				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	ations \$25.00	\$25.00
Last Name Harp	First Name W. Matt			MI	Cash	contribution: Personal C y Order X Credit/De		Contribution 0848	on ID#	Amount of Contribution
Residential Street Address  10 Faxon Ave Unit 3R		City Quincy			State MA	Zip Code 02169-4682		ate Received 7/01/2010		
Principal Occupation Attorney		Name of Employer Duane Moraiss, LLF	)			Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	gate Contribu	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE FILING												
Jepsen 2010												
		B. Itemized Contribut	ions fron	Individu	ıals							
Last Name Diamond	First Name M. Jerome	e	MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0840	oution ID #	Amount of Contribution				
Residential Street Address 15 E State St		City Montpelier		State VT	Zip Code 05602-3086	Date Recei 07/01/2						
Principal Occupation Attorney		Name of Employer Diamond & Robinson, P.C.			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No					
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00				
Last Name Stephens	First Name Jeffrey		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0785	oution ID#	Amount of Contribution				
Residential Street Address 14 Duncan Dr		City Greenwich		State CT	Zip Code 06831	Date Recei 07/01/2						
Principal Occupation Attorney		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No					
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$50.00	\$50.00				
Last Name Kane	First Name Thomas		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0786	oution ID#	Amount of Contribution				
Residential Street Address  2 Vanrensselaer		City Stamford		State CT	Zip Code 06902	Date Recei 07/01/2						
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No					
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cont	ributions \$100.00	\$100.00				
Last Name Sosnik	First Name Douglas		MI B	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0788	oution ID#	Amount of Contribution				
Residential Street Address 4819 Indian Ln NW		City Washington		State DC	Zip Code 20016-3203	Date Recei 07/01/2						
Principal Occupation  Consultant		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No					
Is contributor a principal of a state contractor or prospective  State contractor?  Is yes, indicate which branch or branches of government the contract is with:  State contract is with:  Yes X No  Is contributor a lobbyist, spouse, or dependent child of a lobbyist?  State contract is with:  Yes X No  Aggregate Contributions  State contract is with:  State contract is with:  Yes X No												

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Jepsen 2010											
		B. Itemized C	ontributio	ons from	Individu	ıals					
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of	
Jorge	Maria				Cash Money	V Order X Personal C		0789		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
4819 Indian Ln NW		Washington			DC	20016-3203	0	7/01/201	0	ļ	
Principal Occupation  Consultant		Name of Employer MFJ International				Is this contribution associ- fundraising event listed in		J1?			
Consultant		THIS International				If yes, list Event #		Lx	No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective		<b>x</b> No	dependent	ator a lobbyis	byist?	Aggre	egate Contribu	utions 100.00	\$100.00	
government the contract is with:		Executive Legisla	ative	<u> </u>	es X			1			
Last Name Fisher	First Name Emily			MI T	Method of Cash	contribution:  X Personal C	Check	Contribution 0790	on ID#	Amount of Contribution	
		,			Money	Order Credit/Del	bit Card	0790			
Residential Street Address 24 Osprey Rd		City Old Lyme			State CT	Zip Code 06371		Date Received			
Principal Occupation		Name of Employer			<u> </u>	Is this contribution associ					
Homemaker		None				fundraising event listed in If yes, list Event #	Section I	J1?	No No		
Is contributor a principal of a state contractor state contractor?	or prospective	Yes	x No	1	utor a lobbyis		Aggre	egate Contribu	utions		
Is yes, indicate which branch or branches of government the contract is with:		Executive Legisla	ative	l	es x	•		\$:	100.00	\$100.00	
Last Name	First Name			MI	Method of	contribution:	<u> </u>	Contributi	on ID#	Amount of	
Dunn	Beverly				Cash Money	/ Order Personal C		0784		Contribution	
Residential Street Address		City			State	Zip Code		ate Received			
48 Jackson Cove Rd		Oxford			СТ	06478		7/01/201	0		
Principal Occupation		Name of Employer CT Citizen Action G	Froun			Is this contribution associ- fundraising event listed in		<sub>J12</sub> _			
Development Director		er dilizen riction e	лоцр			If yes, list Event #		LX	No		
Is contributor a principal of a state contractor state contractor?	or prospective	Yes	x No	1	utor a lobbyis		Aggre	egate Contribu			
Is yes, indicate which branch or branches of government the contract is with:		Executive Legisla	ative	l	es x	-		S	\$25.00	\$25.00	
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of	
Brick	Charlotte				Cash Money	V Order		0791		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
60 Cassandra Blvd Apt 203 , Apt 2	203	West Hartford			СТ	06107-3150	0	7/01/201	0		
Principal Occupation		Name of Employer				Is this contribution associ- fundraising event listed in			Yes		
None		None				If yes, list Event #		x	No		
Is contributor a principal of a state contractor	or prospective	Yes	x No	1	utor a lobbyis		Aggre	egate Contribu	utions	Ì	
Is yes, indicate which branch or branches of		Executive Legisla	ative	l	child of a lob	-		5	\$50.00	\$50.00	

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE FILING												
Jepsen 2010												
		B. Itemized Contribut	ions fron	Individu	ıals							
Last Name Marko	First Name Allen		MI	Cash	contribution:    X   Personal Cl	heck 0793	ition ID#	Amount of Contribution				
Residential Street Address 41 Peppermint Ln		City Bristol		State CT	Zip Code 06010-2275	Date Receive 07/02/20						
Principal Occupation Teacher		Name of Employer Watertown Board of Ed			Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J1?	X Yes No					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contri	butions \$50.00	\$50.00				
Last Name Creed	First Name Nicholas		MI	X Cash	contribution: Personal Cl / Order Credit/Deb	heck 0795	tion ID#	Amount of Contribution				
Residential Street Address 39 Byrnes Ave		City Litchfield		State CT	Zip Code 06579	Date Receive 07/02/20						
Principal Occupation Student		Name of Employer Landmark College			Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J1?	X Yes					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions \$20.00	\$20.00				
Last Name Cremer	First Name Marvin		MI	Cash	contribution:  X Personal Cl  y Order Credit/Deb	heck 0802	tion ID#	Amount of Contribution				
Residential Street Address 59 Clifford Dr		City West Hartford		State CT	Zip Code 06107	Date Receive 07/02/20						
Principal Occupation  None		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$25.00	\$25.00				
Last Name Jordan	First Name Allene		MI M	Cash	contribution: Personal Cl  / Order X Credit/Deb	heck 0858	tion ID#	Amount of Contribution				
Residential Street Address 1521 Applecroft Ln		City Cockeysville		State MD	Zip Code 21030-1601	Date Receive 07/02/20						
Principal Occupation Student		Name of Employer Northeastern University			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No					
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contri	butions \$100.00	\$100.00				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Magliocco	Lisa			С	Cash Money	Personal C  X Credit/Del		0628		Contribution
Residential Street Address		City		-	State	Zip Code	D	ate Received		
16 Winthrop Dr		Riverside			СТ	06878-1912	0	7/02/201	0	
Principal Occupation homemaker		Name of Er Self	nployer			Is this contribution association fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	•	Contributi	on ID #	Amount of
Shea	Jane				Cash Money	Personal C  y Order X Credit/Del		0899		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
133 Mediterranean Ln		Norwich			СТ	06360-1627	0	7/02/201	0	
Principal Occupation School Psychologist		Name of Er Norwich	nployer Public Schools			Is this contribution association fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob 'es	byist?	Aggre	egate Contribu	itions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Veits	William				Cash Money	y Order		0798		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
31 Natalie Ct		Bristol			СТ	06010	0	7/02/201	0	
Principal Occupation  Tax Preparation		Name of Er Self	nployer			Is this contribution association fundraising event listed in If yes, list Event # 070	Section I	<sub>J1?</sub>	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contribu	itions \$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Creed	Evelyn				Cash Money	y Order Personal C		0794		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
39 Byrnes Ave		Litchfield			СТ	06759	0	7/02/201	0	
Principal Occupation None		Name of Er None	nployer			Is this contribution association fundraising event listed in If yes, list Event # 070	Section .	<sub>J1?</sub>	Yes	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No		utor a lobbyis child of a lob	byist?	Aggre	egate Contribu	utions	\$100.00
government the contract is with:	ш	Executive	Legislative	Т ,	cs	INU				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Creed	Meagan				Cash Money	y Order X Personal Credit/De		0796		Contribution
Residential Street Address	-	City			State	Zip Code	D	ate Received		
39 Byrnes Ave		Litchfield			СТ	06759	0	7/02/2010	0	
Principal Occupation		Name of E	mployer			Is this contribution assoc		1^	Yes	
Receptionist		Newmar	Creed & Associates			fundraising event listed in  If yes, list Event # 07	n Section . '012010		No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis		Aggre	gate Contribu	utions	
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	I '-	t child of a lob Yes	*		9	\$10.00	\$10.00
government the contract is with:	<u></u> — <u> </u>	Executive	Legislative	+ -			<u> </u>	1		<u> </u>
Last Name Foster	First Name Eula			MI	Method of Cash	contribution:	Check	Contribution	on ID #	Amount of Contribution
. 6500					_	y Order Credit/De	bit Card	0800		Controlation
Residential Street Address		City			State	Zip Code	D	ate Received		
1389 Stafford Ave Apt 201		Bristol			СТ	06010	0	7/02/2010	0	_
Principal Occupation		Name of E	nployer			Is this contribution assoc		1^	Yes	
Retired		None				fundraising event listed in  If yes, list Event # 07			No	
Is contributor a principal of a state contractor	or prospective		Yes X No		outor a lobbyis		Aggre	gate Contribu	ıtions	ĺ
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	I —	t child of a lob Yes	-		5	\$50.00	\$50.00
government the contract is with:	<u></u> — <u> </u>	Executive	Legislative	+-			<u> </u>	1		<u> </u>
Last Name Holihan	First Name Anne			MI	Method of Cash	contribution:	Check	Contribution	on ID#	Amount of Contribution
						y Order Credit/De	bit Card	0801		Commount
Residential Street Address		City			State	Zip Code	D	ate Received		
57 Circle St		Bristol			СТ	06010	0	7/02/2010	0	_
Principal Occupation		Name of E	nployer			Is this contribution assoc		1^	Yes	
Clerk		Bristol P	robate Court			fundraising event listed in  If yes, list Event # 07			No	
Is contributor a principal of a state contractor	or prospective	<u> </u>	Yes X No	Is contrib	outor a lobbyis	t snouse or	1	t- Ct-il	-4:	t
state contractor?  Is yes, indicate which branch or branches of			i es i i i i i i i i i i i i i i i i i i		t child of a lob	byist?	Aggie	gate Contribu	\$25.00	\$25.00
government the contract is with:	Ш	Executive	Legislative	<i>\</i>	res X	No				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Parker	Terry				Cash Money	y Order Personal Credit/De		0799		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
424 Lake Ave # 6		Bristol			СТ	06010	0	7/02/2010	0	1
Principal Occupation		Name of E				Is this contribution assoc fundraising event listed in		1^	Yes	
File Room Manager		State of	Connecticut			If yes, list Event # 07			No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	outor a lobbyis	it, spouse, or	Acce	gate Contribu	itions	t
state contractor?  Is yes, indicate which branch or branches of			165 - 100	dependent	t child of a lob	bbyist?	Aggre		\$50.00	\$50.00
government the contract is with:		Executive	Legislative	\ \ \ \ \ \ \ \ \	res x	No		'		

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING											
Jepsen 2010											
		B. Itemized Contribu	ıtions fro	m Individ	uals		•				
Last Name Pettit	First Name James		MI A	Cash	contribution: Personal C y Order X Credit/Deb	heck 0884	tion ID#	Amount of Contribution			
Residential Street Address 36 Spencer St		City Winsted		State CT	Zip Code 06098-1116	Date Receive 07/02/20					
Principal Occupation Div Mgr		Name of Employer CT Dept of Motor Vehicles			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative		ributor a lobbyis ent child of a lob Yes	obyist?	Aggregate Contri	butions \$50.00	\$50.00			
Last Name Ragaini	First Name Thomas		MI	Cash	contribution:    X   Personal C y Order   Credit/Deb	heck 0797	tion ID#	Amount of Contribution			
Residential Street Address 39 Upson St		City Bristol		State CT	Zip Code 06010-6261	Date Receive 07/02/20					
Principal Occupation Store Keeper		Name of Employer UCONN Health Center		•	Is this contribution association fundraising event listed in If yes, list Event # 070	Section J1?	X Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative		ributor a lobbyis ent child of a lob Yes	-	Aggregate Contri	butions \$50.00	\$50.00			
Last Name Smith	First Name Earl		MI J	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0615	tion ID#	Amount of Contribution			
Residential Street Address 5 Serenity Ln		City Sandy Hook	-	State CT	Zip Code 06482-1630	Date Receive 07/03/20					
Principal Occupation Retired		Name of Employer None		•	Is this contribution association fundraising event listed in If yes, list Event #	Section J1?	Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative		ributor a lobbyis ent child of a lob Yes		Aggregate Contri	butions \$100.00	\$100.00			
Last Name LoMonte	First Name John		MI	Cash	contribution:    X   Personal C y Order   Credit/Deb	heck 0813	tion ID#	Amount of Contribution			
Residential Street Address 39 W Wynd Ter		City Middletown		State CT	Zip Code 06457	Date Receive					
Principal Occupation  Real Estate Appraiser		Name of Employer Self		•	Is this contribution association fundraising event listed in If yes, list Event #	Section J1?	Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative		ributor a lobbyis ent child of a lob Yes	obyist?	Aggregate Contri	butions \$100.00	\$100.00			

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name Meehan	First Name James			MI F	Cash	contribution:  X Personal C y Order Credit/De		Contribution 0822	ı ID#	Amount of Contribution
Residential Street Address 80 Highridge Rd		City West Sim	nsbury		State CT	Zip Code 06092-2004		Date Received 07/03/2010		
Principal Occupation Attorney	0.15						ated with Section I		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Sherman	First Name Mark			MI	Cash	contribution:  Personal C y Order X Credit/De		Contribution 0913	ı ID#	Amount of Contribution
Residential Street Address 160 Davenport Farm Ln S		City Stamford	I		State CT	Zip Code 06903-5100		Date Received		
Principal Occupation Attorney		Name of Er Self	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Early	First Name James			MI	Cash	contribution:    X   Personal C		Contribution 0826	ı ID#	Amount of Contribution
Residential Street Address 38 Hunting Hill Rd		City Woodbrid	lge		State CT	Zip Code 06525		Date Received 07/03/2010		
Principal Occupation Attorney		Name of Er Early Lu	nployer dwick & Sweeney		•	Is this contribution associ fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name Brady	First Name Francis			MI	Cash	contribution:  X Personal C y Order Credit/De		Contribution 0803	ı ID#	Amount of Contribution
Residential Street Address 14 Thronebrook Rd		City West Gra	inby		State CT	Zip Code 06090-1117		Date Received 07/03/2010		
Principal Occupation Attorney		Name of En	nployer Cullina, LLP			Is this contribution associ fundraising event listed in If yes, list Event #				
Is contributor a principal of a state contractor or prospective								\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemized Co	ntribution	ns from	Individu	ials				
Last Name Maguire	First Name Walter		1	MI	Method of o	contribution:    X   Personal C		Contribution 0815	on ID#	Amount of Contribution
Residential Street Address 160 Uncas Point Rd		City Guilford			State CT	Zip Code 06437		7/03/2010		
Principal Occupation  Exec		Name of Employer Madson Poly Eng				Is this contribution associ fundraising event listed in If yes, list Event # 07		1? <b>-</b>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati			tor a lobbyist child of a lob es	byist?	Aggreg	gate Contribu	itions	\$100.00
Last Name Domonkos	First Name Carmen		1	MI	Method of o	contribution:    X   Personal C		Contribution 0812	on ID#	Amount of Contribution
Residential Street Address 50 Forest St Apt 1622		City Stamford			State CT	Zip Code 06901-1876		nte Received 7/03/2010	0	
Principal Occupation  None		Name of Employer None				Is this contribution associ fundraising event listed in If yes, list Event #		1? <b>_</b>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati	_ ~		ntor a lobbyist child of a lob es	byist?	Aggreg	gate Contribu	itions \$50.00	\$50.00
Last Name Krol	First Name Michael		1	MI	Cash	contribution:    X   Personal C		Contributio	on ID#	Amount of Contribution
Residential Street Address 152 Chestnut Hill Rd		City Stafford Springs			State CT	Zip Code 06076		te Received 7/03/2010		
Principal Occupation First Selectman		Name of Employer Town of Stafford				Is this contribution associ fundraising event listed in If yes, list Event #		1? <b>_</b>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati			ntor a lobbyist child of a lob es	byist?	Aggreg	gate Contribu	utions	\$100.00
Last Name Nesin	First Name Merritt		1	MI	Method of o	contribution:    X   Personal C		Contribution 0828	on ID#	Amount of Contribution
Residential Street Address 118 Gary Rd		City Stamford			State CT	Zip Code 06903		ate Received 7/03/2010		
Principal Occupation Engineer		Name of Employer None				Is this contribution associ fundraising event listed in If yes, list Event #		<sub>1?</sub>	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Executive Legislati	_ ~		ntor a lobbyist child of a lob es	byist?	Aggreg	gate Contribu	tions	\$50.00

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ito	emized Contribut	ions fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
White	Patricia				Cash Money	y Order X Personal C		0824		Contribution
Residential Street Address		City		<u> </u>	State	Zip Code		ate Received		
80 Highridge Rd		West Sim	sbury		СТ	06092	0	7/03/2010	0	
Principal Occupation None		Name of En	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob	byist?	Aggre	gate Contribu	utions	\$100.00
Last Name	First Name			MI	1	contribution:		Contribution	on ID #	
Zullo	Frank				Cash Money	y Order		0618	он нэ #	Amount of Contribution
Residential Street Address		City		1	State	Zip Code	D	ate Received		
24 Sawmill Rd		Norwalk			СТ	06851	0	7/03/2010	0	
Principal Occupation Information Requested		Name of En Informat	nployer ion Requested		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	bbyist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Morgan	Lawrence				Cash Money	y Order X Personal C		0816		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
75 Old Ridgebury Rd		Danbury			СТ	06810	0	7/03/2010	0	
Principal Occupation Fund Administrater		Name of En	nployer IY Welfare Fund			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	itions \$25.00	\$25.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Johnson	Dwight				Cash Money	y Order X Personal C		0804		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
3A Linden Pl		Hartford			СТ	06106	0	7/03/2010	0	
Principal Occupation Attorney		Name of En Murtha C	nployer Cullina LLP			Is this contribution associ fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No		utor a lobbyis child of a lob	bbyist?	Aggre	gate Contribu	utions 100.00	\$100.00
government the contract is with:							1			

		I. MONETA	RY REC	EIPTS	(Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemized Co	ontribution	ns from	Individu	ıals				
Last Name Ritchie Jr	First Name John		]	MI	Cash	contribution: Personal C  Order X Credit/Det		Contribution 0835	on ID#	Amount of Contribution
Residential Street Address 17 Cobble Rd # M-4		City Salisbury			State CT	Zip Code 06068-1501		ate Received		
Principal Occupation Engineer		Name of Employer Retired				Is this contribution association fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	_ '		tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	tions \$25.00	\$25.00
Last Name Bonsal	First Name Stephen		j	MI	Cash	contribution: Personal C  Order X Credit/Del		Contribution 0841	on ID#	Amount of Contribution
Residential Street Address 30 Hendrie Ave		City Riverside			State CT	Zip Code 06878-1831		ate Received		
Principal Occupation Retired		Name of Employer None				Is this contribution association fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	_ '		ttor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	itions \$50.00	\$50.00
Last Name Bonsal	First Name Elizabeth			MI L	Method of o	contribution: Personal C  Order X Credit/Det		Contribution 0850	on ID#	Amount of Contribution
Residential Street Address 30 Hendrie Ave		City Riverside			State CT	Zip Code 06878-1831		ate Received	0	
Principal Occupation Homemaker		Name of Employer None				Is this contribution association fundraising event listed in If yes, list Event #		<sub>112</sub> L	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla	_ '		tor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	itions \$50.00	\$50.00
Last Name David	First Name Platt		Ī	MI	Cash	contribution: Personal C  Order X Credit/Del		Contribution 0854	on ID#	Amount of Contribution
Residential Street Address 19 High St		City Higganum			State CT	Zip Code 06441-4227		ate Received		
Principal Occupation Attorney		Name of Employer Murtha Cullina, LLP				Is this contribution association fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legisla			tor a lobbyist	byist?	Aggre	gate Contribu	itions	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	tions fron	ı Individu	ıals					
Last Name Sussman	First Name Mark		MI	Cash	contribution:    X   Personal Cl	heck 080	ribution ID#	Amount of Contribution		
Residential Street Address 62 Timothy Ln		City Windsor		State CT	Zip Code 06095	Date Rec				
Principal Occupation Attorney		Name of Employer Murtha Cullina LLP			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	\$100.00	\$100.00		
Last Name Pinney	First Name Willard		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 080	ribution ID #	Amount of Contribution		
Residential Street Address 128 Belltown Rd		City South Glastonbury		State CT	Zip Code 06073	Date Rec. 07/03/				
Principal Occupation  Lawyer		Name of Employer Murtha, Cullina, LLP		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	stributions \$100.00	\$100.00		
Last Name Dagon	First Name George		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 080	ribution ID #	Amount of Contribution		
Residential Street Address 105 Tamarac Dr		City Glastonbury		State CT	Zip Code 06033	Date Rec 07/03/				
Principal Occupation Attorney		Name of Employer Murtha, Cullina, LLP			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Co	stributions \$100.00	\$100.00		
Last Name Donnelly	First Name Michael		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 080	ribution ID #	Amount of Contribution		
Residential Street Address 505 Mountain Rd		City West Hartford		State CT	Zip Code 06117	Date Rec. 07/03/				
Principal Occupation Attorney		Name of Employer Murtha, Cullina, LLP		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Co	stributions \$100.00	\$100.00		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							]	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name McCary	First Name Paul		MI	Cash	contribution:    X   Personal Cl	neck	Contribution 0809	ID#	Amount of Contribution
Residential Street Address 221 Trumbull St # 1004		City Hartford		State CT	Zip Code 06103		e Received /03/2010		
Principal Occupation Attorney		Name of Employer Murtha Culllina			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ste Contribution \$10	ons 0.00	\$100.00
Last Name Hudner	First Name Kennedy		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi	neck	Contribution 0810	ID#	Amount of Contribution
Residential Street Address 105 Coach Rd		City Glastonbury		State CT	Zip Code 06033		e Received /03/2010		
Principal Occupation Attorney		Name of Employer Murtha, Cullina, LLP		•	Is this contribution associa fundraising event listed in If yes, list Event #		?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ste Contribution	ons 0.00	\$100.00
Last Name White	First Name Robert		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck	Contribution 0811	ID#	Amount of Contribution
Residential Street Address 20 Linwood Dr		City West Hartford		State CT	Zip Code 06107		e Received /03/2010		
Principal Occupation Attorney		Name of Employer Murtha, Cullina, LLP			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ste Contribution \$10	ons 0.00	\$100.00
Last Name Glantz	First Name Paul		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi	neck	Contribution 0814	ID#	Amount of Contribution
Residential Street Address 150 E 69th St # 14H		City New York		State NY	Zip Code 10021		e Received /03/2010		
Principal Occupation  Real Estate		Name of Employer Windsor Properties		•	Is this contribution associa fundraising event listed in If yes, list Event #		? 🔭 🗓	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributio	ons 0.00	\$100.00

		I. MONETARY RE	ECEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Schelfhaudt	First Name Peter		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb		Contribution 0817	ı ID#	Amount of Contribution
Residential Street Address PO Box 171		City Greens Farms		State CT	Zip Code 06838		te Received 7/03/2010		
Principal Occupation  Advertising		Name of Employer Creative Partners			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	ate Contribution	ions 00.00	\$100.00
Last Name Mercaldo	First Name Anthony		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb		Contribution 0818	ı ID#	Amount of Contribution
Residential Street Address 10 Whispering Way		City Brookfield		State CT	Zip Code 06804		te Received 7/03/2010		
Principal Occupation CPA		Name of Employer Mittler, Mercaldo & Braun			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggreg	ate Contribution	ions 00.00	\$100.00
Last Name Riefberg	First Name Lawrence	ı	MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0819	ı ID#	Amount of Contribution
Residential Street Address 6 Ervie Dr		City Danbury		State CT	Zip Code 06811-3291		te Received 7/03/2010		
Principal Occupation Attorney		Name of Employer Riefberg, Smart, Donohue 8	. Nejame	•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggreg	ate Contribution	ions 00.00	\$100.00
Last Name Ewing	First Name Judith		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb		Contribution 0820	ı ID#	Amount of Contribution
Residential Street Address 98 Sasco Hill Ter		City Fairfield		State CT	Zip Code 06824-5651		te Received 7/03/2010		
Principal Occupation  Consultant		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggreg	ate Contributi	ions 35.00	\$35.00

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Ito	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Dumas	Gail				Cash	X Personal C		0821		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
31 Crown Ln		Greenwic	h		CT	06831		7/03/2010		
Principal Occupation		Name of En	nployer		-	Is this contribution associa	ated with	а Г	Yes	İ
Housewife			Greenwich Library			fundraising event listed in If yes, list Event #	Section J	11? <b>x</b>	No	
Is contributor a principal of a state contractor or	r prospective	•	Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	ĺ
state contractor? Is yes, indicate which branch or branches of	П	Executive	Lagislativa		child of a lob	*		\$	\$25.00	\$25.00
government the contract is with:	First Name	Executive	Legislative	<del>                                     </del>	I			1		
	James			MI A	Cash	contribution:  X Personal C	heck	Contribution 0823	on ID #	Amount of Contribution
					Money	y Order Credit/Deb	it Card	0023		
Residential Street Address		City			State	Zip Code		ate Received		
80 Highridge Rd		West Sim	sbury		СТ	06070		7/03/2010		
Principal Occupation		Name of En	nployer			Is this contribution associa fundraising event listed in		<sub>11?</sub>	Yes	
None		None				If yes, list Event #		<u>  x</u>	No	
Is contributor a principal of a state contractor or	r prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	İ
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$1	100.00	\$100.00
government the contract is with:  Last Name	First Name	Executive	Legislative	Тмі	1	contribution:	<u> </u>		TD //	<u> </u>
	Eleanor			IVII	Cash	Personal C	heck	Contribution 0825	on ID #	Amount of Contribution
					Money	y Order Credit/Deb	oit Card	0023		
Residential Street Address		City			State	Zip Code		ate Received	_	
28 Narrow Rocks Rd		Westport			<del>CT</del>	06880	L	<del>7/03/201(</del>	<del>)</del> 	
Principal Occupation		Name of En	nployer			Is this contribution associa fundraising event listed in		I1?	Yes	
None		None				If yes, list Event #		<u>×</u>	No	
Is contributor a principal of a state contractor or	r prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	ĺ
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		<del>\$2</del>	200.00	<del>\$100.00</del>
government the contract is with:  Last Name	First Name	Executive	Legislative	I MI	I	contribution:	<u> </u>		"	<u>                                     </u>
	Eleanor			MI	Cash	X Personal C	heck	Contributio	on ID #	Amount of Contribution
					Money	y Order Credit/Deb	it Card	1041		
Residential Street Address		City	_		State	Zip Code		ate Received		
28 Narrow Rocks Rd		Westpor	t		СТ	06880		7/03/20		
Principal Occupation		Name of En	nployer			Is this contribution association fundraising event listed in		1^	Yes	
None		1.10116				If yes, list Event # 06	27201	<u>0c</u> L	No	
Is contributor a principal of a state contractor or	r prospective		Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	ĺ
state contractor? Is yes, indicate which branch or branches of		Executive	Legislative	dependent	child of a lob	-		\$1	00.00	\$100.00
government the contract is with:		LACCULIVE	Legislative			110	<u> </u>			<u> </u>

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemized	Contributio	ons from	Individu	ıals				
Last Name Stern	First Name Louise			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution 0613	on ID#	Amount of Contribution
Residential Street Address  1 Strawberry Hill Ave # 16-B		City Stamford			State CT	Zip Code 06902		ate Received 7/03/2010		
Principal Occupation Retired		Name of Employer Retired				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legi	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggreg	gate Contribu \$1	utions	\$100.00
Last Name Gross	First Name Abby			MI	Cash	contribution:  X Personal ( y Order		Contribution	on ID#	Amount of Contribution
Residential Street Address 20 Hill Rd		City Greenwich			State CT	Zip Code 06830		ate Received 7/03/2010	0	
Principal Occupation None		Name of Employer None				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes  Executive Legi	X No	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribu \$1	utions	\$100.00
Last Name newman	First Name Julius			MI	Cash	contribution:    X   Personal 0		Contribution	on ID#	Amount of Contribution
Residential Street Address 104 Hilldale Rd		City West Hartford			State CT	Zip Code 06117-1413		ate Received 7/03/2010		
Principal Occupation Retired		Name of Employer Retired				Is this contribution assoc fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		X No	dependent	utor a lobbyis child of a lob	byist?	Aggres	gate Contribu	itions \$25.00	\$25.00
Last Name Van Middlesworth	First Name Rex			MI D	Cash	contribution:  X Personal 0  y Order Credit/De		Contribution 0617	on ID#	Amount of Contribution
Residential Street Address 1201 Claire Ave		City Austin			State TX	Zip Code 78703		ate Received 7/03/2010		
Principal Occupation Attorney		Name of Employer Andrews Kurth				Is this contribution associ fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective		X No	dependent	utor a lobbyis child of a lob res	byist?	Aggreg	gate Contribu \$1	utions	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Jepsen 2010										
		B. Itemized Contr	ributions fr	om Individu	ıals					
Last Name Bello	First Name George		MI	Cash	contribution:  X Personal C y Order Credit/Deb	0619	tion ID#	Amount of Contribution		
Residential Street Address 164 Mountainwood Rd		City Stamford		State CT	Zip Code 06903	Date Receive 07/03/20				
Principal Occupation Private Investor		Name of Employer Self			Is this contribution association fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative		ntributor a lobbyis ident child of a lob Yes	byist?	Aggregate Contri	outions \$100.00	\$100.00		
Last Name Becker	First Name Margaret		MI	Cash	contribution:  X Personal C y Order Credit/Deb	0620	tion ID#	Amount of Contribution		
Residential Street Address Falcon Farm, 242 Scotland Rd		City Baltic		State CT	Zip Code 06330	Date Receive 07/03/20:				
Principal Occupation  Information Requested		Name of Employer Information Requested		·	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative		ntributor a lobbyis ident child of a lob Yes	byist?	Aggregate Contri	sutions \$50.00	\$50.00		
Last Name Spencer-Molloy	First Name Katherine	,	MI	Cash	contribution:  Personal C y Order X Credit/Deb	0630	tion ID#	Amount of Contribution		
Residential Street Address 57 Winthrop St		City Tariffville		State CT	Zip Code 06081-9644	Date Receive 07/04/20:				
Principal Occupation Teacher		Name of Employer East Granby Board of E	d	•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative	No Is cor	ntributor a lobbyis ident child of a lob Yes	byist?	Aggregate Contril	\$50.00	\$50.00		
Last Name Amdur	First Name Sheila		MI B	Cash	contribution:  Personal C y Order X Credit/Deb	0875	tion ID#	Amount of Contribution		
Residential Street Address 132 Lawler Rd		City West Hartford		State CT	Zip Code 06117-2621	Date Receive 07/04/203				
Principal Occupation heatIh care consultant		Name of Employer self employed			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X  Executive Legislative		ntributor a lobbyis ident child of a lob Yes	byist?	Aggregate Contril	outions \$100.00	\$100.00		

		I. MONETARY RI	ECEIPT	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribu	tions fron	ı Individu	ıals				
Last Name Jepsen	First Name Charles		MI T	Cash	contribution: Personal Cl y Order X Credit/Deb	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 252 Ocean Dr E		City Stamford		State CT	Zip Code 06902-8238		Received 04/2010		
Principal Occupation Producer		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #		X N	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate	te Contribution \$100	1	\$100.00
Last Name Jepsen	First Name Claudia		MI L	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 252 Ocean Dr E		City Stamford		State CT	Zip Code 06902-8238		Received 04/2010		
Principal Occupation  Marketing Director		Name of Employer TimeWarner		•	Is this contribution associa fundraising event listed in If yes, list Event #		X N	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate	te Contribution \$100	1	\$100.00
Last Name Currey	First Name Melody		MI A	Cash	contribution: Personal Cl y Order X Credit/Deb	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address  14 Martin Cir		City East Hartford		State CT	Zip Code 06118-1119		Received 05/2010		
Principal Occupation  Mayor		Name of Employer Town of East Hartford			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggregate	te Contribution \$100	1	\$100.00
Last Name reynolds	First Name barbara		MI a	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 20 Cannondale Rd		City Weston		State CT	Zip Code 06883-1215		Received 05/2010		
Principal Occupation homemaker		Name of Employer unemployed		•	Is this contribution associa fundraising event listed in If yes, list Event #		<b>X</b> N	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate	te Contribution \$25	ns 5.00	\$25.00

		I. MONETARY RI	ECEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							1	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribut	tions fron	ı Individu	ıals				
Last Name Goode	First Name Burwell		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	ı	Contribution 0629	ID#	Amount of Contribution
Residential Street Address 32 Old Orchard Dr		City Weston		State CT	Zip Code 06883-1309	1	te Received /05/2010		
Principal Occupation retired		Name of Employer N/A			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 60.00	\$25.00
Last Name Hypolite	First Name Wayne		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb	ı	Contribution 0918	ID#	Amount of Contribution
Residential Street Address 55 Prospect St		City Bloomfield		State CT	Zip Code 06002-3038		te Received /07/2010		
Principal Occupation  Executive Assistant		Name of Employer State of CT			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	L
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 10.00	\$50.00
Last Name Bubel	First Name Henry		MI	Cash	contribution:    X   Personal Cl	ı	Contribution 0950	ID#	Amount of Contribution
Residential Street Address 101 Wild Duck Rd		City Stamford		State CT	Zip Code 06903		te Received /07/2010		
Principal Occupation Attorney		Name of Employer Patterson Belknap			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggrega	ate Contributio	ons 0.00	\$100.00
Last Name Lent	First Name Brenna		MI S	Cash	contribution:  Personal Cl y Order X Credit/Deb	ı	Contribution 0919	ID#	Amount of Contribution
Residential Street Address 60 E Wharf Rd		City Madison		State CT	Zip Code 06443-3116	1	te Received /07/2010		
Principal Occupation  Analyst		Name of Employer Dowling & Partners		•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 10.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							I	FILING	DUE DATE
Jepsen 2010									
		B. Itemized Contribut	ions fron	Individu	ıals				
Last Name Sousa	First Name Diana		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 31 Barnum Pl		City Ridgefield		State CT	Zip Code 06877-1050		e Received /07/2010		
Principal Occupation  Corporate Communications		Name of Employer Covidien			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregat	ste Contributio	ons 0.00	\$100.00
Last Name Norton	First Name William		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 56 Edwards Rd		City Avon		State CT	Zip Code 06001-3102		e Received /07/2010		
Principal Occupation Professor		Name of Employer University of New Haven		•	Is this contribution associa fundraising event listed in If yes, list Event #		· X	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	ite Contributio \$100	ons 0.00	\$50.00
Last Name O'Brien	First Name Leslie		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 125 Summit St		City Willimantic		State CT	Zip Code 06226-2738		e Received /07/2010		
Principal Occupation Director of Constituent Services		Name of Employer State of Connecticut			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregat	ste Contributio	ons 0.00	\$100.00
Last Name Schaeffer	First Name Denise		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck	Contribution 1	ID#	Amount of Contribution
Residential Street Address 57 Campfield Rd		City Manchester		State CT	Zip Code 06040-5714		e Received /07/2010		
Principal Occupation Office Manager		Name of Employer Dowling & Partners			Is this contribution associa fundraising event listed in If yes, list Event #		· X	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregat	te Contributio \$2!	ons 5.00	\$25.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Koupal	First Name Ryan		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0927	oution ID #	Amount of Contribution		
Residential Street Address 78 Lovely St		City Canton		State CT	Zip Code 06019-2630	Date Recei				
Principal Occupation  Network Admin		Name of Employer  Dowling & Partners			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Con	tributions \$30.00	\$30.00		
Last Name Sweeney	First Name William		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0928	oution ID #	Amount of Contribution		
Residential Street Address 9 Cobbs Rd		City West Hartford		State CT	Zip Code 06107-1402	Date Recei				
Principal Occupation Finance		Name of Employer Dowling & Partners		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$50.00	\$50.00		
Last Name Dowling	First Name Vincent		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0929	oution ID #	Amount of Contribution		
Residential Street Address 54 Ledyard Rd		City West Hartford		State CT	Zip Code 06117-1708	Date Recei				
Principal Occupation  Managing Director		Name of Employer Dowling & Partners			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Con	tributions \$100.00	\$100.00		
Last Name Brof	First Name Erin		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0930	oution ID#	Amount of Contribution		
Residential Street Address 209 Clinton Ave Apt 14		City Brooklyn		State NY	Zip Code 11205-3573	Date Recei				
Principal Occupation Research Associate		Name of Employer Dowling & Partners			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Con	tributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE								FILING	DUE DATE	
Jepsen 2010										
		B. Itemized Contributi	ions from	ı Individu	ıals		•			
Last Name Christiana	First Name Joe		MI	Cash	contribution: Personal Cl y Order X Credit/Deb		Contribution 0931	ID#	Amount of Contribution	
Residential Street Address 10 April Way		City Bloomfield		State CT	Zip Code 06002-2805		te Received /07/2010			
Principal Occupation Equity Analyst		Name of Employer Dowling & Partners			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00	
Last Name O'Shea	First Name Kevin		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb		Contribution 0932	ID#	Amount of Contribution	
Residential Street Address 5 Sawyer Ct		City Allendale		State NJ	Zip Code 07401-1340		e Received /07/2010			
Principal Occupation  Stock Trader		Name of Employer Dowling & Partners			Is this contribution associa fundraising event listed in If yes, list Event #		?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contribution	ons 00.00	\$100.00	
Last Name Powell	First Name Joshua		MI	Cash	contribution: Personal Cl y Order X Credit/Deb		Contribution 0933	ID#	Amount of Contribution	
Residential Street Address 191 Elizabeth St		City Hartford		State CT	Zip Code 06105-2220		te Received /07/2010			
Principal Occupation  Analyst		Name of Employer Dowling & Partners			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00	
Last Name Putetti	First Name Kevin		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb		Contribution 0934	ID#	Amount of Contribution	
Residential Street Address 10 Island Dr		City Norwalk		State CT	Zip Code 06855-2703		te Received /07/2010			
Principal Occupation Equity Trader		Name of Employer Dowling & Partners		•	Is this contribution associa fundraising event listed in If yes, list Event #		?	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE								FILING	DUE DATE	
Jepsen 2010										
		B. Itemized Contributi	ons fron	ı Individu	ıals					
Last Name Levitt	First Name Sam		MI	Cash	contribution: Personal Ch y Order X Credit/Debi		Contribution	n ID#	Amount of Contribution	
Residential Street Address 69 Lyman Rd		City Northampton		State MA	Zip Code 01060-4227		te Received 7/07/2010			
Principal Occupation  Analyst		Name of Employer Dowling & Partners			Is this contribution associate fundraising event listed in If yes, list Event #		ı? <u>''</u>	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	gate Contribut \$1	ions 00.00	\$100.00	
Last Name Klotz	First Name Caroline		MI	Cash	contribution: Personal Cl y Order X Credit/Debi		Contribution	n ID#	Amount of Contribution	
Residential Street Address 98 Winesap Rd		City Kensington		State CT	Zip Code 06037-2900	1	te Received 7/07/2010			
Principal Occupation Accountant		Name of Employer Dowling & Partners			Is this contribution associate fundraising event listed in St. If yes, list Event #		ı? <u></u>	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	gate Contribut	ions 00.00	\$100.00	
Last Name King	First Name Maureen		MI	Cash	contribution:  Personal Ch y Order X Credit/Debi		Contribution	n ID#	Amount of Contribution	
Residential Street Address 23 Lark Spur Dr		City Burlington		State CT	Zip Code 06013-2232		ite Received 7/07/2010			
Principal Occupation Accounting Assistant		Name of Employer Dowling & Partners			Is this contribution associate fundraising event listed in If yes, list Event #		<sub>1?</sub>	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	gate Contribut	ions 00.00	\$100.00	
Last Name Deyette	First Name Stephen		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi		Contribution	n ID#	Amount of Contribution	
Residential Street Address 84 Northington Dr		City Avon		State CT	Zip Code 06001-2357		te Received 7/07/2010			
Principal Occupation Sales		Name of Employer  Dowling & Partners		•	Is this contribution associal fundraising event listed in S If yes, list Event #		ı? <u>''</u>	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribut	ions 00.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE								FILING	DUE DATE	
Jepsen 2010										
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name Goulekas	First Name Paul		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck	Contribution 0939	ID#	Amount of Contribution	
Residential Street Address 40 Attawan Rd		City Niantic		State CT	Zip Code 06357-3509		e Received /07/2010			
Principal Occupation Equity Analyst		Name of Employer Dowling & Partners			Is this contribution associate fundraising event listed in State If yes, list Event #			Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	nte Contributio \$10	ons 00.00	\$100.00	
Last Name Gagnon	First Name Gary		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck	Contribution 0940	ID#	Amount of Contribution	
Residential Street Address 236 Wood Pond Rd		City Glastonbury		State CT	Zip Code 06033-3704		e Received /07/2010			
Principal Occupation Administrator		Name of Employer Dowling & Partners		•	Is this contribution associate fundraising event listed in State of the If yes, list Event #		?	Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution	ons 00.00	\$100.00	
Last Name Hanley	First Name Joseph		MI	Cash	contribution:  Personal Ch y Order X Credit/Debi	neck	Contribution 0941	ID#	Amount of Contribution	
Residential Street Address 32 Wakeman Rd		City Darien		State CT	Zip Code 06820-3628		e Received /07/2010			
Principal Occupation Equity Trader		Name of Employer Dowling & Partners			Is this contribution associate fundraising event listed in If yes, list Event #			Yes No		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	nte Contribution \$10	ons 00.00	\$100.00	
Last Name Wetchler	First Name Frank		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck	Contribution 0942	ID#	Amount of Contribution	
Residential Street Address 3360 Seawane Dr		City Merrick		State NY	Zip Code 11566-5542		e Received /07/2010			
Principal Occupation Sales		Name of Employer Dowling & Partners		•	Is this contribution associal fundraising event listed in S If yes, list Event #		?	Yes No		
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Jepsen 2010										
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name Gohsler	First Name John		MI	Cash	contribution:    X   Personal Cl	heck 0943	bution ID#	Amount of Contribution		
Residential Street Address 9 Brookfield Rd		City West Hartford		State CT	Zip Code 06107	Date Recei				
Principal Occupation Industry Analyst		Name of Employer  Dowling & Partners			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$100.00	\$100.00		
Last Name Hilbie	First Name Krista		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0944	bution ID#	Amount of Contribution		
Residential Street Address 42 Spicewood Ln		City Berlin		State CT	Zip Code 06037	Date Recei				
Principal Occupation  Compliance Officer		Name of Employer Dowling & Partners			Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions \$100.00	\$100.00		
Last Name Howard	First Name Barbara		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0945	bution ID #	Amount of Contribution		
Residential Street Address 88 S Hill Dr		City South Glastonbury		State CT	Zip Code 06073	Date Recei				
Principal Occupation Equity Trader		Name of Employer Dowling & Partners			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Con	tributions \$100.00	\$100.00		
Last Name Sousa	First Name Yolanda		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0947	bution ID#	Amount of Contribution		
Residential Street Address 58 Clifford Dr		City West Hartford		State CT	Zip Code 06107	Date Recei				
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. Itemiz	zed Contributio	ons from	Individu	ıals				
Last Name Lathrop	First Name Benjamin			MI	Cash	contribution:    X   Personal C		Contribution	on ID#	Amount of Contribution
Residential Street Address 116 Mowry Ave		City Norwich			State CT	Zip Code 06360-3344		ate Received		
Principal Occupation  Gen. Mgr.		Name of Employe Shipman's Fi			-	Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Olsen	First Name John			MI	Cash	contribution:  X Personal C  y Order Credit/De		Contribution 0953	on ID#	Amount of Contribution
Residential Street Address 101 Pratt Rd		City Clinton			State CT	Zip Code 06413-2624		ate Received		
Principal Occupation  Labor Rep.		Name of Employe	er			Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions \$50.00	\$50.00
Last Name Thompson	First Name Arthur			MI	Cash	contribution:  X Personal C y Order Credit/De		Contribution 0957	on ID#	Amount of Contribution
Residential Street Address 136 Book Hill Rd		City Deep River			State CT	Zip Code 06417-2101		ate Received		
Principal Occupation Retired		Name of Employe	er			Is this contribution associ fundraising event listed in If yes, list Event #		112	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	child of a lob	byist?	Aggre	gate Contribu	stions \$50.00	\$50.00
Last Name Brown	First Name Marilyn			MI	Cash	contribution:  X Personal C  y Order Credit/De		Contribution 0958	on ID#	Amount of Contribution
Residential Street Address 43 Harbor Dr # 200		City Stamford			State CT	Zip Code 06902		ate Received		
Principal Occupation Retired		Name of Employe	er			Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING D											
Jepsen 2010											
B. Itemized Contributions from Individuals											
Last Name Donnelly	First Name Derek		MI	Cash	contribution:    X   Personal Cl	heck 0959	bution ID #	Amount of Contribution			
Residential Street Address 465 Buckland Hills Dr # 21123		City Manchester		State CT	Zip Code 06042	Date Recei					
Principal Occupation Attorney		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Con	tributions \$50.00	\$50.00			
Last Name Kennedy	First Name Daniel		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	heck 0960	bution ID#	Amount of Contribution			
Residential Street Address 221 Trumbull St # 1604		City Hartford		State CT	Zip Code 06103	Date Recei					
Principal Occupation Attorney		Name of Employer Heneghan, Kennedy & Doyle	!	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes  X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$50.00	\$50.00			
Last Name Roldan	First Name Kelvin		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi	heck 0961	bution ID #	Amount of Contribution			
Residential Street Address 1580 Broad St Apt C4		City Hartford		State CT	Zip Code 06106-3152	Date Recei					
Principal Occupation State Rep.		Name of Employer State of Connecticut			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Con	tributions \$50.00	\$50.00			
Last Name Galbraith	First Name Marie		MI W	Cash	contribution:    X   Personal Cl	heck 0949	bution ID#	Amount of Contribution			
Residential Street Address 290 Walnut Hill Rd		City Thomaston		State CT	Zip Code 06787	Date Recei					
Principal Occupation  Museum Director		Name of Employer Mattatuck Museum			Is this contribution associa fundraising event listed in If yes, list Event #		Yes No				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Con	tributions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Jepsen 2010											
		B. It	emized Contributi	ions from	Individu	ıals					
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of	
Guthrie	Robert				Cash Money	y Order X Personal C		0955		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
123 Sedgwick Rd		West Har	tford		СТ	06107	0	7/07/2010	)		
Principal Occupation  Landscaping		Name of Er Self	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No		
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu \$1	itions	\$100.00	
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of	
Olsen	Janeen				Cash Money	y Order X Personal C		0954		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
101 Pratt Rd		Clinton			СТ	06413	0	7/07/2010	0		
Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes		
Labor Rep.		CT AFL-0	CIO	-		fundraising event listed in If yes, list Event #	n Section J	x	No		
Is contributor a principal of a state contractor of state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	tions \$50.00	\$50.00	
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of	
Rhine	Rachael				Cash Money	y Order X Personal C		0946		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
21 Pond Rd		Wilton			СТ	06897	0	7/07/2010	0		
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes		
Stock Trader		Dowling	& Partners			If yes, list Event #		х	No		
Is contributor a principal of a state contractor of	or prospective	·	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	ıtions		
state contractor? Is yes, indicate which branch or branches of				1 —	child of a lob	-		-	100.00	\$100.00	
government the contract is with:		Executive	Legislative	'	r <sub>es</sub> x	No	<u> </u>	1			
Last Name	First Name			MI		contribution:	"heck	Contribution	on ID #	Amount of	
Kelly	Kathleen				Cash Money	y Order Credit/De		0951		Contribution	
Residential Street Address		City			State	Zip Code		ate Received			
19 Country Ridge Rd		Danbury			СТ	06811		7/07/2010	) 		
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in		1^	Yes		
Retired		None				If yes, list Event # 06			No		
Is contributor a principal of a state contractor of state contractor?	or prospective		Yes X No		utor a lobbyis	-	Aggre	gate Contribu		<b>*</b> 25.00	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No			\$25.00	\$25.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Dillon	John				Cash Money	X Personal C		0956		Contribution
Residential Street Address	l	City			State	Zip Code		ate Received		
124 Whipporwill Ln		Torringto	n		CT	06790		7/07/2010		
Principal Occupation		Name of Er	mployer		<u> </u>	Is this contribution associa	ated with	а Г	Yes	İ
Non-Profit Exec		None				fundraising event listed in If yes, list Event #	Section .	<sub>J1?</sub>	No	
				1				_		<u> </u>
Is contributor a principal of a state contractor state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob		Aggre	egate Contribu		+75.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y 🔲	res X	No		5	\$75.00	\$75.00
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Stillman	Andrea				Cash	Personal C  V Order  X Credit/Del		0921		Contribution
Residential Street Address	l	City			State	Zip Code		ate Received		
5 Coolidge Ct		Waterfore	d		CT	06385-3309		7/07/2010		
Principal Occupation		Name of Er	mployer		Į	Is this contribution associa	ated with	а Г	Yes	†
state senator		state of	ct.			fundraising event listed in If yes, list Event #	Section .	J1? ==	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis		Ι.	. 6 . 1		†
state contractor?  Is yes, indicate which branch or branches of			i es i No		child of a lob	byist?	Aggie	egate Contribu \$1	100.00	\$100.00
government the contract is with:		Executive	Legislative	L 1	es X	No				
Last Name	First Name			MI		contribution:	31 1	Contribution	on ID#	Amount of
Woolley	David				Cash Money	y Order		0948		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
9 Bellaire Rd		Old Lyme	2		СТ	06371-2502	0	7/07/2010	0	_
Principal Occupation		Name of Er	mployer			Is this contribution association fundraising event listed in			Yes	
Retired		None				If yes, list Event #	dection :	x	No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	utions	İ
state contractor? Is yes, indicate which branch or branches of			_	1 —	child of a lob	-		-	100.00	\$100.00
government the contract is with:		Executive	Legislative	L \	res X	No		1		
Last Name Satti	First Name William			MI L	Method of Cash	contribution:	`heck	Contribution	on ID#	Amount of Contribution
Satti	william			_		y Order X Credit/Del		0920		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
162 Gardner Ave		New Lond	don		СТ	06320-3054	0	7/07/2010	0	]
Principal Occupation		Name of Er				Is this contribution association fundraising event listed in			Yes	
director		mashant	cucket pequots			If yes, list Event #	. Jeeuun .	x	No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	egate Contribu	utions	†
state contractor? Is yes, indicate which branch or branches of			_	dependent	child of a lob	byist?		-	\$50.00	\$50.00
government the contract is with:	Ш	Executive	Legislative	Y	es x	No				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Jepsen 2010										
		B. Itemized Contributi	ons fron	Individu	ıals					
Last Name Rutgers	First Name Alma		MI	Cash	contribution: Personal Che y Order X Credit/Debit	eck 0924	bution ID #	Amount of Contribution		
Residential Street Address 12 Wildwood Dr		City Greenwich		State CT	Zip Code 06830-6728	Date Rece				
Principal Occupation writer		Name of Employer self		•	Is this contribution associate fundraising event listed in So If yes, list Event #		Yes X No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	obyist?	Aggregate Cor	tributions \$100.00	\$100.00		
Last Name Harp	First Name Reynaud		MI	Cash	contribution:  X Personal Che y Order Credit/Debit	eck 096!	bution ID#	Amount of Contribution		
Residential Street Address 26 Lynwood Pl Apt 3		City New Haven		State CT	Zip Code 06511	Date Rece 07/08/2				
Principal Occupation  Information Requested		Name of Employer Self		•	Is this contribution associate fundraising event listed in So If yes, list Event # 0703	ection J1?	X Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	obyist?	Aggregate Cor	stributions \$100.00	\$100.00		
Last Name Harp	First Name Djana		MI	Cash	contribution:  X Personal Che y Order Credit/Debit	ock 0966	bution ID #	Amount of Contribution		
Residential Street Address 26 Lynwood PI Apt 3		City New Haven		State CT	Zip Code 06511	Date Rece 07/08/2				
Principal Occupation  Medical Doctor		Name of Employer MSM			Is this contribution associate fundraising event listed in So If yes, list Event # 0703	ection J1?	X Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Cor	tributions \$100.00	\$100.00		
Last Name Harp	First Name Wendell		MI	Cash	contribution:  X Personal Che y Order Credit/Debit	ock 0963	bution ID#	Amount of Contribution		
Residential Street Address 170 Conrad Dr		City New Haven		State CT	Zip Code 06511	Date Rece 07/08/2				
Principal Occupation Architect		Name of Employer Architects Environ. Collab.			Is this contribution associate fundraising event listed in So If yes, list Event # 0703	ection J1?	X Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:		Yes X No  Executive Legislative		utor a lobbyis child of a lob	byist?	Aggregate Cor	tributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING DO											
Jepsen 2010											
		B. Itemized Contribut	ions fron	Individu	ıals						
Last Name Segaloff	First Name James		MI	Cash	contribution:    X   Personal Cl	heck 0972	ution ID#	Amount of Contribution			
Residential Street Address 200 Fountain St Apt 712		City New Haven		State CT	Zip Code 06515	Date Receiv 07/08/20					
Principal Occupation Attorney		Name of Employer Susman Duffy & Segaloff			Is this contribution associa fundraising event listed in If yes, list Event # 070		X Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	sibutions \$100.00	\$100.00			
Last Name Susman	First Name Michael		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 0974	ution ID#	Amount of Contribution			
Residential Street Address 2116 Chapel St		City New Haven		State CT	Zip Code 06515	Date Receiv 07/08/20					
Principal Occupation Attorney		Name of Employer Susman Duffy & Segaloff		•	Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J1?	X Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00			
Last Name Perito	First Name James		MI	Cash	contribution:  X Personal Cl  y Order Credit/Deb	heck 0968	ution ID#	Amount of Contribution			
Residential Street Address 55 Averill Pl		City Branford		State CT	Zip Code 06405	Date Receiv 07/08/20					
Principal Occupation Attorney		Name of Employer Susman Duffy & Segaloff			Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J1?	X Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contr	\$25.00	\$25.00			
Last Name Pawelkiewicz	First Name Walter		MI	Cash	contribution:    X   Personal Cl	heck 0981	ution ID#	Amount of Contribution			
Residential Street Address 74 Oakwood Dr		City Windham		State CT	Zip Code 06280	Date Receiv 07/08/20					
Principal Occupation Consultant		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #	Section J1?	Yes				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contr	ibutions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE FILING D											
Jepsen 2010											
		B. Itemized Contribut	ions fron	ı Individu	ıals						
Last Name Botelle-Sherman	First Name Sharon		MI K	Cash	contribution:  Personal C y Order X Credit/Deb	heck 0962	oution ID#	Amount of Contribution			
Residential Street Address 17 South Mdws		City Woodbury		State CT	Zip Code 06798-3223	Date Recei					
Principal Occupation  Community Health Marketing & communications		Name of Employer retired			Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$50.00	\$50.00			
Last Name Faughnan	First Name Joseph		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 0964	oution ID#	Amount of Contribution			
Residential Street Address 50 Acorn Ln		City Northford		State CT	Zip Code 06472-1134	Date Recei					
Principal Occupation Attorney		Name of Employer Susman Duffy & Segaloff		•	Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J1?	X Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00			
Last Name Bolden	First Name Victor		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0967	oution ID#	Amount of Contribution			
Residential Street Address 131 W Elm St # 1		City New Haven		State CT	Zip Code 06515-2119	Date Recei					
Principal Occupation Attorney		Name of Employer City of New Haven		•	Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J1?	X Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00			
Last Name Susman	First Name Matthew		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 0969	oution ID#	Amount of Contribution			
Residential Street Address 51 Broadfield Rd		City Hamden		State CT	Zip Code 06517	Date Recei					
Principal Occupation  Lawyer		Name of Employer Susman Duffy & Segaloff		•	Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J1?	X Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE								FILING	DUE DATE	
Jepsen 2010										
		B. Itemized Contributi	ons fron	Individu	ıals		•			
Last Name Katon	First Name Thomas		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contribution 0970	ID#	Amount of Contribution	
Residential Street Address 48 Linsley Lake Rd		City North Branford		State CT	Zip Code 06471		te Received /08/2010			
Principal Occupation Attorney		Name of Employer Susman Duffy & Segaloff			Is this contribution associate fundraising event listed in If yes, list Event # 070		? <u> </u>			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00	
Last Name Kravetz	First Name Karen		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0971	ID#	Amount of Contribution	
Residential Street Address 61 Forest Glen Dr		City Woodbridge		State CT	Zip Code 06525		te Received /08/2010			
Principal Occupation Attorney		Name of Employer Susman Duffy & Segaloff			Is this contribution associal fundraising event listed in 1 If yes, list Event # 070	Section J1	? <u> </u>			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00	
Last Name Golebiewski	First Name David		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contribution 0973	ID#	Amount of Contribution	
Residential Street Address 379 E Main St		City Wallingford		State CT	Zip Code 06492		te Received /08/2010			
Principal Occupation  Landscape Architect		Name of Employer TPA Design Group			Is this contribution associated fundraising event listed in If yes, list Event # 070	Section J1			ı	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00	
Last Name Ponanski	First Name Alan		MI	Cash	contribution:  Personal Cl y Order  X Credit/Debi		Contribution 0975	ID#	Amount of Contribution	
Residential Street Address 161 Newberry Rd		City East Haddam		State CT	Zip Code 06423-1236		te Received /08/2010			
Principal Occupation Ass't Attorney General		Name of Employer State of Connecticut			Is this contribution associal fundraising event listed in S If yes, list Event #		1 1	Yes No	L	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00	

		I. MON	ETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. Itemiz	ed Contributi	ons from	Individu	ıals				
Last Name Sklaver	First Name Laura			MI	Cash	contribution:    X   Personal C		Contribution	ı ID#	Amount of Contribution
Residential Street Address 143 Santa Fe Ave		City Hamden			State CT	Zip Code 06517		7/08/2010		
Principal Occupation Attorney		Name of Employer Susman Duffy				Is this contribution associ- fundraising event listed in If yes, list Event # 070	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	child of a lob	byist?	Aggre	egate Contribut	ions 00.00	\$100.00
Last Name Sklaver	First Name Gary			MI	Cash	contribution:  X Personal C  Order Credit/Del		Contribution	n ID#	Amount of Contribution
Residential Street Address 143 Santa Fe Ave		City Hamden			State CT	Zip Code 06517		ate Received 7/08/2010		
Principal Occupation Attorney		Name of Employer Licari, Walsh			•	Is this contribution associ- fundraising event listed in If yes, list Event # 070	Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribut	ions 00.00	\$100.00
Last Name Meyer	First Name Jerome			MI	Cash	contribution: Personal C		Contribution 0978	ı ID#	Amount of Contribution
Residential Street Address 50 Old Quarry Rd		City Guilford			State CT	Zip Code 06437-3706		rate Received		
Principal Occupation  Artist		Name of Employer Self	r			Is this contribution associ- fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribut	ions 00.00	\$100.00
Last Name Johnson	First Name Susan			MI	Cash	contribution:    X   Personal C		Contribution 0979	ı ID#	Amount of Contribution
Residential Street Address 120 Bolivia St		City Willimantic			State CT	Zip Code 06226-2818		rate Received 7/08/2010		
Principal Occupation State Rep.		Name of Employer State of Conn				Is this contribution associ fundraising event listed in If yes, list Event #				L
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	_	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut	ions 50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							I	FILING	DUE DATE		
Jepsen 2010											
		B. Itemized Contribut	tions fron	ı Individu	ıals						
Last Name O'Brien	First Name Dennis		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution I	ID#	Amount of Contribution		
Residential Street Address 120 Bolivia St		City Willimantic		State CT	Zip Code 06226-2818		e Received /08/2010				
Principal Occupation Attorney		Name of Employer Self		•	Is this contribution associa fundraising event listed in If yes, list Event #			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio \$50	ons 0.00	\$50.00		
Last Name Curry	First Name William		MI E	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck	Contribution I	ID#	Amount of Contribution		
Residential Street Address 119 Town Farm Rd		City Farmington		State CT	Zip Code 06032-1522		e Received /09/2010				
Principal Occupation writer/business consultant		Name of Employer sel employed		•	Is this contribution associa fundraising event listed in If yes, list Event #		? X	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contribution		\$100.00		
Last Name Sweeney	First Name William		MI J	Cash	contribution: Personal Cl y Order X Credit/Deb	heck	Contribution I	ID#	Amount of Contribution		
Residential Street Address 7 Foxcroft Rd		City West Hartford		State CT	Zip Code 06119-1150		e Received /09/2010				
Principal Occupation Attorney		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ste Contribution \$100		\$100.00		
Last Name Nash	First Name Bernard		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution I	ID#	Amount of Contribution		
Residential Street Address 10771 McGregor Dr		City Columbia		State MD	Zip Code 21044		e Received /09/2010				
Principal Occupation Attorney		Name of Employer Dickstein Shapiro			Is this contribution associa fundraising event listed in If yes, list Event #		? X	Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob	byist?	Aggrega	ate Contributio		\$100.00		

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							]	FILING	DUE DATE		
Jepsen 2010											
		B. Itemized Contribut	ions fron	Individu	ıals						
Last Name Nash	First Name Phyllis		MI	Cash	contribution:    X   Personal Characteristics   Personal Characteristics   Credit/Debit   Personal Characteristics   Personal Cha	neck	Contribution 0989	ID#	Amount of Contribution		
Residential Street Address 10771 McGregor Dr		City Columbia		State MD	Zip Code 21044		te Received /09/2010				
Principal Occupation  None		Name of Employer None		•	Is this contribution associal fundraising event listed in S If yes, list Event #			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contributio	ons 0.00	\$100.00		
Last Name Marquis	First Name Milton		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck	Contribution 0990	ID#	Amount of Contribution		
Residential Street Address 16433 Fox Valley Ter		City Rockville		State MD	Zip Code 20853		e Received /09/2010				
Principal Occupation Attorney		Name of Employer Dickstein Shapiro			Is this contribution associate fundraising event listed in State of the If yes, list Event #		?	Yes No	L		
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contribution	ons 0.00	\$100.00		
Last Name Kadzik	First Name Peter		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck	Contribution 0991	ID#	Amount of Contribution		
Residential Street Address 5309 Cushing Pl NW .		City Washington		State DC	Zip Code 20016		te Received /09/2010				
Principal Occupation Attorney		Name of Employer Dickstein Shapiro		•	Is this contribution associal fundraising event listed in S If yes, list Event #			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contributio	ons 0.00	\$100.00		
Last Name Smoyer	First Name Diane		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck	Contribution 0992	ID#	Amount of Contribution		
Residential Street Address 3601 N Albemarle St		City Arlington		State VA	Zip Code 22207		te Received /09/2010				
Principal Occupation Attorney		Name of Employer Dickstein Shapiro			Is this contribution associal fundraising event listed in S If yes, list Event #		? <b>x</b> 1	Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggrega	ate Contributio	ons 0.00	\$100.00		

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Jepsen 2010										
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name Feinstein	First Name Margaret			MI	Cash	contribution:    X   Personal C		Contributio	n ID#	Amount of Contribution
Residential Street Address 3937 N Dumbarton St		City Arlington	ı		State VA	Zip Code 22207		Pate Received 17/09/2010		
Principal Occupation Attorney		Name of Er Dicksteir	mployer n Shapiro			Is this contribution associ fundraising event listed in If yes, list Event #		<sub>11?</sub>	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribut \$1	ions 00.00	\$100.00
Last Name Martin	First Name Ann			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution	n ID#	Amount of Contribution
Residential Street Address 92 Dolphin Cv Quay		City Stamford	I		State CT	Zip Code 06902-7734		ate Received 17/09/2010		
Principal Occupation retired		Name of Er	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1? $\square$	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$1	ions 00.00	\$100.00
Last Name Hoffman	First Name Stephen			MI	Cash	contribution:  Personal C y Order X Credit/Del		Contribution 0995	n ID#	Amount of Contribution
Residential Street Address PO Box 3580		City Stamford	I		State CT	Zip Code 06905-0580		Pate Received 17/09/2010		
Principal Occupation real estate		Name of Er hoffman	nployer investment partners	<b>3</b>	•	Is this contribution associ fundraising event listed in If yes, list Event #		J1? $f egin{array}{cccccccccccccccccccccccccccccccccccc$	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$1	ions 00.00	\$100.00
Last Name Taylor	First Name Allan			MI	Cash	contribution:  Personal C y Order X Credit/Del		Contribution	n ID#	Amount of Contribution
Residential Street Address 238 Whitney St		City Hartford			State CT	Zip Code 06105-2270		ate Received 17/09/2010		
Principal Occupation attorney		Name of Er Day Pitn			•	Is this contribution associ fundraising event listed in If yes, list Event #		J1? $\square$	Yes No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$1	ions 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE							F	FILING	DUE DATE			
Jepsen 2010												
		B. Itemized Contribut	ions fron	ı Individu	ıals		•					
Last Name Pawelkiewicz	First Name Jane		MI	Cash	contribution:    X   Personal Cl y Order	heck	Contribution I	ID#	Amount of Contribution			
Residential Street Address 74 Oakwood Dr		City Windham		State CT	Zip Code 06280		e Received /09/2010					
Principal Occupation Retired		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution \$100		\$100.00			
Last Name Kruk	First Name Pauline		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution I	ID#	Amount of Contribution			
Residential Street Address 165 Walsh Ave		City Newington		State CT	Zip Code 06111		e Received /09/2010					
Principal Occupation  Medical Librarian		Name of Employer State of Connecticut		•	Is this contribution associa fundraising event listed in If yes, list Event #		, X N	Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution \$5	ns 5.00	\$5.00			
Last Name Hoberman	First Name Mary Ann		MI	Cash	contribution:    X   Personal Cl	heck	Contribution I	ID#	Amount of Contribution			
Residential Street Address 98 Hunting Ridge Rd		City Greenwich		State CT	Zip Code 06831		e Received /09/2010					
Principal Occupation Writer & Sculptor		Name of Employer  None			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution \$100		\$100.00			
Last Name Lees	First Name Bruce		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution I	ID#	Amount of Contribution			
Residential Street Address 157 Westville Avenue Ext		City Danbury		State CT	Zip Code 06811-4438		e Received /09/2010					
Principal Occupation Sales		Name of Employer AT&T			Is this contribution associa fundraising event listed in If yes, list Event #		, X N	Yes No				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution \$25	ns 5.00	\$25.00			

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE							FILIN	G DUE DATE				
Jepsen 2010												
B. Itemized Contributions from Individuals												
Last Name Farricker	First Name Frank		MI	Cash	contribution:    X   Personal Cl y Order	heck 1006	ution ID#	Amount of Contribution				
Residential Street Address  14 Mead Ave		City Cos Cob		State CT	Zip Code 06807-2706	Date Receiv						
Principal Occupation  Realtor		Name of Employer EBT Realty			Is this contribution associa fundraising event listed in If yes, list Event # 070		X Yes No					
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	sibutions \$100.00	\$100.00				
Last Name Adkins	First Name Caroline		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 1015	ution ID#	Amount of Contribution				
Residential Street Address 79 Fairfield Rd		City Greenwich		State CT	Zip Code 06830-4855	Date Receiv						
Principal Occupation Psychologist		Name of Employer Institute for Life Coping Skill	ı	•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$100.00	\$100.00				
Last Name Dayton	First Name Jennifer		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 1004	ution ID#	Amount of Contribution				
Residential Street Address 18 Leonard Ave		City Riverside		State CT	Zip Code 06878-1714	Date Receiv						
Principal Occupation Community Volunteer		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J1?	X Yes No					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cont	ributions \$50.00	\$50.00				
Last Name Markowitz	First Name Brad		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 1008	ution ID#	Amount of Contribution				
Residential Street Address 10 Loughlin Ave		City Cos Cob		State CT	Zip Code 06807-2616	Date Receiv						
Principal Occupation  Health Care Management		Name of Employer Park Avenue Health Care Mg	ımt		Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J1?	X Yes No					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob ves	byist?	Aggregate Cont	ributions \$100.00	\$100.00				

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE								FILING	DUE DATE			
Jepsen 2010												
		B. Itemized Contributi	ons fron	Individu	ıals							
Last Name Ramos	First Name Maryann		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contribution	ID#	Amount of Contribution			
Residential Street Address 35 Homestead Rd		City Greenwich		State CT	Zip Code 06831-4222		te Received 7/10/2010					
Principal Occupation  None		Name of Employer None			Is this contribution associate fundraising event listed in Surface If yes, list Event # 070		? <u> </u>					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggreg	ate Contributio	ons 25.00	\$25.00			
Last Name Dubois	First Name Jonathan		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution	ID#	Amount of Contribution			
Residential Street Address 707 Steamboat Rd		City Greenwich		State CT	Zip Code 06830		te Received 7/10/2010					
Principal Occupation  Executive		Name of Employer Indian Spring Land Co.			Is this contribution associate fundraising event listed in Surface If yes, list Event # 070	Section J1	? <u> </u>					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributio	ons 00.00	\$100.00			
Last Name Segaloff	First Name Barbara		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contribution 0999	ID#	Amount of Contribution			
Residential Street Address 200 Fountain St Apt 712		City New Haven		State CT	Zip Code 06515		te Received 7/10/2010					
Principal Occupation  Devlopment		Name of Employer City of New Haven			Is this contribution associated fundraising event listed in If yes, list Event # 070	Section J1	?					
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggrega	ate Contribution	ons 00.00	\$100.00			
Last Name Mellis	First Name Joel		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution	ID#	Amount of Contribution			
Residential Street Address 280 Barncroft Rd		City Stamford		State CT	Zip Code 06902	- 1	te Received 7/10/2010					
Principal Occupation Retired		Name of Employer Lawyer			Is this contribution associal fundraising event listed in S If yes, list Event #			Yes No				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	ate Contributio	ons 00.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							1	FILING	DUE DATE		
Jepsen 2010											
		B. Itemized Contribut	tions fron	ı Individu	ıals						
Last Name Adkins	First Name Winthrop		MI	Cash	contribution:    X   Personal Cl	heck	Contribution	ID#	Amount of Contribution		
Residential Street Address 79 Fairfield Rd		City Greenwich		State CT	Zip Code 06830		te Received /10/2010				
Principal Occupation Retired Professor		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio \$10	ons 0.00	\$100.00		
Last Name Marchand	First Name Donat		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution	ID#	Amount of Contribution		
Residential Street Address 87 Birch Ln		City Greenwich		State CT	Zip Code 06830		te Received /10/2010				
Principal Occupation Attorney		Name of Employer  Ivey, Barnum & O'Meera			Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J13	11,				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$100.00		
Last Name Markowitz	First Name Mary Eller	n	MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck	Contribution	ID#	Amount of Contribution		
Residential Street Address 10 Loughlin Ave		City Cos Cob		State CT	Zip Code 06807		te Received /10/2010				
Principal Occupation Psychotherapist		Name of Employer None			Is this contribution associa fundraising event listed in If yes, list Event # 070		11.				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio \$10	ons 0.00	\$100.00		
Last Name Wylie	First Name Robert		MI	Cash	contribution:    X   Personal Cl y Order	heck	Contribution	ID#	Amount of Contribution		
Residential Street Address 55 Buckfield Ln		City Greenwich		State CT	Zip Code 06831		te Received /10/2010				
Principal Occupation Retired		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J13	1 1				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggrega	ate Contributio	ons 0.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE									FILING	G DUE DATE		
Jepsen 2010												
B. Itemized Contributions from Individuals												
Last Name Hagegard	First Name Gayle			MI	Cash	contribution: Personal C y Order X Credit/De		Contributi	on ID#	Amount of Contribution		
Residential Street Address 10 Birchwood Dr		City Greenwid	ch		State CT	Zip Code 06831-3373		Date Received				
Principal Occupation  Consultant		Name of E	mployer			Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contrib	utions \$40.00	\$40.00		
Last Name Fields	First Name Robert			MI	Cash	contribution:  Personal ( y Order X Credit/De		Contributi	on ID#	Amount of Contribution		
Residential Street Address 631 Long Ridge Rd # 6		City Stamford	i		State CT	Zip Code 06902-1261		Date Received 07/10/201				
Principal Occupation dentist		Name of E	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		J1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	bbyist?	Aggre	egate Contrib	utions 100.00	\$100.00		
Last Name Morley	First Name Thomas			MI	X Cash	contribution: Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution		
Residential Street Address 6 Hunter St		City Old Gree	nwich		State CT	Zip Code 06870		Date Received 07/10/201				
Principal Occupation Student		Name of E	mployer		•	Is this contribution associ fundraising event listed in If yes, list Event # 07	n Section .	<sub>J1?</sub> [2	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contrib	s5.00	\$5.00		
Last Name Canner	First Name Glen			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution		
Residential Street Address 1465 Putnam Ave # 123		City Old Gree	nwich		State CT	Zip Code 06870		Date Received				
Principal Occupation Attorney		Name of E	mployer ces of Glen A. Canne	r	•	Is this contribution associ fundraising event listed in If yes, list Event # 07	n Section .	<sub>J1?</sub> [2	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contrib	utions 100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE								FILING	DUE DATE		
Jepsen 2010											
		B. Itemized Contribut	ions fron	ı Individu	ıals						
Last Name Asselin	First Name Shawn		MI	Cash	contribution:    X   Personal C		Contribution	n ID#	Amount of Contribution		
Residential Street Address 14 Crawford Ter		City Riverside		State CT	Zip Code 06878-1032		ate Received 7/10/2010	ı			
Principal Occupation Sales Mgr		Name of Employer Data Mail		•	Is this contribution associa fundraising event listed in If yes, list Event # 070		1?	Yes No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribut \$	tions 75.00	\$75.00		
Last Name Blankley	First Name John		MI	x Cash	contribution: Personal C  Order Credit/Deb		Contribution	n ID#	Amount of Contribution		
Residential Street Address 10 Doverton Dr .		City Greenwich		State CT	Zip Code 06831		ate Received 7/10/2010	ı			
Principal Occupation CEO		Name of Employer Flagship Networks		•	Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J	1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribut \$.	tions 20.00	\$20.00		
Last Name Marzullo	First Name Drew		MI	Cash	contribution:    X   Personal C		Contribution	n ID#	Amount of Contribution		
Residential Street Address 55 Orchard St		City Cos Cob		State CT	Zip Code 06807-2404		ate Received 7/10/2010				
Principal Occupation Paramedic GEMS		Name of Employer  Democratic Selectman		-	Is this contribution associa fundraising event listed in If yes, list Event # 070	Section J	1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribut \$1	tions 00.00	\$100.00		
Last Name Richman	First Name Howard		MI	Cash	contribution:    X   Personal C		Contribution	n ID#	Amount of Contribution		
Residential Street Address 387 Round Hill Rd		City Greenwich		State CT	Zip Code 06831		7/10/2010				
Principal Occupation  Executive		Name of Employer American Diabetes Assoc.			Is this contribution association fundraising event listed in If yes, list Event # 070	Section J	1?	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribut	tions 25.00	\$25.00		
774							Total of S	ection B	\$76,871.00		
TOTAL OF ALL CONTRIBU	JTIONS FI	ROM INDIVIDUALS	(Section	ons A & B	(Total on Line 14	of Sumn	nary Page)		\$76,871.00		

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE							FILING	DUE DATE				
Jepsen 2010												
C1. Contributions from Other Committees												
Name of Committee					Name of Treasurer							
Address			Is this contribution a fundraising event			Yes If yes, list Event	#	Amount of Contribution				
City	State	Zip	Code	Date R	eceived	Aggregate Contributions						
						Total of S	Section C1					

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE				FILIN	IG DUE DATE						
Jepsen 2010											
C2. Reimbursements or Payments from other Committees											
Name of Committee  Jepsen 2010 Exploratory Committee			Name of Treasurer								
Address PO Box 230161			Date Received 07/10/2010		Amount of Receipt						
City Hartford	State CT	Zip Code 06123	Reimbursement for shared expense Payment for goods and services		\$7,550.00						
			Total of Sectio	n C2	\$7,550.00						

	I. MONETARY RECEIPTS (Section	on A-K)				
NAME OF COMMITTEE					FILING	DUE DATE
Jepsen 2010						
	D. Loans Received this Period					
Name of Lender				Source of Loan:	Is there a cosigner or Guarantor of	Amount Received
Street Address	City	State	Zip Code	Candidate Individual	this loan? Yes	
Name of Cosigner/Guarantor				Other Committee	No	
Street Address	City	State	Zip Code	Date Received		
				Total of	Section D	

I. MONETARY RECEIPTS (Section A-I)						
NAME OF COMMITTEE	,				FILING DUE DA	<b>N</b> TE
Jepsen 2010						
	E. Personal Funds of the Candidate Received this Period					
Date Received <b>06/21/2010</b>	Amount	\$100.00	Method of Payment  Cash	X Personal Check	Credit/Debit Card	
				Tot	al of Section E	\$100.00

I. MONETARY RECEIPTS (Section A-I)						
NAME OF COMMITTE	EE				FILING DUE DATE	
Jepsen 2010						
	F. Anonymous Contributions					
Date Received	\$ 1 bills	\$ 5 bills	\$ 10 bill	coins	Amount	
Total of Section F						

I. Monetary Receipts (Section A-I)						
NAME OF COMMITTEE					FIL	ING DUE DATE
Jepsen 2010						
G. Interest from Deposits in Authorized Accounts						
Name of Institution		Date Received				Total Amount Received
Street Address	City		State	Zip Code		
Total of Section G						

	I. MONETARY RECEIPTS (Section A-K)						
NAME OF COMMI	NAME OF COMMITTEE FILING DUE DATE						
Jepsen 2010							
	H. Public Grant Funds Received from the Citizen's Election Fund						
Purpose of Grant: Initial Primary	General or Special Election	Supplemental/Independ Primary	ent Expenditure General or Special Election	Date Received	Amount		
	st Election Deficit or Special Election	Supplemental/Excess E Primary	xpenditure General or Special Election				
	Total of Section H						

I. MONETARY RECEIPTS (Section A-K)						
NAME OF COMMITTEE				FILI	NG DUE DATE	
Jepsen 2010						
I. Miscellaneous Monetary Receipts not Considered Contributions						
Name		Date of Trans	saction		Amount Received	
Street Address	City	State	Zip Code			
Description						
			Total of Sec	tion I		

	II. FUNDRAISING	G EVENT ACTIVITY				
NAME OF					FILING DUE	DATE
COMMITTEE Jepsen 2010						
	J1. Fundra	nising Event Information				
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
05/19/2010 a	Meet and Greet Event	222 Main St	Wethe	ersfield	СТ	06109
Was this fundraising event h	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
05/20/2010 a	Meet and Greet Event	280 Trumbull St Fl 22	Hartfo	ord	СТ	06103
Was this fundraising event h	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
05/25/2010 a	Luncheon Event	110 Davenport Farm Ln W	Stamf	ord	СТ	06903
Was this fundraising event he	osted at a personal residence?		X Yes	No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/02/2010 b	Home Fundraiser	674 Lincoln St	New B	Britain	СТ	06052
Was this fundraising event he	osted at a personal residence?		X Yes	No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	x No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/02/2010 a	Breakfast Event	2316 Post Rd	Fairfie	eld	СТ	06824
Was this fundraising event he	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	x No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		

	II. FUNDRAISING	G EVENT ACTIVITY				
NAME OF					FILING DUE	DATE
COMMITTEE Jepsen 2010						
	J1. Fundra	nising Event Information		•		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/05/2010 a	Home Fundraiser	137 E Weatogue St	Sim	nsbury	СТ	06070
Was this fundraising event he	osted at a personal residence?		X Yes	No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/06/2010 a	Meet and Greet Event	217 Middle Ridge Rd	Nev	v Canaan	СТ	06840
Was this fundraising event he	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/09/2010 a	Meet and Greet Event	451 Stillwater Rd	Sta	mford	СТ	
Was this fundraising event he	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/13/2010 a	Meet and Greet Event	12 Spectacle Ln	Rid	gefield	СТ	06877
Was this fundraising event he	osted at a personal residence?		X Yes	No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/16/2010 a	Dinner Event	211 State St	Brid	dgeport	СТ	06604
Was this fundraising event he	osted at a personal residence?		Yes	x No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		

	II. FUNDRAISING	G EVENT ACTIVITY				
NAME OF					FILING DUE	DATE
COMMITTEE Jepsen 2010						
	J1. Fundra	nising Event Information				
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/18/2010 a	Home Fundraiser	1265 Racebrook	Wood	lbridge	СТ	06525
Was this fundraising event ho	osted at a personal residence?		X Yes	No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		X Yes	No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	x No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/21/2010 a	Breakfast Event	21 Oak St	Hartfo	ord	СТ	06106
Was this fundraising event he	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	auction, or other sale of donated items?		Yes	x No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/22/2010 a	Meet and Greet Event	46 Prospect St	Hartfo	ord	СТ	06103
Was this fundraising event he	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	x No		
Was this fundraiser a tag sale	auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/23/2010 a	Meet and Greet Event	3543 Main St Fl 2	Bridg	eport	СТ	06606
Was this fundraising event ho	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/26/2010 b	Meet and Greet Event	27 Highview Rd	Darie	n	СТ	06820
Was this fundraising event he	osted at a personal residence?		X Yes	No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		

	II. FUNDRAISING	G EVENT ACTIVITY				
NAME OF					FILING DUE	DATE
COMMITTEE Jepsen 2010						
	J1. Fundra	nising Event Information				
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/27/2010 b	Home Fundraiser	324 Town St	Eas	t Haddam	СТ	06423
Was this fundraising event he	osted at a personal residence?		X Yes	No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		X Yes	No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	x No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/27/2010 c	Home Fundraiser	17 Stony Pt	Wes	stport	СТ	06880
Was this fundraising event he	osted at a personal residence?		X Yes	No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		X Yes	No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/27/2010 a	Other Event	6 First St	Nor	walk	СТ	06855
Was this fundraising event he	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/28/2010 a	Meet and Greet Event	9 Old Sugar Hollow Rd	Dar	nbury	СТ	06810
Was this fundraising event he	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address	City		State	Zip Code
06/30/2010 a	Meet and Greet Event	315 St Ronan St # 1	Nev	v Haven	СТ	06511
Was this fundraising event he	osted at a personal residence?		Yes	X No		
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No		
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No		

II. FUND	RAISING EVENT ACTIVITY		
NAME OF			FILING DUE DATE
COMMITTEE Jepsen 2010			
J	1. Fundraising Event Information		
Fundraising Event # Description	Location: Street Address	City	State Zip Code
Date of Fundraiser Letter 07/01/2010 a Meet and Greet Event	164 Central St	Bristol	CT 06010
Was this fundraising event hosted at a personal residence?	•	Yes X No	
Did this fundraiser include items donated by a business entity of up items donated by an individual of up to \$50?	to \$100 or	Yes X No	
Was this fundraiser a tag sale, auction, or other sale of donated item	s?	Yes X No	
Fundraising Event # Description Date of Fundraiser Letter	Location: Street Address	City	State Zip Code
07/03/2010 a Meet and Greet Event	59 Elm St	New Haven	CT 06510
Was this fundraising event hosted at a personal residence?		Yes X No	
Did this fundraiser include items donated by a business entity of up items donated by an individual of up to \$50?	to \$100 or	Yes X No	
Was this fundraiser a tag sale, auction, or other sale of donated item	s?	Yes X No	
Fundraising Event # Description  Date of Fundraiser Letter	Location: Street Address	City	State Zip Code
07/08/2010 a Home Fundraiser	22 Alden Rd	Greenwich	CT 06831
Was this fundraising event hosted at a personal residence?		x Yes No	
Did this fundraiser include items donated by a business entity of up items donated by an individual of up to \$50?	to \$100 or	X Yes No	
Was this fundraiser a tag sale, auction, or other sale of donated item	s?	Yes X No	

	II. FUNDRAISING EVENT	Α(	CTIVITY				
NAME OF COMMITTEE						FILIN	G DUE DATE
Jepsen 2010							
J2. Proceeds from Tag Sale, Auction, or Other Sale of Donated Items							
Name of the Purchaser Last Name (Individuals ONLY)	First Name	MI	Method of payment:  Cash Pe	rsonal Check	Credit/Deb	it Card	Aggregate Amount of Purchases
Residential Street Address	City	Stat	te Zip Code	Date Received	Event #		
Items Purchased	•	•	•	•	•		
				Te	otal of Sec	ction J2	

	II. FUNDRAISING EVENT ACTIV	VIT'	Y					
NAME OF COMMITTEE							FILINC	DUE DATE
Jepsen 2010								
J3. In-Ki	nd Donations Not Considered Contributi	ons						
Name of the Donor					Donation G	liven by:		Fair Market
Richard Vogel					X Indivi	dual Busine	ess Entity	Value of Donation
Street Address  110 Davenport Farm Ln W	City Stamford		State CT	Zip (	Code <b>03</b>	Aggregate valu		
Description of Donation		Date	Receive	ed	Event #	•		
Food & Beverages		05/	25/2	2010	052510	a		\$200.00
Name of the Donor					Donation G	liven by:		Fair Market
Pam Vogel					X Indivi	idual Busine	ess Entity	Value of Donation
Street Address 110 Davenport Farm Ln	City Stamford		State CT	Zip (	Code	Aggregate valu		
Description of Donation Food & Beverages		l	Receive <b>'25/2</b>		Event # <b>052510</b>	a		\$200.00
Name of the Donor					Donation G	_		Fair Market Value of
Theresa Gerratana					X Indivi	I	ess Entity	Donation
Street Address 674 Lincoln St	City New Britain		State CT	Zip (	Code <b>52</b>	Aggregate valu		
Description of Donation		l	Receive		Event #	-		
Food & Beverages		06/	02/2	2010	060210	b		\$200.00
Name of the Donor  Frank Gerratana					Donation G		E Ó	Fair Market Value of
	Cit.		_	Г		Aggregate valu	ess Entity	Donation
Street Address 674 Lincoln St	City New Britain		State CT	Zip (	Code <b>52</b>	for this event		
Description of Donation		l	Receive		Event #	_		
Food & Beverages		06/	/02/2	2010	060210	b		\$200.00
Name of the Donor  Arthur House					Donation G		ess Entity	Fair Market Value of
Street Address	City		Stat-	7.		Aggregate valu		Donation
137 E Weatogue	Simsbury		State CT	060	70	for this event		
Description of Donation		l	Receive		Event #			
Food & Beverages		06/	05/2	2010	060510	a		\$200.00

	II. FUNDRAISING EVENT ACTIV	VITY	Y					
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
J3. In-Ki	nd Donations Not Considered Contributi	ions						
Name of the Donor					Donation G	iven by:		Fair Market
Rita House					X Indivi	dual Busine	ess Entity	Value of Donation
Street Address 137 E Weatogue	City Simsbury		State CT	Zip (	Code <b>70</b>	Aggregate value for this even		
Description of Donation Food & Beverages		l	Receive		Event # <b>060510</b>	a		\$200.00
Name of the Donor  Daniel Rashin					Donation G	_	ess Entity	Fair Market Value of Donation
Street Address 217 Middle Ridge Rd	City New Canaan		State CT	Zip (	Code	Aggregate valu		
Description of Donation Food & Beverages	ı	l	Receive		Event # <b>060610</b>	a		\$200.00
Name of the Donor Penny Rashin					Donation G  X Indivi	_	ess Entity	Fair Market Value of Donation
Street Address 217 Middle Ridge Rd	City New Canaan		State CT	Zip (	Code 40	Aggregate value for this even		
Description of Donation Food & Beverages		l	Receive		Event # <b>060610</b>	a		\$200.00
Name of the Donor  Elizabeth Thompson					Donation G		ess Entity	Fair Market Value of Donation
Street Address 12 Spectacle Ln	City Ridgefield		State CT	Zip (	Code <b>77</b>	Aggregate value for this even		
Description of Donation Food & Beverages		l	Receive		Event # <b>061310</b>	a		\$150.00
Name of the Donor  Robert Thompson					Donation G	_	ess Entity	Fair Market Value of Donation
Street Address 12 Spectacle Ln	City Ridgefield		State CT	Zip (	Code	Aggregate value for this even		
Description of Donation Food & Beverages		l	Receive		Event # <b>061310</b>	a		\$150.00

	II. FUNDRAISING EVENT ACTIV	VITY	Y					
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
J3. In-Ki	nd Donations Not Considered Contributi	ions						
Name of the Donor					Donation G	liven by:		Fair Market
Ellen Scalettar					X Indivi	idual Busine	ess Entity	Value of Donation
Street Address 1265 Racebrook Rd	City Woodbridge		State CT	Zip (	Code 2 <b>5</b>	Aggregate value for this even		
Description of Donation Food & Beverages		l	Receive ' <b>18/2</b>		Event # <b>061810</b>	a		\$200.00
Name of the Donor					Donation G	iven by:		Fair Market Value of
Britt Hall	T				X Indivi	idual Busine	ess Entity	Donation
Street Address 27 Highview Rd	City  Darien		State CT	Zip (	Code 320	Aggregate value for this even		
Description of Donation Food & Beverages		l	Receive		Event # <b>062610</b>	b		\$200.00
Name of the Donor  Christopher Hall					Donation G	_	ess Entity	Fair Market Value of Donation
Street Address 27 Highview Rd	City  Darien		State CT	Zip (	Code	Aggregate valu		
Description of Donation Food & Beverages	I	l	Receive <b>26/2</b>		Event # <b>062610</b>	b		\$200.00
Name of the Donor  Joel Ide					Donation G		ess Entity	Fair Market Value of Donation
Street Address 324 Town St	City East Haddam		State CT	Zip (	Code	Aggregate value for this even		
Description of Donation Food & Beverages		l	Receive 27/2		Event # <b>062710</b>	b		\$150.00
Name of the Donor  Ann Scheffler					Donation G	_	ess Entity	Fair Market Value of Donation
Street Address 17 Stony Point Rd	City Westport		State CT	Zip (	Code 80	Aggregate value for this even		
Description of Donation Food & Beverages		l	Receive		Event # <b>062710</b>	c		\$150.00

	II. FUNDRAISING EVENT ACTIV	VITY	Y					
NAME OF COMMITTEE							FILING	G DUE DATE
Jepsen 2010								
J3. In-Ki	nd Donations Not Considered Contributi	ions						
Name of the Donor					Donation G	iven by:		Fair Market
William Scheffler					X Indivi	dual Busine	ess Entity	Value of Donation
Street Address 17 Stony Point Rd	City Westport		State CT	Zip (	Code <b>80</b>	Aggregate value for this even		
Description of Donation Food & Beverages		l	Receive		Event # <b>062710</b>	с		\$150.00
Name of the Donor  James Cohen					Donation G	_	ess Entity	Fair Market Value of Donation
Street Address 315 Saint Ronan St # 1	City New Haven		State CT	Zip (	Code	Aggregate valu		
Description of Donation Food & Beverages		l	Receive		Event # <b>063010</b>	a		\$200.00
Name of the Donor Fran DeToro					Donation G	_	ess Entity	Fair Market Value of Donation
Street Address 315 Saint Ronan St # 1	City New Haven		State CT	Zip (	Code	Aggregate value for this even		
Description of Donation Food & Beverages		l	Receive		Event # <b>063010</b>	a		\$200.00
Name of the Donor  Tracy Lavery					Donation G		ess Entity	Fair Market Value of Donation
Street Address 22 Alden Rd	City  Greenwich		State CT	Zip (	Code <b>31</b>	Aggregate value for this even		
Description of Donation		l	Receive '08/2		Event # <b>070810</b>	a		\$200.00
Name of the Donor					Donation G	_		Fair Market Value of
Linda Lavery					X Indivi		ess Entity	Donation
Street Address <del>22 Alden Rd</del>	City  Greenwich		State <del>CT</del>	ı	Code <del>31-4447</del>	Aggregate value for this even		
Description of Donation		l	Receive		Event # 070810a	,		<del>\$200.00-</del>

	II. FUNDRAISING EVENT ACTIV	/IT	Y					
NAME OF COMMITTEE							FILING	DUE DATE
Jepsen 2010								
J3. In-Ki	nd Donations Not Considered Contributi	ons					•	
Name of the Donor  Tracy Lavery					Donation G	_	ess Entity	Fair Market Value of Donation
Street Address <del>22 Alden Rd</del>	City Greenwich		State <del>CT</del>	Zip 9	Code <del>31</del>	Aggregate value for this even		
Description of Donation			Receive		Event #			<del>\$200.00</del> -
Name of the Donor  Linda Lavery			-		Donation G	_	ess Entity	Fair Market Value of Donation
Street Address 22 Alden Rd	City <b>Greenwich</b>		State CT	1	Code 31-4447	Aggregate value for this even		
Description of Donation			Receive		Event # 070810a	a		\$200.00
						Total of Se	ction J3	\$3,750.00

	III. I	NON	IMO	NETARY RECEIPTS					
NAME OF COMMITTEE								FILING 1	DUE DATE
Jepsen 2010									
	K.	In-K	ind (	Contributions					
Name							Date Receive	ed	Fair Market Value of this Contribution
Street Address		(	City		State	Zip Code			
Type of Contributor: Individual Committee	Is Contributor a lobbyist, spouse, or dependent child of a lobbyist?		Yes No	Is contributor a principal of a state contractor?  If yes, indicate which branch or branches government the contract is with:		ospective state  Execu		Yes No Legislative	
Is this contribution associated with a fundalisted in Section J1? If yes, list Event#		Yes No	Des	cription of In-Kind Contribution			Aggregate contr	ibutions	
							Total of	f Section K	

III. Non Monetary Receipts											
NAME OF COMMITTEE	FILING DUE DATE										
Jepsen 2010											
L. Refundable Deposit to Telephone Company											
Last Name ( Individuals Only )	First Name		Amount of Deposit								
Street Address	City		State	Zip Code							
Name of Telephone company											
Street Address											
Total of Section L											

III. NONMONET	ARY RECEIPT	CS .		
NAME OF COMMITTEE				FILING DUE DATE
Jepsen 2010				
M. Non-Monetary Receipts of Orga Legislative Leadership, Legislative				
Name of Committee		Name of Treasurer		
Democratic State Central Committee		Emma W. Pierce		
Street Address 330 Main St Fl 3 .			Date Notice Received 06/10/2010	Fair Market Value of Donation
City Hartford	State CT	Zip Code <b>06106</b>	Aggregate Donations \$277.76	
Description of Donation Use of Bulk Mail Permit		Purpose of Expenditure  A B	C D D	E \$237.17
Name of Committee  Democratic State Central Committee		Name of Treasurer Emma W. Pierce		
Street Address  330 Main St Fl 3 .			Date Notice Received 06/10/2010	Fair Market Value of Donation
City Hartford	State CT	Zip Code <b>06106</b>	Aggregate Donations \$277.76	
Description of Donation  Use of Bulk Mail Permit		Purpose of Expenditure ABB	C D D	Е \$40.59
Name of Committee  Democratic State Central Committee		Name of Treasurer Emma W. Pierce		
Street Address 330 Main St Fl 3 .			Date Notice Received 06/25/2010	Fair Market Value of Donation
City Hartford	State CT	Zip Code <b>06106</b>	Aggregate Donations \$313.19	
Description of Donation Use of Bulk Mail Permit		Purpose of Expenditure  A B	C D D	Е \$35.43
			Total of Section	м \$313.19

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee  Thompson Page  Street Address  226 Kenyon St  Description  Reimbursement for Beverages	City <del>Hartford</del>	State <del>CT</del>	Zip Code <del>06105 2240</del>	Date of Payment  05/18/2010  Purpose of Expenditure  FOOD	Method of Pays Check #  Debit Can Event #		Amount
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			<del>\$42.36-</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Thompson Page				05/18/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>139</u>		
226 Kenyon St	Hartford	ст	06105-2240		Debit Car	<sup>r</sup> d	
Description  Reimbursement for Beverages (CT Liq					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$42.36
Name of Payee  Mr. Anthony J. Homicki			_	Date of Payment 05/19/2010	Method of Pay	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	X Debit Car		
201 Cumberland Ave	Wethersfield	CT	06109-1603	FNDR		ď	
Bill for Fundraiser					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			<del>\$450.00</del> -

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee  Anthony Homicki				Date of Payment <b>05/19/2010</b>	Method of Pays	ment	Amount
Street Address 201 Cumberland Ave	City Wethersfield	State CT	Zip Code <b>06109-1603</b>	Purpose of Expenditure FNDR	<b>112</b> Debit Car	<sup>r</sup> d	
Description  Bill for Fundraiser (Lucky Lou's Bar &				l	Event # 05192010	a	
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$450.00
Name of Payee  Phil Sherwood				Date of Payment <b>05/20/2010</b>	Method of Paya	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	X Debit Car	v4	
420 Commonwealth Ave  Description	New Britain	<del>CT</del>	<del>06053</del>	OFFICE	Event #	u	
Reimbursement for Office Supplies							
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			<del>\$33.91</del> -
Name of Payee Phil Sherwood				Date of Payment 05/21/2010	Method of Paye	ment	Amount
Street Address 420 Commonwealth Ave	City  New Britain	State <del>CT</del>	Zip Code	Purpose of Expenditure	X Debit Car	rd	
Description  Reimbursement for Office Supplies		<u> </u>	1	1 -	Event#		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought	•		<del>\$33.91</del>

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee				•	
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Phil Sherwood				05/21/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	109		
420 Commonwealth Ave	New Britain	СТ	06053	OFFICE	Debit Car	d .	
Description					Event #		
Reimbursement for Office Supplies (O	ffice Depot)						
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$67.82
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Fedex Kinko's				<del>05/21/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	Check #		
544 Farmington Ave	Hartford	<del>CT</del>	<del>06105</del>	PRNT	X Debit Car	·d	
Description	!		1	!	Event #		
<del>Photocopies</del>							
Is this expenditure coordinated with another candidate fo	r Other Candidate(s) N	lame		Office Sought			
which reimbursement is sought? Yes							
× No							<del>\$212.00</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Fedex Kinko's				<del>05/21/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
544 Farmington Ave	Hartford	<del>CT</del>	<del>06105</del>	PRNT	X Debit Car	<sup>r</sup> d	
Description					Event #		
Copies							
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes No							<del>\$74.20</del>

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee				•	
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Total Graphic Solutions	1		1	05/21/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>115</u>		
111 Brookside Rd	New Britain	СТ	06052	PRNT	Debit Car	rd	
Description Printing (Invoices 468, 474 & 476					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	lame		Office Sought			
Yes X No							\$6,748.46
Name of Payee				Date of Payment	Method of Pay	ment	Amount
CT Expo Center				<del>05/21/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
165 Reverend Moody Overpass	Hartford	<del>CT</del>	<del>06144</del>	<del>FOOD</del>	Nebit Car	rd	
Description			•		Event #		
Dem. Convention Catering							
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	lame		Office Sought			
Yes No							<del>\$656.67</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Target Consulting	·			05/24/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
161 N Quaker Ln	West Hartford	<del>CT</del>	<del>06119</del>	CNSLT	* Debit Car	rd	
Description					Event #		
Consulting Fee							
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	lame		Office Sought			
x No							<del>\$3,000.00</del>

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee  Target Consulting				Date of Payment <b>05/24/2010</b>	Method of Pay	ment	Amount
Street Address 161 N Quaker Ln	City West Hartford	State CT	Zip Code <b>06119</b>	Purpose of Expenditure	114 Debit Car	rd	
Description Consulting Fee		1	-		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$3,000.00
Name of Payee  Kevin Clemency				Date of Payment <b>05/25/2010</b>	Method of Pay	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	110		
231 Dogwood Ln	Manhasset	NY	11030-1642	PRNT	Debit Car	d .	
Description  Reimbursement for Photocopies (Fede	ex Kinko's)				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			\$73.14
x No				<u> </u>	1		7,3.14
Name of Payee  Kevin Clemency				Date of Payment 05/25/2010	Method of Pay	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure			
<del>231 Dogwood Ln</del>	Manhasset	NY	<del>11030-1642</del>	PRNT	X Debit Car	d .	
Description Photocopies					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							<del>\$73.14-</del>

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
US Post Office			_	<del>05/26/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	X Debit Car		
102 Lasalle Rd	West Hartford	<del>CT</del>	<del>06107</del>	POST	<del>                                     </del>	rd .	
Description  Postage					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
× No							<del>\$88.00</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Connecticut Network (CTN)				<del>05/27/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
21 Oak St Ste 605	Hartford	<del>CT</del>	<del>06106</del>	Mise *	X Debit Car	d .	
Description					Event #		
Video of Convention Speech							
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes  No							<del>\$35.99</del> -
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Anthony Krize			•	<del>05/27/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
406 Cutlers Farm Rd	Monroe	CŦ	<del>06468</del>	WAGE	X Debit Car	d .	
Description					Event #		
Wages							
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							<del>\$323.22</del>

	IV. EXPENDITURE	s					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee				•	
Name of Payee				Date of Payment	Method of Pay	ment	Amount
<del>Paychex, Inc.</del>				<del>05/27/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
55 Capitol Blvd Ste 302	Rocky Hill	<del>CT</del>	<del>06067</del>	<del>WAGE</del>	X Debit Car	d	
Description					Event #		
<del>Wages</del>							
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes No							<del>\$1,990.03</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Connecticut Natural Gas Corporation				<del>06/01/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u></u>		
PO Box 1085	Augusta	ME		<del>OVHD</del>	X Debit Car	d	
Description					Event #		
Gas Utility Deposit							
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes  X No							<del>\$800.00</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Connecticut Natural Gas Corporation				06/01/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>101</u>		
PO Box 1085	Augusta	ME		OVHD	Debit Car	d	
Description					Event #		
Gas Utility Deposit							
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	iame		Office Sought			\$800.00
No No							ı

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Mary Zeman	T		T	06/01/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	111		
43 Iroquois Rd	West Hartford	СТ	06117	FNDR	Debit Car	·d	
Description  Reimbursement for Office Supplies an	d Postage				Event # <b>05192010</b>	a	
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$195.79
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Total Graphic Solutions	1		T	06/01/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
111 Brookside Rd	New Britain	<del>CT</del>	<del>06052</del>	PRNT	X Debit Car	d .	
Description					Event #		
Printing							
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes  X No							<del>\$1,139.50</del> -
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Thomas Gahan	Γ	_	T	06/02/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	X Debit Car	,	
196 Harwood Rd	<del>Waterbury</del>	<del>CT</del>	<del>06706</del>	REF		ď	
Return of Funds over \$100					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	Jame		Office Sought			
x No							<del>\$275.00</del>

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Thomas Gahan			•	06/02/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>136</u>		
196 Harwood Rd	Waterbury	СТ	06706	REF	Debit Car	rd	
Description					Event #		
Return of Funds over \$100							
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$275.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Flowers West				<del>06/03/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	Check#		
842 Farmington Ave	West Hartford	<del>CT</del>	<del>06119</del>	Misc *	X Debit Car	·d	
Description	<u>!</u>		+	!	Event #		
Is this expenditure coordinated with another candidate for	r Other Candidate(s) N	lame		Office Sought			
which reimbursement is sought? Yes							
× No							<del>\$68.90</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Merchant Card Processing				06/03/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
PO Box 407066	Fort Lauderdale	FL	33340	Misc *	X Debit Car	d .	
Description					Event #		
Merchant Bank Discount (Online Cont	ribution Processing)						
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$18.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pays	ment	Amount
Merchant Card Processing				06/03/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	]		
PO Box 407066	Fort Lauderdale	FL	33340	Misc *	X Debit Car	d d	
Description			•		Event #		
Merchant Bank Discount (Online Cont	ribution Processing)						
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$86.20
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Merchant Card Processing				06/03/2010	<u>                                     </u>		
	City	G	7: 0.1		Check #		
Street Address PO Box 407066	Fort Lauderdale	State FL	Zip Code <b>33340</b>	Purpose of Expenditure  Misc *	X Debit Car	·d	
Description	Tort Lauderdale	<u>                                     </u>	1000.0	<u> </u>	Event #		
Merchant Bank Interchng							
Is this expenditure coordinated with another candidate fo	r Other Candidate(s) N	lame		Office Sought			
which reimbursement is sought? Yes							
X No							\$189.85
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Prospect Ventures, LLC				06/03/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	100		
33 Girard Ave	Hartford	СТ	06105	очно	Debit Car	d d	
Description					Event #		
Rent							
Is this expenditure coordinated with another candidate fo	r Other Candidate(s) N	lame		Office Sought	!		
which reimbursement is sought? Yes		-					
X No							\$1,800.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee				•	
Name of Payee				Date of Payment	Method of Pay	ment	Amount
US Post Office	T			<del>06/03/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
433 Woodland St	Hartford	<del>CT</del>	<del>06112</del>	POST	X Debit Car	d	
Description Postage					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	lame		Office Sought			
Yes No							<del>\$176.00</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
William Ford				06/05/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>133</u>		
223 Atlantic Ave Apt 4-A	Palm Beach	FL	33480	REF	Debit Car	<sup>-</sup> d	
Description					Event #		
Return of Donation over \$100							
Is this expenditure coordinated with another candidate for which reimbursement is sought?	Other Candidate(s) N	lame		Office Sought			
Yes X No							\$150.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
William Ford				06/05/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
223 Atlantic Ave Apt 4-A	<del>Palm Beach</del>	FL	<del>33480</del>	REF	* Debit Car	d .	
Description					Event #		
Return of Donation over \$100							
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	lame		Office Sought			<del>\$150.00-</del>
X No							<del>\$150.00</del>

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
William Kosturko				06/05/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	V		
<del>201 Water St</del>	Guilford	<del>CT</del>	<del>06437</del>	REF	X Debit Car	d	
Description  Return of Donation over \$100					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
x No							<del>\$275.00</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
William Kosturko				06/05/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>135</u>		
201 Water St	Guilford	СТ	06437	REF	Debit Car	<sup>-</sup> d	
Description  Return of Donation over \$100					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$275.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Verizon Wireless				06/08/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	102		
PO Box 4003	Acworth	GA	30101	WAGE	Debit Car	rd	
Description Staff Cell Phone Bill (PS)					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought	ı		\$22.44
X   No							<b>⊅∠∠.44</b>

	IV. EXPENDITURE	s					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Staples	<del> </del>			06/08/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
2550 Albany Ave	West Hartford	<del>CT</del>	<del>06117</del>	OFFICE	X Debit Car	d	
Description  Office Supplies					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
× No							<del>\$78.38</del>
Name of Payee				Date of Payment	Method of Pays	ment	Amount
Anthony Krize	<u> </u>		Г	06/09/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
406 Cutlers Farm Rd	Monroe	<del>CT</del>	<del>06468</del>	<del>FOOD</del>	X Debit Car	d .	
Description  Bill for Fundraiser					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							<del>\$421.00-</del>
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Anthony Krize	T	ι		06/09/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	107		
406 Cutlers Farm Rd	Monroe	СТ	06468	FOOD	Debit Car	rd .	
Description  Reimbursed for Bill for Fundraiser (Zo	dy's 19th Hole)				Event # 06092010	a	
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
x No							\$421.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Payr	ment	Amount
Connecticut Bar Association				06/09/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	]		
30 Bank St , P.O. Box 350	New Britain	<del>CT</del>	<del>06050</del>	Misc *	X Debit Car	<sup>r</sup> d	
Description  Admissions Ticket			•		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes No							<del>\$55.00</del> -
Name of Payee				Date of Payment	Method of Pays	ment	Amount
US Post Office	<u> </u>			06/10/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>103</u>		
141 Weston St	Hartford	СТ	06120	POST	Debit Car	<sup>r</sup> d	
Description Bulk Postage					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	ļ		
Yes X No							\$51.81
Name of Payee				Date of Payment	Method of Pay	ment	Amount
US Post Office				06/10/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	104		
141 Weston St	Hartford	СТ	06120	POST	Debit Car	·d	
Description  Bulk Postage					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$288.19

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee  Trueserve				Date of Payment <b>06/11/2010</b>	Method of Payr	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>105</u>		
31 Pratt St	Hartford	ст	06103	CNSLT	Debit Car	rd	
Description  Consulting Fee			•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	Iame		Office Sought			\$1,000.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
<del>Staples</del>				<del>06/14/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
2550 Albany Ave	West Hartford	<del>СТ</del>	<del>06117</del>	<del>OFFICE</del>	X Debit Car	·d	
Description			•		Event #		
Office Supplies							
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
× No							<del>\$67.82</del>
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Philip Sherwood			_	06/14/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	106		
420 Commonwealth Ave	New Britain	СТ	06053	CNSLT	Debit Car	d	
Description  Consulting Fee					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought	•		
X No							\$1,000.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Jepsen 2010 Exploratory Committee				06/14/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
PO Box 230161	Hartford	ст	06123	POC	X Debit Car	d d	
Description		•		•	Event #		
Reimbursement to Exploratory Cmte f Candidate Cmte	or Expenses Incurred After Format	ion of	f				
Is this expenditure coordinated with another candidate for which reimbursement is sought?	Other Candidate(s) N	lame		Office Sought			
Yes X No							\$5,447.29
Name of Payee				Date of Payment	Method of Pay	ment	Amount
George Jepsen				06/16/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	119		
31 Barnum Pl	Ridgefield	СТ	06877	FNDR	Debit Car	<sup>r</sup> d	
Description			•		Event #		
Reimbursement for Fundraiser Bill (Ti	ago's)				06162010	a	
Is this expenditure coordinated with another candidate for	or Other Candidate(s) N	lame		Office Sought			
which reimbursement is sought? Yes							
X No							\$315.86
Name of Payee				Date of Payment	Method of Pay	ment	Amount
George Jepsen				<del>06/16/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
31 Barnum Pl	Ridgefield	<del>CT</del>	<del>06877</del>	<del>FNDR</del>	X Debit Car	rd	
Description					Event #		
Food and Beverages							
Is this expenditure coordinated with another candidate for which reimbursement is sought?	Other Candidate(s) N	lame		Office Sought			
Yes  No							<del>\$315.86</del> -

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee				•	
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Patrick Shortell		Π		06/21/2010	X Check #		
Street Address	City	State CT	Zip Code <b>06119</b>	Purpose of Expenditure  FNDR	118 Debit Car	rd	
17 Foxcroft Rd  Description	West Hartford	<u> </u>	00119	FNDK	Event #		
Reimbursement for Food (Lox Stock &	ı Bagel				06212010	a	
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$64.74
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Patrick Shortell	i			06/21/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
17 Foxcroft Rd	West Hartford	<del>CT</del>	<del>06119</del>	FNDR	X Debit Car	rd	
Description					Event #		
Food and Beverages							
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	l		
Yes  X No							<del>\$64.74-</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
William Roberts				06/21/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	113		
58 Country Ln	Collinsville	СТ	06019	REF	Debit Car	rd	
Description  Return of Funds					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	ı		
X No							\$75.00

	IV. EXPENDITURE	s					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee				•	
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Kevin Clemency		l		<del>06/23/2010</del>	Check #		
Street Address <del>231 Dogwood Ln</del>	City <del>Manhasset</del>	State NY	Zip Code 11030-1642	Purpose of Expenditure  FNDR	X Debit Car	ď	
Description	<del>mannasset</del>		11030 1042	INDIX	Event #		
Photocopies							
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							<del>\$55.65</del>
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Kevin Clemency				06/23/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	117		
231 Dogwood Ln	Manhasset	NY	11030-1642	FNDR	Debit Car	ď	
Description			•		Event #		
Reimbursement for Photocopies (Fede	ex Kinko's)						
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	ame		Office Sought	•		
Yes X No							\$55.65
Name of Payee				Date of Payment	Method of Pays	ment	Amount
Walter Leckowicz				06/25/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	129		
729 Prospect	Wethersfield	СТ	06109	REF	Debit Car	ď	
Description  Return of Donation over \$100					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			\$100.00
X No							\$100.00

	IV. EXPENDITURE	<b>S</b>					
NAME OF COMMITTEE						FILE	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Walter Leckowicz				<del>06/25/2010</del>	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	]		
<del>729 Prospect</del>	Wethersfield	<del>CT</del>	<del>06109</del>	REF	X Debit Car	rd	
Description			•		Event #		
Return of Donation over \$100							
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes  X No							<del>\$100.00</del>
No No				T	1		
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Paychex, Inc.				06/25/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u></u>		
55 Capitol Blvd Ste 302	Rocky Hill	СТ	06067	WAGE	X Debit Car	<sup>r</sup> d	
Description			•		Event #		
Wages							
					<u> </u>		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$4,309.19
				Data of Bar	Make 1 CD		
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Paychex, Inc.				06/25/2010	Check #		
Street Address  55 Capitol Blvd Ste 302	City  Rocky Hill	State CT	Zip Code <b>06067</b>	Purpose of Expenditure  WAGE	X Debit Car	d d	
Description	rocky rim			1 -	Event #		
Payroll Taxes							
Is this expenditure coordinated with another candidate fo	r Other Candidate(s) N	lame		Office Sought			
which reimbursement is sought?  Yes							
X No							\$1,493.57

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
US Post Office	1		ı	06/25/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>116</u>		
141 Weston St	Hartford	СТ	06120	POST	Debit Car	d	
Description  Bulk Postage					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$74.57
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Connecticut Light & Power	1		T	06/25/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	121		
PO Box 150493	Hartford	СТ	06115	ОУНО	Debit Car	d	
Description  Electric Utility Bill					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$143.19
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Connecticut Light & Power				06/25/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
PO Box 150493	Hartford	<del>CT</del>	<del>06115</del>	OVHD	X Debit Car	d	
Description					Event #		
Electric Utility Bill							
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No.	r Other Candidate(s) N	lame		Office Sought			<del>\$143.19-</del>
[ * ] No							

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee				•	
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Verizon Wireless				06/25/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	120		
PO Box 4003	Acworth	GA	30101	WAGE	Debit Car	d	
Description  Staff Cell Phone Bill (PS)					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$113.03
Name of Payee				Date of Payment	Method of Payr	ment	Amount
<del>Verizon Wireless</del>				06/25/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
<del>PO Box 4003</del>	Acworth	<del>GA</del>	<del>30101</del>	<del>WAGE</del>	¥ Debit Car	d	
Description Staff Cell Phone Bill (PS)					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							<del>\$113.03</del> -
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Total Graphic Solutions				06/30/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>123</u>		
111 Brookside Rd	New Britain	СТ	06052	PRNT	Debit Car	d	
Description Printing (Invoice 478)					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
X No							\$604.20

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Wentworth DeAngelis Inc.				06/30/2010	X Check #		
Street Address	City	State	Zip Code <b>06034</b>	Purpose of Expenditure  OVHD	Debit Car	rd	
74 Batterson Park Rd  Description	Farmington	Ci	00034	OVID	Event #	<u>.</u>	
Workers Comp & Liability Insurance					Event#		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	Jame		Office Sought			
Yes X No							\$895.10
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Rolling Cones Ice Cream, LLC				06/30/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	122		
6 1st St	Norwalk	СТ	06855	FNDR	Debit Car	d	
Description  Bill for Fundraiser					Event # 06272010	a	
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$80.00
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Prospect Ventures, LLC	_			07/02/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>125</u>		
33 Girard Ave	Hartford	СТ	06105	очно	Debit Car	<sup>r</sup> d	
Description Rent					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$1,800.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Payr	ment	Amount
Merchant Card Processing				07/06/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u> </u>		
PO Box 407066	Fort Lauderdale	FL	33340	Misc *	X Debit Car	d	
Description			•	•	Event #		
Merchant Bnkcd Interchng (Online Contrib	ution Processing)						
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$227.98
X No				T	1		<u> </u>
Name of Payee				Date of Payment	Method of Payr	ment	Amount
Merchant Card Processing				07/06/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u></u>		
PO Box 407066	Fort Lauderdale	FL	33340	Misc *	X Debit Car	d	
Description					Event #		
Merchant Bnkcd Discount (Online Contribu	tion Processing)						
Is this expenditure coordinated with another candidate fo	r 04 C 114 ()			007 0 1			
which reimbursement is sought?	r Other Candidate(s) N	ame		Office Sought			
Yes X No							\$129.90
Name of Payee				Date of Payment	Method of Payr	ment	Amount
Merchant Card Processing				07/06/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	- Chaosa		
PO Box 407066	Fort Lauderdale	FL	33340	Misc *	X Debit Car	ď	
Description					Event #		
Merchant Bnkcd Fee (Online Contribution I	Processing)						
Is this expenditure coordinated with another candidate fo	r Other Candidate(s) N	lame		Office Sought	I .		
which reimbursement is sought?	Onici Candidate(s) is			Office Bought			
Yes X No							\$31.20

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Comcast		Ι		07/07/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	134 Debit Car	.1	
PO Box 1577	Newark	NJ	07101	OVHD		rd .	
Description  Internet & Phone Service					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	l		
Yes X No							\$166.10
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Comcast				07/07/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<del>134</del>		
<del>PO Box 1577</del>	Newark	<del>NJ</del>	<del>07101</del>	OVHD	Debit Car	d	
Description		-	•		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought	•		
X No							<del>\$166.10</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Susman, Duffy & Segaloff		1		07/07/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	140 Debit Car	·A	
PO Box 1684	New Haven	СТ	06507	FNDR		u	
Description Invitations for Fundraiser					Event # 07032010a	I	
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	•		
Yes X No							\$70.40

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee				•	
Name of Payee  Prospect Ventures, LLC			1	Date of Payment 07/07/2010	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	131 Debit Car	·d	
33 Girard Ave	Hartford	<del>CT</del>	06105	OVHD		·u	
Description  Reimbursement for Gas Utility Bill (CT Nat	<del>ural Gas)</del>				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			<del>\$107.99</del> -
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Prospect Ventures, LLC	<u> </u>	l		07/07/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	131	,	
33 Girard Ave	Hartford	СТ	06105	OVHD	Debit Car	ru .	
Description  Reimbursement for Gas Utility Bill (CT	Natural Gas)				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	ame		Office Sought			
X No							\$107.99
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Kevin Clemency		l		07/07/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	132 Debit Car	.4	
231 Dogwood Ln	Manhasset	NY	11030-1642	OFFICE		·u	
Description  Reimbursement for office supplies from St	aples				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	ame		Office Sought			
X No							\$112.14

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee Phil Sherwood Street Address 420 Commonwealth Ave	City New Britain	State CT	Zip Code 06053	Date of Payment 07/07/2010 Purpose of Expenditure CNSLT	Method of Paya  X Check #  138  Debit Car		Amount
Description  Consulting Fee					Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			\$2,000.00
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Hon. Elizabeth Bye		l	T	07/07/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	128 Debit Car	.1	
99 Outlook Ave	West Hartford	СТ	06119-1432	FNDR	<u> </u>	u	
Description  Reimbursement for Breakfast Event (\)	Whole Foods)				Event # 06212010	a	
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			\$68.14
Name of Payee Hon. Elizabeth Bye				Date of Payment 07/07/2010	Method of Payr	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	128 Debit Car	v4	
Description  Reimbursement for Breakfast Event	West Hartford	<del>CT</del>	06119-1432	FNDR	Event # 06212010a		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			<del>\$68.14</del>

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee				•	
Name of Payee  Clare Kindall  Street Address	City	State	Zip Code	Date of Payment  07/07/2010  Purpose of Expenditure	Method of Pays  X Check #	ment	Amount
46 Bishop Rd	West Hartford	CT	1	Misc *	Debit Car	·d	
Description Reimbursement for Candy for July 4th Par	ı	I			Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			<del>\$60.78</del>
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Clare Kindall				07/07/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	127		
46 Bishop Rd	West Hartford	СТ	06119-1535	Misc *	Debit Car	d .	
Description  Reimbursement for Candy for July 4th	Parades (purchased @ BJ's)				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	lame		Office Sought			\$60.78
Name of Payee  Jepsen 2010 Exploratory Committee				Date of Payment 07/08/2010	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>141</u>		
PO Box 230161	Hartford	СТ	06123	POC	Debit Car	·d	
Description Reimbursement to Exploratory Cmte for E Cmte	xpenses incurred after formation of Car	ndidat	e		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	r Other Candidate(s) N	ame		Office Sought			\$7,550.15
X No							Ψ.,000.10

	IV. EXPENDITURE	s					
NAME OF COMMITTEE						FILE	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee  Robert Biondino				Date of Payment 07/09/2010	Method of Payı	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	130 Debit Car	.1	
197 Cheshire Rd	Wallingford	СТ	06492	REF		ď	
Description  Return of Donation over \$100					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$100.00
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Jennifer Jaff	<del>1</del>		1	07/09/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>126</u>		
18 Timberline Dr	Farmington	СТ	06032-1744	REF	Debit Car	d .	
Description Reimbursement of Donation over \$100					Event #		
Is this expenditure coordinated with another candidate for	r Other Candidate(s) N	lame		Office Sought			
which reimbursement is sought?  Yes  No							\$50.00
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Paychex, Inc.	T	ı		07/09/2010	Check #		
Street Address 55 Capitol Blvd Ste 302	City  Rocky Hill	State CT	Zip Code 06067	Purpose of Expenditure WAGE	X Debit Car	·d	
Description					Event #		
Payroll Taxes							
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			
Yes X No							\$1,495.98

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Jepsen 2010							
	N. Expenses Paid By Commi	ttee					
Name of Payee				Date of Payment	Method of Payı	ment	Amount
Paychex, Inc.	<del> </del>	_	1	07/09/2010	Check #		
Street Address 55 Capitol Blvd Ste 302	City Rocky Hill	State CT	Zip Code 06067	Purpose of Expenditure WAGE	X Debit Car	·d	
Description			+		Event #		
Wages							
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	or Other Candidate(s) N	Jame		Office Sought			\$4,081.72
Name of Payee				Date of Payment	Method of Pay	ment	Amount
2Dog Media	Γ	I		07/10/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	137 Debit Car	vd.	
260 France St Description	Rocky Hill	СТ	06067	WEB	Event #	u	
Website Maintainence (June/July)					Event#		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s) N	lame		Office Sought	1		
X No							\$500.00
					Total of Sec	ction N	\$49,278.93

	IV.	EXPENDITURES						
NAME OF COMMITTE	EE						FILING	DUE DATE
Jepsen 2010								
	O. Cam	paign Expenses Paid By Candidate						
Tiago's Restaurant & Bar 06/16/2010				Is Reimbur Claimed?		Amount		
Street Address 211 State St		City Bridgeport	State CT	Zip Code <b>06604</b>		X Ye		
Purpose of Expenditure FNDR	Description  Bill for Fundraiser (Tiago's) listed in Sections N & R	Per L. Zaccagnino, this is also		•	Event # <b>06162010a</b>			\$315.86
						Total of	Section O	\$315.86

IV. EXPENDITURES										
NAME OF COMMITTEE						FII	LING DUE DATE			
Jepsen 2010										
P. Expenses Incurred on Committee Credit Card										
Name of Issuing Institution Type of Credit Card:										
			Visa	Master Card	Discover	Ameri	can			
Other										
Name of Vendor					Date of Transaction		Amount			
Street Address		City	State	Zip Code						
Purpose of Expenditure	Description			•	Event #					
	_									
					Total of Section	P	-			

IV. EXPENDITURES											
NAME OF COMMITTEE				FILING D	UE DATE						
Jepsen 2010											
Q. Expenses Incurred By Committee but Not Paid During this Period											
Name of Creditor		Date Incurred	Event #		Amount Incurred (Estimate or						
Street Address	City		State	Zip Code	Actual)						
Description Purpose of Expenditure											
Is this expenditure coordinated with another candidate for Other Car which reimbursement is sought?  Yes  No	didate(s) Name	Office Sought									
			Total of	Section Q							

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILI	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburse	ements to Committee Wor	kers and	Consultants			
Name of Worker/Consultant  Mary Zeman  Secondary Payee  Staples	P		Date of Payment 05/10/2010  Purpose of Expenditure FNDR		ent	Amount
Street Address 2550 Albany Ave	City <b>West Hartford</b>	<u>!</u>	State CT	Zip Code <b>06117</b>		
Description Fundraiser Invites				Event # <b>05192010</b> a	ā	
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought			\$20.35
Name of Worker/Consultant  Mary Zeman		Date of Pa		Method of Paym	ent	Amount
Secondary Payee Staples		Purpose o	f Expenditure	111 Debit Card	l	
Street Address 2550 Albany Ave	City <b>West Hartford</b>		State CT	Zip Code <b>06117</b>		
Description Fundraiser Invites				Event # <b>05192010</b> a	i	
Is this expenditure coordinated with another candidate for Which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought	•		\$43.44

IV. EXPENDITURES									
NAME OF COMMITTEE	ZII ENDII ORES				EILE	NG DUE DATE			
Jepsen 2010					FILL	NO DOE DATE			
R. Itemization of Reimbursements to Committee Workers and Consultants									
		Date of Pa	ayment /2010	Method of Paym  X Check #	ent	Amount			
Secondary Payee US Post Office		Purpose o	of Expenditure	111 Debit Card	i				
Street Address 12 Crossroads Plz	City West Hartford		State CT	Zip Code <b>06117</b>					
Description Postage				Event #					
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	lidate(s) Name	Office	Sought	ı		\$132.00			
Name of Worker/Consultant  Page, Thompson		Date of Payment 05/18/2010		Method of Payment  X Check #		Amount			
Secondary Payee  Connecticut Liquor Outlet		Purpose o	of Expenditure	140 Debit Card	i				
Street Address <del>117 Prospect Ave</del>	City Hartford		State CT	Zip Code					
Description  Beverages				Event #					
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	lidate(s) Name	Office	Sought	1		\$42.36			
						l '			

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILIN	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburse	ements to Committee Worl	kers and	Consultants			
Name of Worker/Consultant  Page, Thompson		Date of Payment <b>05/18/2010</b>		Method of Paym  X Check #	ent	Amount
Secondary Payee  Connecticut Liquor Outlet		Purpose of Expenditu FOOD		of Expenditure Debit Care		
Street Address 117 Prospect Ave	City <b>Hartford</b>		State CT			
Description <b>Beverages</b>				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought			\$42.36
Name of Worker/Consultant		Date of Pa	avment	Method of Paym	ent	Amount
Anthony Homicki		05/19/2010		X Check #		
Secondary Payee		Purpose o	f Expenditure	112 Debit Card	ı	
Lucky Lou's Bar & Grill	1	FNDR	<u> </u>	Dean care		
Street Address  222 Main St	City <b>Wethersfield</b>		State CT	Zip Code <b>06109</b>		
Description Bill for Fundraiser				Event # <b>05192010</b> a		
Is this expenditure coordinated with another candidate for Other Candi which reimbursement is sought?	idate(s) Name	Office	Sought			
Yes						\$450.00

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILI	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburso	ements to Committee Work	ers and	Consultants			
Name of Worker/Consultant Sherwood, Philip			ayment	Method of Paym	ent	Amount
Secondary Payee		Purpose of Expenditure  OFFICE		X Debit Card	i	
Street Address  1451 New Britain Ave	City <del>West Hartford</del>		State CT	I *		
Description Office Supplies				Event #		
Is this expenditure coordinated with another candidate for Other Cand which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought			<del>\$33.91</del>
Name of Worker/Consultant Sherwood, Philip		Date of Payment <b>05/20/2010</b>		Method of Payment  X Check #		Amount
Secondary Payee Office Depot		Purpose o	of Expenditure	109 Debit Card	i	
Street Address 1451 New Britain Ave	City West Hartford		State CT	Zip Code <b>06110</b>		
Description Office Supplies				Event #		
Is this expenditure coordinated with another candidate for Other Candwhich reimbursement is sought?  Yes	idate(s) Name	Office	Sought	1		
X No						\$33.91

IV. EXPENDITURES								
NAME OF COMMITTEE					FILI	NG DUE DATE		
Jepsen 2010								
R. Itemization of Reimbu	rsements to Committee W	orkers and	Consultants					
		Date of P. 05/21	ayment /2010	Method of Paym	nent	Amount		
Secondary Payee Office Depot		Purpose o	of Expenditure	109  Debit Card	i			
Street Address  1451 New Britain Ave	City West Hartford		State CT	1 *				
Description Office Supplies				Event #				
Is this expenditure coordinated with another candidate for Which reimbursement is sought?  Yes  No	andidate(s) Name	Office	Sought	1		\$33.91		
Name of Worker/Consultant Sherwood, Philip			Date of Payment M 05/21/2010		nent	Amount		
Secondary Payee Office Depot		Purpose o	of Expenditure	X Debit Card	i			
Street Address  1451 New Britain Ave	City <del>West Hartford</del>		State CT	Zip Code <del>06110</del>				
Description Office Supplies				Event #				
Is this expenditure coordinated with another candidate for Which reimbursement is sought?  Yes	andidate(s) Name	Office	Sought			•		
X No						<del>\$33.91</del>		

IV. EXPENDITURES								
NAME OF COMMITTEE					FILI	NG DUE DATE		
Jepsen 2010								
R. Itemization of Reimburs	ements to Committee Work	ers and	Consultants					
		Date of P	ayment	Method of Paym	ent	Amount		
Secondary Payee Fedex Kinko's			of Expenditure	110 Debit Card	i			
Street Address 544 Farmington Ave	City Hartford	•	State CT	Zip Code <b>06105</b>				
Description Photocopies				Event #				
which reimbursement is sought?	lidate(s) Name	Office	Sought					
Yes  X No						\$73.14		
Name of Worker/Consultant		Date of P	ayment	Method of Paym	ent	Amount		
Clemency, Kevin		05/25/	05/25/2010					
Secondary Payee Fedex Kinko's		Purpose o	of Expenditure	X Debit Card	i			
Street Address  544 Farmington Ave	City Hartford	•	State	Zip Code <del>06105</del>				
Description			1	Event #		•		
Photocopies								
	lidate(s) Name	Office	Sought	1				
which reimbursement is sought?  Yes								
X No						<del>\$73.14</del>		

		W. DVDDVDVDVG									
IV.	EXPENDITURES										
NAME OF COMMITTEE					FILI	NG DUE DATE					
Jepsen 2010											
R. Itemization of Reimbur	sements to Committee Work	ers and	Consultants								
Name of Worker/Consultant		Date of P	ayment	Method of Paym	ent	Amount					
Paychex, Inc.		<del>05/27</del>	<del>//2010</del>	Check #							
Secondary Payee		Purpose o	of Expenditure	X Debit Card							
Kevin Clemency	_	WAGE		A Debit Card	1						
Street Address <del>231 Dogwood Ln</del>	City Manhasset	State NY		Zip Code 11030-164	l <del>2</del>						
Description Wages through 5/20				Event #							
wages through 3/20											
Is this expenditure coordinated with another candidate for Other Can	didate(s) Name	Office	Sought								
which reimbursement is sought? Yes											
× No						<del>\$1,545.09</del>					
Name of Worker/Consultant		Date of Payment Method of Payment			ent	Amount					
<del>Paychex, Inc.</del>		<del>05/27</del>	<del>//2010</del>	Check #							
Secondary Payee		Purpose o	urpose of Expenditure								
Patrick Shortell	_	WAGE		X Debit Card	1						
Street Address	City		State	Zip Code							
17 Foxeroft Rd  Description	West Hartford		CŦ	06119							
Wages through 5/20				Event #							
Is this expenditure coordinated with another candidate for Other Can which reimbursement is sought?	didate(s) Name	Office	Sought								
Yes											
× No						<del>\$444.95</del>					

IV. E	XPENDITURES						
NAME OF COMMITTEE					FILIN	NG DUE DATE	
Jepsen 2010							
R. Itemization of Reimburse	ements to Committee Work	ers and	Consultants				
Name of Worker/Consultant  Krize, Anthony		Date of Pa		Method of Paym	ent	Amount	
Secondary Payee  Zody's 19th Hole			f Expenditure	X Debit Caro	I		
Street Address 451 Stillwater Ave	City Stamford		State CT	Zip Code <del>06902</del>			
Is this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sought							
which reimbursement is sought?  Yes  No						<del>\$421.00-</del>	
Name of Worker/Consultant  Krize, Anthony		Date of Payment <b>06/09/2010</b>		Method of Payment  X Check #		Amount	
Secondary Payee  Zody's 19th Hole		Purpose o	f Expenditure	107 Debit Card	I		
Street Address 451 Stillwater Ave	City Stamford		State CT	Zip Code <b>06902</b>			
Description				Event # <b>06092010</b> a			
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought	•		\$421.00	

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILIN	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburse	ements to Committee Work	xers and	Consultants			
Name of Worker/Consultant  Jepsen, George		Date of Pa	-	Method of Paym Check #	ent	Amount
Secondary Payee <del>Tiago's Restaurant &amp; Bar</del>		Purpose o	f Expenditure	X Debit Card	l	
Street Address <del>211 State St</del>	City <del>Bridgeport</del>		State	Zip Code <del>06604</del>		
Description Food and Beverages				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	date(s) Name	Office	Sought	•		<del>\$315.86-</del>
Name of Worker/Consultant  Jepsen, George		Date of Pa		Method of Paym  X Check #	ent	Amount
Secondary Payee Tiago's Restaurant & Bar		Purpose o	f Expenditure	119 Debit Card	l	
Street Address 211 State St	City Bridgeport	111111	State CT	Zip Code <b>06604</b>		
Description Food and Beverages	Diagoport			Event # <b>06162010</b> a	1	
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	date(s) Name	Office	Sought	1		\$315.86

IV	. EXPENDITURES					
NAME OF COMMITTEE					FILIN	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimb	ursements to Committee Wo	orkers and	Consultants		•	
Shortell, Patrick 06/21/2010			06/21/2010 X Check #		nent	Amount
Secondary Payee  Lox Stock & Bagel		Purpose o	of Expenditure	118 Debit Card	i	
Street Address 332 N Main St	City West Hartford		State CT	Zip Code <b>06117</b>		
Description Food and Beverages  Event 062					a	
Is this expenditure coordinated with another candidate for Which reimbursement is sought?  Yes  No	Candidate(s) Name	Office	Sought			\$64.74
Name of Worker/Consultant Kevin Clemency		Date of P. <b>06/21</b>	ayment /2010	Method of Paym	nent	Amount
Secondary Payee Staples		Purpose o	of Expenditure	132 Debit Card	i	
Street Address 2550 Albany Ave	City <b>West Hartford</b>		State CT	Zip Code <b>06117</b>		
Description Office Supplies				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	Candidate(s) Name	Office	Sought	1		
X No						\$38.11

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILIN	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburse	ements to Committee Work	ers and	Consultants			
Name of Worker/Consultant  Shortell, Patrick		Date of Pa		Method of Paym	ent	Amount
Secondary Payee  Lox Stock & Bagel			f Expenditure	X Debit Card	i	
Street Address <del>332 N Main St</del>	City <del>West Hartford</del>		State CT	Zip Code <del>06117</del>		
Description Food and Beverages				Event #		
Is this expenditure coordinated with another candidate for Which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought			\$ <del>64.74</del>
Name of Worker/Consultant  Clemency, Kevin		Date of Pa		Method of Paym	ent	Amount
Secondary Payee Fedex Kinko's		Purpose o	f Expenditure	X Debit Card	i	
Street Address 544 Farmington Ave	City <del>Hartford</del>		State CT	Zip Code		
Description  Photocopics				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	idate(s) Name	Office	Sought			AEE.GE.

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILI	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburs	ements to Committee Work	ers and	Consultants			
Name of Worker/Consultant		Date of Pa	ayment	Method of Paym	ent	Amount
Clemency, Kevin		06/23	/2010	X Check #		
Secondary Payee		Purpose o	of Expenditure	117		
Fedex Kinko's		Misc *	•	Debit Card	1	
Street Address	City		State	Zip Code		
Description	Hartford		СТ	06105		
Photocopies				Event #		
	idate(s) Name	Office	Sought	Ţ		•
which reimbursement is sought?  Yes						
X No						\$55.65
Name of Worker/Consultant		Date of Pa	ayment	Method of Paym	ent	Amount
Paychex, Inc.		06/25	/2010	Check #		
Secondary Payee		Purpose o	of Expenditure	1		
Kevin Clemency		WAGE		X Debit Card	i	
Street Address	City		State	Zip Code		
231 Dogwood Ln	Manhasset		NY	11030		•
Description Wages				Event #		
Is this expenditure coordinated with another candidate for Other Cand	idate(s) Name	Office	Sought			
which reimbursement is sought?		Since	35			
Yes  No						\$1,419.39
L						

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILIN	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburse	ements to Committee Work	cers and	Consultants			
Name of Worker/Consultant  Paychex, Inc.		Date of Pa		Method of Paym Check #	ent	Amount
Secondary Payee Purpose of Expenditure WAGE					l	
Street Address 406 Cutlers Farm Rd	City Monroe		State CT	Zip Code <b>06468</b>		
Description  Wages				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought			\$736.45
Name of Worker/Consultant  Paychex, Inc.		Date of Pa	•	Method of Paym Check #	ent	Amount
Secondary Payee  Daniel Mingrone		Purpose of WAGE	f Expenditure	X Debit Card	l	
Street Address 91 Elm St Apt 222A	City Manchester		State CT	Zip Code <b>06040</b>		
Description  Wages  Lethic ground three conditions desirble and her conditions for the Conditions of t	idato(s) Nomo	Office	Canalit	Event #		
Is this expenditure coordinated with another candidate for Which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought			\$461.75

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILIN	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburs	ements to Committee Work	ers and	Consultants			
				Method of Paym	ent	Amount
Paychex, Inc.		06/25	/2010	Check #		
Secondary Payee  Daniel Mingrone		Purpose o	f Expenditure	X Debit Card	I	
Street Address 91 Elm St Apt 222A	City Manchester		State CT	Zip Code <b>06040</b>		
Description	•		!	Event #		•
Wages						
						•
Is this expenditure coordinated with another candidate for Other Candwhich reimbursement is sought?  Yes	idate(s) Name	Office	Sought			
X No						\$845.03
Name of Worker/Consultant		Date of Pa	ayment	Method of Paym	ent	Amount
Paychex		06/25	/2010	Check #		
Secondary Payee		Purpose o	f Expenditure	1		
Patrick Shortell		WAGE		X Debit Card	l	
Street Address 17 Foxcroft Rd	City <b>West Hartford</b>		State CT	Zip Code <b>06119</b>		
Description	•		•	Event #		
Wages						
Latin market and the state of t	: d-4-(-) N	Office	Carralet			•
which reimbursement is sought?	idate(s) Name	Office	Sought			
Yes  X No						\$846.57

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILIN	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburse	ements to Committee Wor	kers and	Consultants			
Name of Worker/Consultant  Kevin Clemency		Date of Pa		Method of Paym	ent	Amount
Secondary Payee Purpose of Expenditure  Staples OFFICE			132 Debit Card	l		
Street Address 2550 Albany Ave	City West Hartford		State CT	Zip Code <b>06117</b>		
Description Office Supplies				Event #		
						i
Is this expenditure coordinated with another candidate for Other Candi which reimbursement is sought?  Yes	date(s) Name	Office	Sought			
X No						\$40.04
Name of Worker/Consultant		Date of Pa	ayment	Method of Paym	ent	Amount
Prospect Ventures, LLC		07/07/	2010	X Check #		
Secondary Payee CNGS		Purpose of OVHD	f Expenditure	131 Debit Card	l	
Street Address  1 First St	City Hartford		State CT	Zip Code 06103		
Description Gas Utility Bill (Reimbursed to Prospect Ventures, LLC)	ı		<u>.</u>	Event #		
gas office bill (Reinbursed to Prospect ventures, ELC)						
Is this expenditure coordinated with another candidate for Other Candi which reimbursement is sought?	idate(s) Name	Office	Sought			
Yes						\$107.99

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILI	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburs	ements to Committee Work	ers and	Consultants			
Name of Worker/Consultant Bye, Elizabeth Secondary Payee Whole Foods Market		Date of P 07/07/ Purpose of		Method of Paym  X Check #  128  Debit Card		Amount
Street Address 340 N Main St	City West Hartford	1	State CT	Zip Code 06117		
Description Food for Fundraiser (Reimbursed to Elizabeth Bye)				Event # 06212010a		
Is this expenditure coordinated with another candidate for Other Cand which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought			\$68.14
Name of Worker/Consultant Kindall, Clare		Date of P		Method of Paym	ent	Amount
Secondary Payee BJ's		Purpose of	of Expenditure	127 Debit Card		
Street Address 507 New Park Ave	City West Hartford		State CT	Zip Code 06110		
Description Candy for July 4th Parades (Reimbursed to Clare Kindall)				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	idate(s) Name	Office	Sought			\$60.78

W. F	Whenheine					
IV. E	EXPENDITURES				ı	
NAME OF COMMITTEE					FILI	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburs	ements to Committee Work	ers and	Consultants			
Name of Worker/Consultant		Date of Pa	ayment	Method of Paym	ent	Amount
Paychex, Inc.		07/09/	2010	Check #		
Secondary Payee Kevin Clemency		Purpose o	of Expenditure	X Debit Card	i	
Street Address 231 Dogwood Ln	City Manhasset	WAGE	State NY	Zip Code 11030-1642	)	
Description Wages	Hamilasset		1	Event #	-	
which reimbursement is sought?  Yes	idate(s) Name	Office	Sought	1		\$1,545.09
No		1		1		\$1,545.05
Name of Worker/Consultant Paychex, Inc.		Date of Pa		Method of Paym Check #	ent	Amount
				-		
Secondary Payee Anthony Krize		Purpose o	of Expenditure	X Debit Card	i	
Street Address 406 Cutlers Farm Rd	City Monroe		State CT	Zip Code 06468		•
Description	Nomoc		T C 1	Event #		
Wages				Event "		
						•
Is this expenditure coordinated with another candidate for Which reimbursement is sought?	idate(s) Name	Office	Sought			
Yes No						\$845.03

IV. E	XPENDITURES					
NAME OF COMMITTEE					FILI	NG DUE DATE
Jepsen 2010						
R. Itemization of Reimburso	ements to Committee Work	ers and	Consultants			
Name of Worker/Consultant		Date of P	ayment	Method of Paym	ent	Amount
Paychex, Inc.		07/09/	2010	Check #		
Secondary Payee Daniel Mingrone		Purpose o	of Expenditure	X Debit Card	I	
		WAGE		1		
Street Address 91 Elm St Apt 222A	City Manchester		State CT	Zip Code 06040		
Description Wages			-	Event #		
wages						
Is this expenditure coordinated with another candidate for Other Cand	idate(s) Name	Office	Sought			•
which reimbursement is sought?						
X No						\$845.03
Name of Worker/Consultant		Date of P	ayment	Method of Paym	ent	Amount
Paychex, Inc.		07/09/	2010	Check #		
Secondary Payee		Purpose o	of Expenditure	X Debit Card		
Patrick Shortell		WAGE		X Debit Card	1	
Street Address	City		State CT	Zip Code 06119		
17 Foxcroft Rd  Description	West Hartford		CI			
Wages				Event #		
	idate(s) Name	Office	Sought			•
which reimbursement is sought?  Yes						
X No						\$846.57
				Total of Se	ection R	\$10,392.33

IV. EXPE	ENDITURES				
NAME OF COMMITTEE				FII	LING DUE DATE
Jepsen 2010					
S. Surplus Distril	bution of Equipment and Furniture				
Name of Recipient					Original Purchase Amount of Item
Street Address	City	State	Zip Code		
Description					
			Total of Section	on S	