## **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 192

## **SUMMARY PAGE**

1.NAME OF COMMITTEE							2. TYPI	E OF COMMITTEE			
Friends Of Gerry Garcia	a						x	Candidate Committee Exploratory Committee			
3. TREASURER NAME											
Title	First Ronald			MI <b>M.</b>	Last Petronella			Suffix			
4. TREASURER ADDRESS											
Street Address  868 Monroe Tpke			City <b>Monro</b>	oe .		State CT		Zip Code 06468			
5. ELECTION DATE			7. DISTRI	CT CODE (if applicable)							
11/02/2010											
8. CANDIDATE NAME						•					
Title First MI Last Garcia Suffix											
9. TYPE OF REPORT											
Itemized Statement accompanying application for Public Grant - Amendment											
10. PERIOD COVERED											
		Beginning Date			Ending Date						
		07/01/2010	thru	1	07/15/2010						
			11 CED	TIFICATION							
			II. CEN	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 <b>Itemized Campaign Finance Disclosure Statement</b> for the period covered is true, accurate and complete.										
Electronic Filing		Ronald Petronella			07/21	1/2010					
SIGNATURE		PRINT NAME OF THE	E SIGNE	ER	DATE	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	
Friends Of Gerry Garcia		
	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	\$13,104.71	
14. Contributions received from Individuals (Section A and B)	\$52,785.00	\$83,604.00
15. Receipts from Other Committees (Sections C1 + C2)	\$0.00	\$0.00
16. Other Monetary Receipts (Section D-I)	\$0.00	\$0.00
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)	\$52,785.00	\$83,604.00
19. Subtotals (add totals in line 13 + line 18 in Column A and in lines 12 + 18 in Column B)	\$65,889.71	\$83,604.00
20. Expenses Paid by Committee (Section N)	\$4,632.44	\$22,346.73
21. Balance on hand at close of Reporting Period (Subtract line 20 from line 19)	\$61,257.27	\$61,257.27
22. In-Kind Donations not Considered Contributions Received (Section J3)	\$0.00	\$0.00
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)	\$0.00	\$0.00
26. Beginning Loan Balance	\$0.00	\$0.00
26a. + Loans Received (Section D)	\$0.00	\$0.00
26b. + Interest and Penalties on Loan(s)	\$0.00	\$0.00
26c Payments on Loan(s)	\$0.00	\$0.00
26d. Total Outstanding Loan Amount	\$0.00	\$0.00
27. Campaign Expenses Paid By Candidate (Section O)	\$0.00	\$6,450.94
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)	\$9,911.06	

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Friends Of Gerry Garcia									
A. Total Contributions from	m Small (	Contributors-Received th	is Perio	d ONLY	7				
(See instructions for definition of Small					total Section A	\$0.00			
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name	First Name		MI		contribution:		Contribution	ID#	Amount of
Vargas	Edwin			Cash Money	=	al Check Debit Card	0563		Contribution
Residential Street Address	•	City		State	Zip Code	D	ate Received		
141 Douglas St		Hartford		СТ	06114	0	7/01/2010		
Principal Occupation		Name of Employer			Is this contribution assi fundraising event listed 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?	Aggre	egate Contribution	ons 00.00	\$100.00
Last Name	First Name		MI	Method of	contribution:		Contribution	ID#	Amount of
Nunez	Paul			Cash Money	=	al Check Debit Card	0612		Contribution
Residential Street Address	1	City		State	Zip Code		ate Received		
7 Chatham St		New Haven		CT	06513		7/01/2010		
Principal Occupation		Name of Employer			Is this contribution asse	ociated with	а П	Yes	
Policy Analyst		State of CT			fundraising event listed If yes, list Event #	l in Section I			
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contributi	ons	, 
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative	1 <sup>-</sup>	child of a lob	•		-	10.00	\$40.00
Last Name	First Name		MI	Method of	contribution:		Contribution	ID#	Amount of
Nunez	Gregory			Cash Money	=	al Check Debit Card	0489		Contribution
Residential Street Address		City		State	Zip Code	D	ate Received		
6 Federal Rd		Danbury		СТ	06810	0	7/01/2010		
Principal Occupation		Name of Employer			Is this contribution ass			Yes	
barber		Elian's Barber Shop			fundraising event listed If yes, list Event #	l in Section .	J1?		
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contributi	ons	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative	1 1	child of a lob	•		-	00.00	\$100.00
Last Name	First Name		MI	Method of	contribution:		Contribution	ID#	Amount of
Pyles	Pia			Cash Money	=	al Check Debit Card	0816		Contribution
Residential Street Address	•	City		State	Zip Code	D	ate Received		
316 Norton St		New Haven		СТ	06511	0	7/01/2010		
Principal Occupation		Name of Employer			Is this contribution ass			Yes	
attorney		State of Ct			fundraising event listed If yes, list Event #	I in Section .	J1?		
Is contributor a principal of a state contractor	or prospective	Yes X No	In "	uton c 1-11 .	·	1.			
state contractor?	or prospective	Yes X No		utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$5	ons 50.00	\$50.00
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		res x	No		Ψ-		¥30.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE								FILING	G DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contributi	ions from	Individu	ıals				
Last Name	First Name		MI	Method of	contribution:		Contributio	on ID#	Amount of
Newton	David			Cash Money	Personal Ch x Credit/Debi		0539		Contribution
Residential Street Address		City		State	Zip Code	Da	ate Received		
428 Humphrey St		New Haven		СТ	06511	07	7/01/2010	)	
Principal Occupation  Real Estate consulting		Name of Employer Elm Advisors, LLC			Is this contribution associate fundraising event listed in the second of the second second in the second se		1?	Yes No	
			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?	Aggreg	gate Contribu \$1	tions .00.00	\$100.00
Last Name	First Name		MI	Method of	contribution:		Contributio	on ID#	Amount of
Kaye	Joel			Cash Money	Personal Ch y Order X Credit/Debi		0538		Contribution
Residential Street Address		City		State	Zip Code		ate Received		
87 Hillcrest Park Rd		Old Greenwich		СТ	06870		7/01/2010	) -	•
Principal Occupation  Lawyer		Name of Employer Self			Is this contribution associate fundraising event listed in the state of the state o		1?	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  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribu	tions 50.00	\$50.00
government the contract is with:  Last Name	First Name	Legislative	Т <sub>МІ</sub>		contribution:			TD //	
Rivas	Aneudhy		IVII	Cash	y Order Personal Ch Credit/Debi		Contribution 0486	on ID#	Amount of Contribution
Residential Street Address		City		State	Zip Code	Da	ate Received		
78 Merrimac St # 1		Danbury		СТ	06810	07	7/01/2010	)	
Principal Occupation barber		Name of Employer Elian's barber Shop			Is this contribution associated fundraising event listed in State of the 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	or prospective		dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribu \$1	tions .00.00	\$100.00
government the contract is with:		Executive Legislative	+ -	res X			1		
Last Name Nunez	First Name Gustavo		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contribution 0487	on ID #	Amount of Contribution
Residential Street Address	ı	City	1	State	Zip Code	$\neg \Gamma$	ate Received		
32 Fairfield Rdg		Danbury		СТ	06810	07	7/01/2010	)	
Principal Occupation		Name of Employer none		•	Is this contribution associate fundraising event listed in the second se		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	byist?	Aggreg	gate Contribu \$1	tions .00.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							1	FILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contributi	ions from	ı Individu	ıals				
Last Name	First Name		MI		contribution:		Contribution	ID#	Amount of
Dominguez-Rivas	Carlos		J	Cash Money	y Order Personal Ch Credit/Debi		0488		Contribution
Residential Street Address		City		State	Zip Code		e Received		
29 Newtown Rd		Danbury		СТ	06810  Is this contribution associated the contribution associated associated the contribution associated the contribution associated the contribution associated the contribution associated associated the contribution associated a		/01/2010		
Principal Occupation barber		Name of Employer Elian's Barber shop			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	te Contributio	ons 0.00	\$100.00
Last Name Stone	First Name louis		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck	Contribution 0499	ID#	Amount of Contribution
Residential Street Address 580 Ellsworth Ave	<u> </u>	City New Haven	1	State CT	Zip Code 06511	Date	e Received /01/2010		
Principal Occupation contractor		Name of Employer Chapel Construction		<b>I</b>	Is this contribution associate 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	utor a lobbyis t child of a lob Yes	byist?	Aggrega	ste Contribution	ons 0.00	\$100.00
Last Name Rodriguez	First Name Ricardo		MI R	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck	Contribution 0479	ID#	Amount of Contribution
Residential Street Address 79 N Airline Rd	•	City Wallingford	•	State CT	Zip Code 06492		e Received /01/2010		
Principal Occupation police supervisor		Name of Employer city of new haven		•	Is this contribution associate fundraising event listed in the second of the second second in the second se			Yes No	
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which 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 Robert	First Name Szponda		MI	x Cash	contribution:  Personal Ch y Order  Credit/Debi	neck	Contribution 0756	ID#	Amount of Contribution
Residential Street Address 1156 Townsend Ave		City New Haven		State CT	Zip Code 06512		e Received /01/2010		
Principal Occupation		Name of Employer unemployed		•	Is this contribution associate fundraising event listed in the second of the second second in the second se		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?	Aggrega	ite Contributio	ons 0.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FII	LING DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name Clark	First Name Robert		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 05	ontribution ID	# Amount of Contribution
Residential Street Address 40 Golf Brook Ln		City Rocky Hill		State CT	Zip Code 06067		Received 2/2010	
Principal Occupation Funeral Director		Name of Employer  De Leon Funeral Home			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	Contributions \$100.0	\$100.00
Last Name Schaefer	First Name David		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 05	ontribution ID	# Amount of Contribution
Residential Street Address 39 Broadfield Rd		City Hamden		State CT	Zip Code 06517		Received 2/2010	
Principal Occupation Attorney		Name of Employer Brenner Saltzman & Wallmar	n LLP	•	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	Contributions \$100.0	\$100.00
Last Name Gonzalez	First Name Minnie		MI	Cash	contribution:  X Personal Characteristics of the contribution:  y Order Credit/Debi	neck 05	ontribution ID	# Amount of Contribution
Residential Street Address 97 Amity St		City Hartford		State CT	Zip Code 06106		Received 3/2010	
Principal Occupation State Rep		Name of Employer State of CT			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	Contributions \$50.0	\$50.00
Last Name Matthews	First Name Andria		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 05	ontribution ID	# Amount of Contribution
Residential Street Address 33 Lyon St # 3		City New Haven		State CT	Zip Code 06511		Received 4/2010	
Principal Occupation Freelancer		Name of Employer			Is this contribution associat 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	byist?	Aggregate	Contributions \$25.0	\$25.00

		I. MONETARY F	RECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contrib	utions fror	n Individu	ıals			
Last Name <del>Johnson</del>	First Name Angela		MI	Cash	contribution:       Personal Cl y Order    Credit/Deb	heck 049	tribution ID #	Amount of Contribution
Residential Street Address  7 Main St		City Bethel		State <del>CT</del>	Zip Code <del>06801</del>	Date Rec		
Principal Occupation		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	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Co	ontributions \$200.00	<del>\$100.00</del>
Last Name Johnson	First Name Angela		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 04	tribution ID#	Amount of Contribution
Residential Street Address  7 Main St		City  Bethel		State CT	Zip Code <b>06801</b>	Date Rec	ceived 4/2010	
Principal Occupation painter		Name of Employer retired/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	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Co	ontributions \$100.00	\$100.00
Last Name Caine	First Name Martin		MI L	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 080	tribution ID #	Amount of Contribution
Residential Street Address 282 N Main St		City Naugatuck	•	State CT	Zip Code 06770	Date Red 07/05/		
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	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Co	ontributions \$100.00	\$100.00
Last Name Dubois-Walton	First Name Karen		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 049	tribution ID#	Amount of Contribution
Residential Street Address 58 E Pearl St		City New Haven		State CT	Zip Code 06513	Date Red 07/06/		
Principal Occupation executive director		Name of Employer housing authority			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	depender	butor a lobbyis at child of a lob	byist?	Aggregate Co	ontributions \$100.00	\$100.00

		I. MC	ONETARY REC	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Iten	nized Contributio	ons from	Individu	ıals				
Last Name Bartlett	First Name Baksrhie			MI	Method of Cash  X Money	contribution: Personal C  Order Credit/De		Contribution 0491	on ID#	Amount of Contribution
Residential Street Address 14 Highview Ter		City Bethel			State CT	Zip Code 06801		Oate Received		
Principal Occupation  Vet Tech		Name of Empl bethel Vet	-		•	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	child of a lob	byist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name Caraballo	First Name Alice			MI	Cash	contribution:  X Personal ( / Order Credit/De		Contribution 0469	on ID#	Amount of Contribution
Residential Street Address 21 Eld St		City New Haven	1		State CT	Zip Code 06511		Oate Received		
Principal Occupation adminstrator		Name of Empl	loyer			Is this contribution associ fundraising event listed in If yes, list Event # 07		<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	byist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name Matthews	First Name Andria			MI D	Cash	contribution:    X   Personal C		Contribution 0464	on ID#	Amount of Contribution
Residential Street Address 33 Lyon St # 3		City New Haven			State CT	Zip Code 06511		Pate Received		
Principal Occupation free lance writer		Name of Empl self	loyer			Is this contribution associ fundraising event listed in If yes, list Event # 07	n 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  Legislative	dependent	child of a lob	byist?	Aggre	egate Contribu	ations \$75.00	\$75.00
Last Name Zupperoli	First Name Robert			MI	Method of Cash  Cash  Money	contribution: Personal C  Order Credit/De		Contribution 0530	on ID#	Amount of Contribution
Residential Street Address 15 Fleetwood Ave		City Bethel			State CT	Zip Code 06801		Pate Received		
Principal Occupation Teacher		Name of Empl Bridgeport	-			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 Contribu	utions 100.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Mayo	Patsy				Cash Money	y Order Personal C		0480		Contribution
Residential Street Address		City			State	Zip Code	Б	ate Received		
435 Stevenson Rd		New Hav	en		СТ	06515	0	7/06/201	0	
Principal Occupation		Name of Er	mployer			Is this contribution associ fundraising event listed in		1.	Yes	
reading tutor		NHBOE					062010		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	I —	child of a lob	-		\$	100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Mayo	Reginald				Cash Money	y Order		0481		Contribution
Residential Street Address		City		-	State	Zip Code	Е	ate Received		
435 Stevenson Rd		New Hav	en		СТ	06515	0	7/06/201	0	_
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		1.2	Yes	
super of schools		NHBOE					062010		No	
Is contributor a principal of a state contractor	or prospective	l	Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	†
state contractor? Is yes, indicate which branch or branches of				1 <sup>-</sup>	child of a lob	•		\$	100.00	\$100.00
government the contract is with:	<u></u>	Executive	Legislative	<del>                                     </del>				1		<u> </u>
Last Name Stevenson	First Name Edward			MI P	Method of Cash	contribution:    X   Personal C	Check	Contributi	on ID#	Amount of Contribution
						y Order Credit/Del	bit Card	0484		Commodulon
Residential Street Address		City			State	Zip Code		ate Received		
32 Sunset Hill Rd		Bethel			СТ	06801	0	7/06/201	0	<u> </u>
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in		<sub>J1?</sub> L	Yes	
editor		self				If yes, list Event #		Ŀ	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	-	Aggre	egate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative	1 m	child of a lob	-		\$	100.00	\$100.00
government the contract is with:  Last Name	First Name	Executive	Legislative	MI	1			I		<u> </u>
stevenson	janice			MI	Cash	contribution:  X Personal C	Check	Contributi 0483	on ID#	Amount of Contribution
					Mone	y Order Credit/Del	bit Card	0483		
Residential Street Address		City			State	Zip Code		Date Received		
32 Sunset Hill Rd		Bethel			СТ	06801		7/06/201	0	
Principal Occupation it consultant		Name of E	mployer research			Is this contribution associ fundraising event listed in		J1?		
ic consultant		I GII VICVV	. 5564.611			If yes, list Event #		<u>\</u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contrib	utions	
Is yes, indicate which branch or branches of		Executive	Legislative	I —	child of a lob	-		\$	100.00	\$75.00

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Ite	mized Contributi	ons fron	Individu	ıals		•		
Last Name Blanyo	First Name Charles			MI A	Cash	contribution:  X Personal C  y Order Credit/Deb		Contributio	n ID#	Amount of Contribution
Residential Street Address 197 Newhall St		City New Have	n		State CT	Zip Code 06511		ate Received 7/06/2010	l	
Principal Occupation asst coordinator		Name of Em NHBOE	ployer		•	Is this contribution association fundraising event listed in If yes, list Event # 070	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  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00
Last Name Sidhu	First Name Riya			MI	Cash	contribution:  X Personal C  y Order Credit/Deb		Contributio	n ID#	Amount of Contribution
Residential Street Address 27 Drummers Ln		City Bethel			State CT	Zip Code 06801		ate Received 7/06/2010	ı	
Principal Occupation sales		Name of Em build a be	ployer ear workshop		•	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  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribut	tions 00.00	\$100.00
Last Name Riya	First Name Sidhu			MI K	Cash	contribution:    X   Personal C		Contributio	n ID#	Amount of Contribution
Residential Street Address 27 Drummers Ln		City Bethel			State CT	Zip Code 06801		7/06/2010	l	
Principal Occupation sales		Name of Em Build A Bo	ployer ear Workshop		•	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	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut \$1	tions 00.00	\$100.00
Last Name Basilio Reyes	First Name Tomas			MI	x Cash	contribution:  Personal C y Order Credit/Deb		Contributio	n ID#	Amount of Contribution
Residential Street Address 55 Oakridge Dr # 60		City New Have	n		State CT	Zip Code 06513		7/06/2010	ı	
Principal Occupation substitute		Name of Em NHBOE	ployer			Is this contribution association fundraising event listed in If yes, list Event # 070		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	byist?	Aggre	gate Contribut \$1	tions 00.00	\$50.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILI	NG DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribut	ions fron	Individu	ıals			
Last Name Reyes	First Name Tomas		MI	Cash	contribution:    X   Personal Cl	neck 05	ntribution ID #	Amount of Contribution
Residential Street Address 55 Oakridge Dr # 60		City New Haven		State CT	Zip Code 06513	Date Re	eceived 5/2010	
Principal Occupation substitute		Name of Employer NHBOE			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 es x	byist?	Aggregate C	Contributions \$100.00	\$50.00
Last Name Drumonds	First Name Eduardo		MI	X Cash	contribution: Personal Cl	neck 04	ntribution ID #	Amount of Contribution
Residential Street Address 556 Winthrop St		City New Haven		State CT	Zip Code 06511	Date Re 07/06	eceived 5/2010	
Principal Occupation  contractor		Name of Employer self		•	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 C	Contributions \$100.00	\$100.00
Last Name Babb	First Name Carl		MI	Cash	contribution:    X   Personal Cl	neck 05	ntribution ID #	Amount of Contribution
Residential Street Address 556 Winthrop St		City New Haven		State CT	Zip Code 06511	Date Re 07/06	eceived 5/2010	
Principal Occupation administrator		Name of Employer NHBOE			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 C	Contributions \$100.00	\$100.00
Last Name Babb	First Name Karleka		MI	x Cash	contribution: Personal Cl	neck 04	ntribution ID#	Amount of Contribution
Residential Street Address 20 Elliot St		City Hamden		State CT	Zip Code 06514	Date Re 07/06	eceived 5/2010	
Principal Occupation  counselor		Name of Employer NHBOE			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 C	Contributions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Santana	First Name Rosa		MI A	Cash	contribution:    X   Personal Cl	heck 0496	ition ID#	Amount of Contribution			
Residential Street Address 39 Clifton St		City New Haven		State CT	Zip Code 06512	Date Receive 07/06/20					
Principal Occupation relationship manager		Name of Employer  New Alliance bank			Is this contribution associal 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 Contri	butions \$50.00	\$50.00			
Last Name Jarjura	First Name Michael		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0497	tion ID#	Amount of Contribution			
Residential Street Address 264 Hardwood Rd		City Waterbury		State CT	Zip Code 06706	Date Receive 07/06/20					
Principal Occupation mayor		Name of Employer city of waterbury		•	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 Contri	butions \$100.00	\$100.00			
Last Name king	First Name Laoise		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0482	tion ID#	Amount of Contribution			
Residential Street Address 390 W Rock Ave		City New Haven		State CT	Zip Code 06515	Date Receive 07/06/20					
Principal Occupation attorney		Name of Employer NHBOE			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 No  Executive Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggregate Contri	butions \$100.00	\$100.00			
Last Name Placke	First Name William		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0500	tion ID#	Amount of Contribution			
Residential Street Address 42 Harbour Close		City New Haven		State CT	Zip Code 06519	Date Receive 07/06/20					
Principal Occupation banker		Name of Employer city federal corp			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 res	byist?	Aggregate Contri	butions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name	First Name		MI	Method of	contribution:		oution ID#	Amount of		
Stokes	Bertha			Cash Money	X Personal Condit/Deb	0485		Contribution		
Residential Street Address		City		State	Zip Code	Date Recei	ved	1		
45 Ely Ave Apt 6		Norwalk		СТ	06854	07/06/2	010	1		
Principal Occupation teachers aide		Name of Employer  Naromake RFC			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	byist?	Aggregate Cont	ributions \$100.00	\$100.00		
Last Name Joseph	First Name Adam		MI	Cash	contribution:    X   Personal C	heck 0466	oution ID#	Amount of Contribution		
Residential Street Address 25 Parker Pl		City New Haven		State CT	Zip Code 06512	Date Recei 07/06/2				
Principal Occupation legislative director		Name of Employer city of new haven			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	dependent	utor a lobbyis child of a lob	byist?	Aggregate Cont	ributions \$100.00	\$100.00		
Last Name Arreola	First Name Adriana		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 0467	oution ID #	Amount of Contribution		
Residential Street Address 25 Parker Pl		City New Haven		State CT	Zip Code 06512	Date Recei 07/06/2				
Principal Occupation coordinator		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	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Cont	ributions \$50.00	\$50.00		
Last Name Pacini	First Name Leida		MI I	Cash	contribution:    X   Personal C	heck 0468	oution ID#	Amount of Contribution		
Residential Street Address 62 Angela Dr		City East Haven		State CT	Zip Code 06512	Date Recei 07/06/2				
Principal Occupation		Name of Employer new haven public schools		CI	Is this contribution associa fundraising event listed in If yes, list Event # 070	ited with a 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 Cont	ributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Itemized Co	ntributio	ns from	Individu	ıals				
Last Name Wells	First Name Gina			MI	Cash	contribution:  X Personal y Order Credit/De		Contribution 0470	on ID#	Amount of Contribution
Residential Street Address 6 Marion Ct		City North Haven			State CT	Zip Code 06473		ate Received 7/06/2010		
Principal Occupation administrator		Name of Employer NHBOE				Is this contribution assoc fundraising event listed i If yes, list Event # 07		1? C	Yes No	
Is contributor 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	X No	dependent	ntor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	ntions	\$100.00
Last Name Dugas	First Name George			MI O	Cash	contribution:  X Personal y Order Credit/De		Contribution 0471	on ID#	Amount of Contribution
Residential Street Address 107 Ashland Ave		City Stratford			State CT	Zip Code 06615		ate Received 7/06/2010	0	
Principal Occupation		Name of Employer retired				Is this contribution assoc fundraising event listed in If yes, list Event # 07	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 Legislati	X No	dependent	ator a lobbyis child of a lob es	byist?	Aggre	gate Contribu	itions	\$100.00
Last Name Speese-Linehan	First Name Deborah			MI	Cash	contribution:  X Personal y Order Credit/De		Contribution 0472	on ID#	Amount of Contribution
Residential Street Address 88 Cold Spring St		City New Haven			State CT	Zip Code 06511		ate Received 7/06/2010		
Principal Occupation education super		Name of Employer NHBOE				Is this contribution assoc fundraising event listed in If yes, list Event # 07	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 Legislati	X No	dependent	ntor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	utions	\$100.00
Last Name Schede	First Name Cheryl			MI L	Cash	contribution:  X Personal  y Order Credit/De		Contribution 0473	on ID#	Amount of Contribution
Residential Street Address 95 Sumac St		City West Haven			State CT	Zip Code 06516		ate Received 7/06/2010		
Principal Occupation		Name of Employer unemployed				Is this contribution assoc fundraising event listed i If yes, list Event # 07	n Section J	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 Executive Legislati	X No	dependent	ator a lobbyis child of a lob es	byist?	Aggre	gate Contribu	itions	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ons from	Individ	uals				
Last Name Harrison	First Name Michael			MI	Cash	contribution:  X Personal of the property of t		Contributi 0474	on ID#	Amount of Contribution
Residential Street Address 39 Coram Ct		City Milford			State CT	Zip Code 06461		ate Received 7/06/201		
Principal Occupation  locksmith		Name of E self	mployer			Is this contribution assoc fundraising event listed in If yes, list Event # 07		1? 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		Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Zukowski	First Name Chester			MI	Cash	contribution:  X Personal of the property of t		Contributi 0475	on ID#	Amount of Contribution
Residential Street Address 11 Seneca Rd		City Shelton			State CT	Zip Code 06484		ate Received 7/06/201		
Principal Occupation security		Name of E self	mployer			Is this contribution assoc fundraising event listed in If yes, list Event # 07	n Section J	1? 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 es	-	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Vinales	First Name Jose			MI	Cash	contribution:  X Personal ( y Order Credit/De		Contributi 0476	on ID#	Amount of Contribution
Residential Street Address 46 Post St		City Bridgepo	ort		State CT	Zip Code 06610	1	ate Received 7/06/201		
Principal Occupation  carpenter		Name of E self	mployer			Is this contribution assoc fundraising event listed in If yes, list Event # 07	n Section J	1? 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		Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Johnsky	First Name Kim			МІ	Cash	contribution:  X Personal of the property of t		Contributi 0478	on ID#	Amount of Contribution
Residential Street Address 484 Sportsman Rd		City Orange			State CT	Zip Code 06477		ate Received		
Principal Occupation principal		Name of E NHBOE	mployer	_		Is this contribution assoc fundraising event listed in If yes, list Event # 07	n Section J	1? 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	-	Aggre	gate Contrib	utions 100.00	\$100.00

		I. MONETAF	RY RECE	EIPTS	(Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Itemized Cor	tributions	s from	Individu	als				
Last Name Massaro	First Name Michelle		М	1I	Method of c	contribution:    X   Personal C		Contribution 0521	ID#	Amount of Contribution
Residential Street Address 30 Mansfield Dr Unit 704		City Northford			State CT	Zip Code 06472		7/06/2010		
Principal Occupation Office Manager		Name of Employer Enterprise Plumbing	& Heating			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 2  Executive Legislativ	de		tor a lobbyist child of a lobl	byist?	Aggre	gate Contributio	ons 00.00	\$100.00
Last Name Cordova	First Name Celestino		М	1I	Method of c Cash Money	contribution:    X   Personal C		Contribution 0465	ID#	Amount of Contribution
Residential Street Address 25 Salstonstall Ave Apt 505		City New Haven			State CT	Zip Code 06513		ate Received 7/06/2010		
Principal Occupation Program Coordinator		Name of Employer  South Central Agence	on Aging	•		Is this contribution associ- fundraising event listed in If yes, list Event # 070				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes Y	de		tor a lobbyist	byist?	Aggre	gate Contributio	ons 90.00	\$65.00
Last Name Cabrera Jr	First Name Jorge		M	1I	Method of c	contribution: Personal C		Contribution 0542	ID#	Amount of Contribution
Residential Street Address 28 Longmeadow Ave .		City Hamden	·		State CT	Zip Code 06514		7/06/2010		
Principal Occupation  consultant		Name of Employer self-employed				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 2  Executive Legislativ	de		tor a lobbyist child of a lobl	byist?	Aggre	gate Contributio	ons 00.00	\$100.00
Last Name Fonda	First Name Louis		М	1I	Method of c Cash Money	contribution:    X   Personal C		Contribution 0522	ID#	Amount of Contribution
Residential Street Address 64 Lanes Pond Rd		City Northford			State CT	Zip Code 06472		7/06/2010		
Principal Occupation Project Manager		Name of Employer Enterprise		•		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 Yes Legislativ	de		tor a lobbyist	byist?	Aggre	gate Contributio	ons 00.00	\$100.00

		I. MC	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Iten	nized Contribution	ons from	Individu	ıals		•		
Last Name Defelice	First Name Salvatore			MI	Cash	contribution:  X Personal C  y Order Credit/De		Contributio	n ID#	Amount of Contribution
Residential Street Address 52 Yowago Ave		City Branford			State CT	Zip Code 06405		ate Received 7/06/2010	١	
Principal Occupation Contractor		Name of Empl Enterprise	<sub>loyer</sub> Plumbing & Heatin	g	-	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 Contribut \$1	tions 00.00	\$100.00
Last Name Vogt	First Name Susan			MI L	Cash	contribution:  X Personal C  y Order Credit/De		Contributio	n ID#	Amount of Contribution
Residential Street Address 28 Pelham La		City New Haven	ı		State CT	Zip Code 06511		ate Received 7/06/2010	)	
Principal Occupation  Bus. Manager		Name of Empl	-		•	Is this contribution associ fundraising event listed in If yes, list Event # 07		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 res	byist?	Aggre	gate Contribut	tions 00.00	\$80.00
Last Name Mannarino	First Name Tina			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributio	n ID#	Amount of Contribution
Residential Street Address 41 Crescent Bluff Ave		City Branford			State CT	Zip Code 06405		ate Received 7/06/2010	١	
Principal Occupation School Administrator		Name of Empl New Haver	loyer n Public School			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  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribut \$1	tions 00.00	\$100.00
Last Name Warmoth	First Name Majula			MI	Cash	contribution:  X Personal C  y Order Credit/De		Contributio	n ID#	Amount of Contribution
Residential Street Address  100 Hemlock Rd # 1-2		City Branford			State CT	Zip Code 06405		ate Received 7/06/2010	1	
Principal Occupation Student/Housewife		Name of Empl None	loyer			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 Contribut \$1	tions 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contri	outions fro	m Individ	uals					
Last Name Durant	First Name Verlene		MI	Cash	contribution:  X Personal C y Order Credit/Det	heck 0684	ition ID#	Amount of Contribution		
Residential Street Address  2 Mansfield Grove Rd # 167	1	City East Haven		State CT	Zip Code 06512	Date Receive 07/06/20				
Principal Occupation		Name of Employer		•	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		ributor a lobbyis ent child of a lob Yes	obyist?	Aggregate Contri	butions \$100.00	\$100.00		
Last Name Durant	First Name Sheila		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0685	ition ID#	Amount of Contribution		
Residential Street Address  2 Mansfield Grove Rd # 273		City East Haven		State CT	Zip Code 06512	Date Receive 07/06/20				
Principal Occupation Teacher		Name of Employer Retired		•	Is this contribution association 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		ributor a lobbyis ent child of a lob Yes	-	Aggregate Contri	butions \$100.00	\$100.00		
Last Name Warner	First Name Regina		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0687	tion ID#	Amount of Contribution		
Residential Street Address 311 Mansfield Rd		City North Haven		State CT	Zip Code 06473	Date Receive 07/06/20				
Principal Occupation Retired		Name of Employer Retired		•	Is this contribution association 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	Is cont depend	ributor a lobbyis ent child of a lob Yes		Aggregate Contri	butions \$100.00	\$100.00		
Last Name Warner	First Name Charles		MI	Cash	contribution:    X   Personal C y Order	heck 0689	tion ID#	Amount of Contribution		
Residential Street Address 311 Mansfield Rd		City North Haven		State CT	Zip Code 06473	Date Receive 07/06/20				
Principal Occupation Retired		Name of Employer Retired		•	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. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Item	ized Contributio	ons from	Individu	ıals				
Last Name Chatham	First Name Cary			MI	Method of Cash  X Money	contribution: Personal		Contributi 0690	on ID#	Amount of Contribution
Residential Street Address 34 McVenna Dr		City Middletown			State CT	Zip Code 06457		Date Received 07/06/201		
Principal Occupation		Name of Emplo	oyer			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	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Osborne	First Name Eleanor			MI	Cash	contribution:  X Personal of the Credit/December Credit/December 2		Contributi 0691	on ID#	Amount of Contribution
Residential Street Address 357 Mansfield Grove Rd		City East Haven			State CT	Zip Code 06512		Oate Received		
Principal Occupation Retired		Name of Emplo	oyer		•	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	_	Yes X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Osborne	First Name Renee			MI	Cash	contribution: Personal of Credit/De		Contributi 0686	on ID#	Amount of Contribution
Residential Street Address 321 Blake Cir		City Hamden			State CT	Zip Code 06517		Date Received		
Principal Occupation Education Grants Coordinator		Name of Emplo	<sub>oyer</sub> I Sacred Heart Uni	versity		Is this contribution assoc fundraising event listed i 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	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribi	utions 100.00	\$100.00
Last Name Detkin Kikoler	First Name Barbara			MI	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 10 Charles W Briggs Rd		City Croton On H	ludson		State NY	Zip Code 10520		Date Received		
Principal Occupation Attorney		Name of Emplo	<sup>oyer</sup> valuation Services		•	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	byist?	Aggre	egate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ons from	Individ	uals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Pack	Fred				Cash Mone	y Order X Personal C		0676		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
11 Long Ridge Ln		Ipswich			MA	01938	0	7/07/201	0	
Principal Occupation		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	-	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Pack	First Name Gladys			MI	Cash	contribution:  X Personal C y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
11 Long Ridge Ln		Ipswich			MA	01938	0	7/07/201	0	1
Principal Occupation		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	-	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Friedman	Irving				Cash Mone	y Order X Personal C		0678		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
151 Pembroke St		Brooklyn	l 		NY	11235	0	7/07/201	0	<u> </u>
Principal Occupation Attorney		Name of E				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	gate Contrib	utions 100.00	\$100.00
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
Rosales-Friedman	Elaine				Cash Mone	y Order		0680		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		1
151 Pembroke St		Brooklyn	1		NY	11235	0	7/07/201	0	_
Principal Occupation Education Consultant		Name of E	mployer n Education Solutions	s, Inc		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	-	Aggre	gate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Iten	nized Contributio	ons from	Individu	ıals				
Last Name Rosales-Friedman	First Name Daniella			MI	Cash	contribution:  X Personal of the property of t		Contributi 0679	on ID#	Amount of Contribution
Residential Street Address 115 Van Brunt St		City Brooklyn			State NY	Zip Code 11231		7/07/201		
Principal Occupation Yoga Teacher		Name of Emplo	-			Is this contribution assoc 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 x	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Defelice	First Name Patricia			MI	Cash	contribution:  X Personal of the description of the		Contributi 0519	on ID#	Amount of Contribution
Residential Street Address 52 Yowago Ave		City Branford			State CT	Zip Code 06405		ate Received		
Principal Occupation		Name of Emp	loyer			Is this contribution assoc 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  Legislative	dependent	utor a lobbyis child of a lob es	bbyist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Muller	First Name David			MI	Cash	contribution: Personal ( y Order X Credit/De		Contributi 0546	on ID#	Amount of Contribution
Residential Street Address 221 Weston Rd		City Weston			State CT	Zip Code 06883	1	ate Received		
Principal Occupation  Investment Management		Name of Emp	-		•	Is this contribution assoc 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 res	byist?	Aggre	gate Contrib	utions \$50.00	\$50.00
Last Name Fonda	First Name Samantha	1		MI	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 64 Lanes Pond Rd		City Northford			State CT	Zip Code 06472	1	ate Received		
Principal Occupation Student		Name of Emp	loyer			Is this contribution assoc 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 Contrib	utions 100.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Cozzi	Christoph	er			Cash Money	Personal C  X Credit/Del		0545		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
35 Skylark Dr		Northford	İ		СТ	06472	0	7/07/2010	0	
Principal Occupation Business Agent		Name of Er	nployer		•	Is this contribution associ fundraising event listed in If yes, list Event #		11?	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	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu \$1	ntions	\$100.00
government the contract is with:  Last Name	First Name			MI	1	contribution:			TD //	
Hernandez	Wilson			IVII	X Cash	Personal C  Order Credit/Del		Contribution 0529	on ID#	Amount of Contribution
Residential Street Address	•	City			State	Zip Code	D	ate Received		
7 Davis St		Danbury			СТ	06810	0	7/07/2010	0	
Principal Occupation		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		u? <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	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu \$1	itions	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Gardner III	John				Cash Money	Personal C  Order X Credit/Del		0544		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
270 N Main St		West Har	tford		СТ	06117	0	7/07/2010	)	
Principal Occupation Letter Carrier		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		u? <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	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu \$1	utions	\$100.00
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Rosen	Lawrin			D	Cash Money	Personal C  Order Credit/Del		1028		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
23 Rundelane		Bloomfiel	d		СТ	06002	0	7/07/2010	)	
Principal Occupation		Name of En	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		11?	Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of	or prospective	Engage'	Yes X No		utor a lobbyis child of a lob	byist?	Aggre	gate Contribu \$1	ntions	\$100.00
government the contract is with:	ᆜ	Executive	Legislative	<sub>Y</sub>	CS	INU	1			<u> </u>

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contribut	ions from	ı Individu	ıals				
Last Name Chegwidden	First Name Cynthia		MI	Cash	contribution:  X Personal Che y Order Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 80 Clark St		City New Haven		State CT	Zip Code 06511		e Received '07/2010		
Principal Occupation		Name of Employer Ikea			Is this contribution associate fundraising event listed in St. 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 \$25	ns 5.00	\$25.00
Last Name Bornick	First Name Lydia		MI	Cash	contribution:  X Personal Characteristics y Order Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 100 York St Apt 10N		City New Haven		State CT	Zip Code 06510		e Received '07/2010		
Principal Occupation		Name of Employer Retired		•	Is this contribution associat fundraising event listed in S If yes, list Event #		<b>X</b> N	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 Yes	byist?	Aggregat	te Contribution \$25	ns 5.00	\$25.00
Last Name Cheslock Sr	First Name Charles		MI	Method of Cash Money	contribution:  Personal Ch y Order Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 22 Barnett Dr		City North Haven		State CT	Zip Code 06473		e Received '07/2010		
Principal Occupation Retired		Name of Employer Retired		•	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 lobbyis child of a lob res	byist?	Aggregat	te Contribution \$100		\$100.00
Last Name Williams	First Name Erik		MI	Cash	contribution:  Personal Ch y Order  X Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 12 Boston Tpke		City Coventry		State CT	Zip Code 06238		e Received '07/2010		
Principal Occupation political consultant		Name of Employer self - campaignswon		•	Is this contribution associat fundraising event listed in S 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	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregat	te Contribution		\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FIL	ING DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contributi	ons fron	Individu	ıals		•	
Last Name Williams	First Name Alyssa		MI	Method of Cash	contribution:	eck	ntribution ID#	Amount of Contribution
Williams	Alyssa				y Order X Credit/Debi	05	547	Contribution
Residential Street Address 12 Boston Tpke		City Coventry		State CT	Zip Code 06238	Date Re 07/08	eceived 3/2010	
Principal Occupation Technical Director		Name of Employer Travelers Insurance			Is this contribution associat 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 es x	byist?	Aggregate (	Contributions \$100.00	\$100.00
Last Name Morales	First Name Angel		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck 05	ntribution ID#	Amount of Contribution
Residential Street Address 49 Margarita Dr		City Hartford		State CT	Zip Code 06106	Date Re 07/08	eceived 3/2010	
Principal Occupation Owner		Name of Employer A7A Professional Home Improvement, LLC			Is this contribution associat 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 \$75.00	\$75.00
Last Name Morante	First Name Rosemary	/	MI	Cash	contribution:  Personal Ch y Order X Credit/Debi	eck 05	ntribution ID #	Amount of Contribution
Residential Street Address 28 Welch St		City Plainville		State CT	Zip Code 06062	Date Re 07/08	eceived 3/2010	
Principal Occupation School Administrator		Name of Employer Windsor Public Schools		•	Is this contribution associat fundraising event listed in S If yes, list Event #		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 es x	byist?	Aggregate (	Contributions \$20.00	\$20.00
Last Name Santos-Smith	First Name June		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	eck 05	ntribution ID#	Amount of Contribution
Residential Street Address 5 McCrea Ln		City Darien		State CT	Zip Code 06820	Date Re	eceived 3/2010	
Principal Occupation		Name of Employer		•	Is this contribution associat 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	byist?	Aggregate (	Contributions \$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Iten	nized Contributio	ons from	Individ	uals				
Last Name Cooper	First Name Tanzania			MI	Cash	contribution:  X Personal of the property of t		Contributi 0524	on ID#	Amount of Contribution
Residential Street Address 115 Ridgefield St		City Hartford			State CT	Zip Code 06112		ate Received		
Principal Occupation  Consultant		Name of Empl Self	loyer			Is this contribution assoc 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 res	obyist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Sierra	First Name Carmen			MI	Cash	contribution:  X Personal of the property of t		Contributi 0527	on ID#	Amount of Contribution
Residential Street Address 528 Broadview Ter		City Hartford			State CT	Zip Code 06106		ate Received		
Principal Occupation  Executive Director		Name of Empl Causa, Inc	-			Is this contribution assoc 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 Legislative	dependent	utor a lobbyis child of a lob es	-	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Arciniegas	First Name Lillian			MI	x Cash	contribution: Personal ( y Order Credit/De		Contributi 0525	on ID#	Amount of Contribution
Residential Street Address 126 Yale St		City Hartford			State CT	Zip Code 06106		ate Received		
Principal Occupation		Name of Empl Unemploye	-		•	Is this contribution assoc 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		Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Luna	First Name Victor			MI	x Cash	contribution: Personal of the property of the		Contributi	on ID#	Amount of Contribution
Residential Street Address 60 Beacon St		City Hartford			State CT	Zip Code 06105		ate Received		
Principal Occupation Entertainment		Name of Empl Luna Produ	-	_		Is this contribution assoc 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	obyist?	Aggre	gate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contr	ibutions f	from Individu	ıals					
Last Name Cunningham	First Name Philip		MI	Cash	contribution: Personal C	0548	ion ID#	Amount of Contribution		
Residential Street Address 515 Old Post Rd		City Fairfield		State CT	Zip Code 06824	Date Received 07/08/201				
Principal Occupation  Advertising		Name of Employer PCA			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		ontributor a lobbyis endent child of a lob Yes	byist?	Aggregate Contrib	outions 100.00	\$100.00		
Last Name fox	First Name Joan		MI	Cash	contribution:  Personal Contribution:  y Order  X Credit/Deb	I 0549	ion ID#	Amount of Contribution		
Residential Street Address Box 216		City Hampton		State CT	Zip Code 06247	Date Received 07/08/201				
Principal Occupation Retired		Name of Employer Hackley School		•	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		ontributor a lobbyis endent child of a lob Yes	byist?	Aggregate Contrib	sutions \$25.00	\$25.00		
Last Name Butler	First Name Rhonda		MI	Cash	contribution:  Personal C y Order X Credit/Deb	I 0553	ion ID#	Amount of Contribution		
Residential Street Address 1108 2nd St		City Florence		State OR	Zip Code 97439	Date Received 07/08/201				
Principal Occupation Software development		Name of Employer			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		ontributor a lobbyis endent child of a lob Yes	byist?	Aggregate Contrib	outions 100.00	\$100.00		
Last Name French	First Name Harold		MI	X Cash	contribution:  Personal Ci y Order Credit/Deb	0531	ion ID#	Amount of Contribution		
Residential Street Address 33 Brook St		City Hartford		State CT	Zip Code 06120	Date Received 07/08/201				
Principal Occupation Vice Pres. Real Development		Name of Employer Tryon Ind		•	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	byist?	Aggregate Contrib	sutions \$50.00	\$50.00		

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contri	butions fr	om Individu	ıals		•				
Last Name Johnson	First Name Ronald		MI	x Cash	contribution:  Personal C y Order Credit/Deb	0533	tion ID#	Amount of Contribution			
Residential Street Address 597 Farmington Ave		City Hartford		State CT	Zip Code 06108	Date Receive 07/08/20					
Principal Occupation Attorney		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 N  Executive Legislative		tributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contri	s50.00	\$50.00			
Last Name Busanet	First Name David		MI	Cash	contribution:  X Personal C y Order Credit/Deb	0526	tion ID#	Amount of Contribution			
Residential Street Address 70 Russ St Apt B9		City Hartford		State CT	Zip Code 06106	Date Receive 07/08/20					
Principal Occupation Procurement		Name of Employer State of CT		•	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 N  Executive Legislative		tributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contri	butions	\$100.00			
Last Name Feliciano	First Name Kenneth		MI	x Cash	contribution:  Personal C y Order Credit/Deb	0534	tion ID#	Amount of Contribution			
Residential Street Address 21 A Elm Cors		City Windsor Locks		State CT	Zip Code 06096	Date Receive					
Principal Occupation Photography		Name of Employer Phot Genikz Photograph	у		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 N  Executive Legislative	o Is con	tributor a lobbyis dent child of a lob Yes	byist?	Aggregate Contri	\$5.00	\$5.00			
Last Name Feliciano	First Name Jessica		MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck 0536	tion ID#	Amount of Contribution			
Residential Street Address 21 A Elm Cors		City Windsor Locks		State CT	Zip Code 06096	Date Receive 07/08/20					
Principal Occupation Photography		Name of Employer Photo Genikz Photograp	hy	•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J19	Yes No				
Is contributor a 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 Contri	\$5.00	\$5.00			

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ons from	ı Individu	ıals				
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
Cotto	Luis				X Cash Money	y Order Personal C		0537		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
10 Park Ter		Hartford			СТ	06106	0	7/08/201	0	
Principal Occupation		Name of E	mployer		•	Is this contribution associ			Yes	Ī
At home dad/councilman		City of H	lartford			fundraising event listed in If yes, list Event #	Section J	11? <b>x</b>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contrib	utions	ĺ
state contractor? Is yes, indicate which branch or branches of		F	Turnintarion	1 î—	child of a lob	•		:	\$20.00	\$20.00
government the contract is with:		Executive	Legislative	+-			<u> </u>	1		<u> </u>
Last Name Powell Jr	First Name John			MI	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution
T GWG ST	30					y Order X Credit/Del	oit Card	0551		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
96 Sachem Dr		Glastonb	ury		СТ	06033	0	7/08/201	0	1
Principal Occupation		Name of E	* *			Is this contribution associ- fundraising event listed in			Yes	
Insurance		Traveler	s Insurance			If yes, list Event #	section s	<u> </u>	No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis		Aggre	gate Contrib	utions	ĺ
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$	100.00	\$100.00
government the contract is with:	l <sub>E' (M</sub>	Executive	Legislative	+-	1		<u> </u>	1		<u> </u>
Last Name Rhule	First Name Gary			MI	Cash	contribution:  x Personal C	Check	Contributi	on ID#	Amount of Contribution
					Money	y Order Credit/Del	oit Card	0528		
Residential Street Address		City			State	Zip Code		ate Received		
508 Hawthorne Ln		Windsor			СТ	06095	0	7/08/201	0	
Principal Occupation		Name of Er	nployer			Is this contribution associ- fundraising event listed in			Yes	
MD		Aetna				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 Contrib	utions	†
state contractor? Is yes, indicate which branch or branches of				1 î—	child of a lob	•		-	100.00	\$100.00
government the contract is with:		Executive	Legislative	'	res X	No	<u> </u>	1		
Last Name	First Name			MI		contribution:	'heck	Contributi	on ID#	Amount of
Cotto Jr	Robert				Cash Money	y Order Credit/Del		0532		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received	ļ	
12 Park Ter Apt 2		Hartford			СТ	06106	0	7/08/201	0	
Principal Occupation		Name of E	mployer			Is this contribution associ			Yes	
Teacher		Capital F	Region Education Cou	ıncil		fundraising event listed in If yes, list Event #	section J	) I X	No No	
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis		Aggre	gate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of		P		1 -	child of a lob	•		:	\$25.00	\$25.00
government the contract is with:	Ш	Executive	Legislative	Т Г ,	res X	NO	1			]

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribu	tions fron	ı Individu	ıals					
Last Name Kikoler	First Name David		MI	Cash	contribution:    X   Personal Cl	heck 0681	tion ID#	Amount of Contribution		
Residential Street Address 10 Charles W Briggs Rd		City Croton On Hudson		State NY	Zip Code 10520	Date Receive 07/08/20				
Principal Occupation  Consultant-education		Name of Employer American Education Solutio	ns Inc.		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 Baltimore	First Name Robert		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0556	tion ID#	Amount of Contribution		
Residential Street Address 188 Crocker Ct		City Orange		State CT	Zip Code 06477	Date Receive				
Principal Occupation Physician		Name of Employer Yale University School of Mo	edicine	•	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 Baltimore	First Name Katalin		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0557	ition ID#	Amount of Contribution		
Residential Street Address 188 Crocker Ct		City Orange		State CT	Zip Code 06477	Date Receive 07/09/20				
Principal Occupation Librarian		Name of Employer unemployed		•	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- 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 Bolden	First Name Victor		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0682	ition ID#	Amount of Contribution		
Residential Street Address 131 W Elm St # 1		City New Haven		State CT	Zip Code 06515	Date Receive 07/09/20				
Principal Occupation Attorney		Name of Employer City of New Haven		•	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	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00		

		I. MONETARY	RECEI	PTS (	Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Itemized Contri	butions f	from I	ndividu	als				
Last Name Kelman	First Name Gilbert		MI	]	Method of o	contribution: Personal C Order X Credit/Deb		Contribution	on ID#	Amount of Contribution
Residential Street Address 15 Halls Point Rd		City Branford			State CT	Zip Code 06405		ate Received 7/09/2010		
Principal Occupation Retired		Name of Employer		·		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 N  Executive Legislative			ild of a lobl		Aggre	gate Contribu	tions	\$5.00
Last Name Kelman	First Name Gilbert		MI	[ [	Method of c Cash Money	contribution:  Personal C Order X Credit/Deb		Contribution 0555	on ID#	Amount of Contribution
Residential Street Address 15 Halls Point Rd		City Branford			State CT	Zip Code 06405		ate Received 7/09/2010		
Principal Occupation Retired		Name of Employer		•		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 N  Executive Legislative			r a lobbyist ild of a lobl	oyist?	Aggre	gate Contribu	itions \$10.00	\$5.00
Last Name Platt	First Name George		MI	[	Method of o Cash Money	contribution: Personal C Order X Credit/Deb		Contribution 0559	on ID#	Amount of Contribution
Residential Street Address 111 Chestnut Ln		City Hamden			State CT	Zip Code 06518		ate Received 7/09/2010	0	
Principal Occupation President		Name of Employer The Harty Press, Inc		·		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 N  Executive Legislative			ild of a lobl		Aggre	gate Contribu	utions	\$100.00
Last Name Bartlett-Josie	First Name Christine		MI	] [ ]	Method of o Cash Money	contribution:  Personal C Order X Credit/Deb		Contribution 0560	on ID#	Amount of Contribution
Residential Street Address  1 University Pl		City New Haven			State CT	Zip Code 06511		ate Received 7/09/2010		
Principal Occupation  Development Director		Name of Employer Unemployed		•		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 N  Executive Legislative			ild of a lobl		Aggre	gate Contribu	itions	\$100.00

		I. MO	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Iten	nized Contributi	ons from	Individu	ıals				
Last Name mentone	First Name rose			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0607	n ID#	Amount of Contribution
Residential Street Address 541 Hill St		City Hamden			State CT	Zip Code 06514		Pate Received 17/09/2010		
Principal Occupation registrar		Name of Emp hamden, c	*			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 es x	byist?	Aggre	egate Contribut	ions 10.00	\$10.00
Last Name mentone	First Name rose			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0561	n ID#	Amount of Contribution
Residential Street Address 541 Hill St		City Hamden			State CT	Zip Code 06514		Pate Received 17/09/2010		
Principal Occupation registrar		Name of Emp hamden, o	-		•	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 Contribut	ions 10.00	\$10.00
Last Name Roldan	First Name Kelvin			MI	Cash	contribution: Personal C		Contribution 0558	n ID#	Amount of Contribution
Residential Street Address 1580 Broad St Apt C4		City Hartford			State CT	Zip Code 06106		Pate Received		
Principal Occupation Administrator		Name of Emp Hartford P	loyer ublic Schools			Is this contribution associ 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	_	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut	ions 00.00	\$100.00
Last Name Aub	First Name Ted			MI	Cash	contribution:  X Personal C  y Order Credit/Del		Contribution 0571	n ID#	Amount of Contribution
Residential Street Address 29 Twin Coves Rd		City Madison			State CT	Zip Code 06443		Pate Received 07/10/2010		
Principal Occupation Sales		Name of Emp Self	loyer			Is this contribution associ 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  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribut	ions 25.00	\$25.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ons fron	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Carrano	Angela				Cash Money	y Order X Personal Credit/De		0570		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
37 Knollwood Dr		Branford			СТ	06405	0	7/10/201	0	
Principal Occupation		Name of Er Retired	nployer		-	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	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	itions \$25.00	\$25.00
government the contract is with:  Last Name	First Name	Encount	Degisiante	MI		contribution:		Contribution	ID #	
Carrano	Frank			IVII	Cash	y Order Credit/De		0566	on ID#	Amount of Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
37 Knollwood Dr		Branford			СТ	06405	0	7/10/201	0	
Principal Occupation		Name of Er	mployer		•	Is this contribution assoc			Yes	
Teacher		Teacher				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	outor a lobbyis t child of a lob Yes	bbyist?	Aggre	gate Contribu	tions \$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Schwall	Robert				Cash Money	y Order X Credit/De		0610		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
95 Beckett Ave		Branford			СТ	06405	0	7/10/201	0	
Principal Occupation  Director of Technical Engineering		Name of Er Sony Mu	nployer Isic Entertainment			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor	or prospective		Yes X No		utor a lobbyis	, 1	Aggre	gate Contribu	ıtions	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	I —	child of a lob	-		9	\$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Schwall	Robert				Cash Money	y Order Personal Credit/De		0567		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
95 Beckett Ave		Branford			СТ	06405	0	7/10/201	0	
Principal Occupation		Name of Er Sony Mu	nployer Isic Entertainment			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	or prospective	•	Yes X No		utor a lobbyis child of a lob	bbyist?	Aggre	gate Contribu	utions \$50.00	\$50.00
government the contract is with:		Executive	Legislative	\ \ \ \ \ \ \ \ \	res X	No				

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							I	FILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name	First Name		MI	Method of	contribution:		Contribution I	ID#	Amount of
Knapp	Pamela			Cash Money	y Order Resonal Character Credit/Debi		0565		Contribution
Residential Street Address		City		State	Zip Code		e Received		
95 Beckett Ave		Branford		СТ	06405	07,	/10/2010		
Principal Occupation		Name of Employer			Is this contribution associate fundraising event listed in S		? =	Yes	
Business Office Manager, HR Dir		Talmadge Park, Inc			If yes, list Event #		<b>x</b> 1	No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis		Aggrega	ate Contributio	ons	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		child of a lob	*		\$100	0.00	\$100.00
Last Name	First Name		MI	Method of	contribution:		Contribution I	ID#	Amount of
Roy	Pamela			Cash Money	x Personal Ch y Order Credit/Debi		0580		Contribution
Residential Street Address		City		State	Zip Code	Dat	e Received		
60 Featherbed Ln		Branford		СТ	06405	07,	/10/2010		
Principal Occupation		Name of Employer			Is this contribution associate fundraising event listed in S			Yes	
Teacher		Branford BOE			If yes, list Event #	section 31	x 1	No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis	-	Aggrega	ate Contributio	ons	
state contractor? Is yes, indicate which branch or branches of		Formation D Localitation		child of a lob	•		\$25	5.00	\$25.00
government the contract is with:	<u></u>	Executive Legislative	+-	1					
Last Name Sherman	First Name Norman		MI	Cash	contribution: Personal Ch	neck	Contribution I	ID#	Amount of Contribution
				Money	y Order X Credit/Debi	t Card	0562		
Residential Street Address		City		State	Zip Code		e Received		
17 South Mdws		Woodbury		СТ	06798	07,	/10/2010		
Principal Occupation		Name of Employer			Is this contribution associate fundraising event listed in S		, 🔲 Y		
retired community health manage	r				If yes, list Event #		<b>x</b> 1	No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis	, 1	Aggrega	ate Contributio	ons	
state contractor? Is yes, indicate which branch or branches of		<b>.</b>		child of a lob	*		\$50	0.00	\$50.00
government the contract is with:		Executive Legislative	+ -	1		<u> </u>			
Last Name Paolillo	First Name Alphonse		MI	Method of Cash	contribution:  X Personal Ch	neck	Contribution I	ID#	Amount of Contribution
T domino	7 lipriorise				y Order Credit/Debi	t Card	0955		Contribution
Residential Street Address		City		State	Zip Code	Dat	e Received		
151 Huntington Rd		New Haven		СТ	06512	07,	/10/2010		
Principal Occupation		Name of Employer			Is this contribution associate fundraising event listed in S			Yes	
Financial Advisor		John Hancock			If yes, list Event #		. X	No	
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis		Aggrega	ate Contributio	ons	
state contractor? Is yes, indicate which branch or branches of	П	Executive Legislative		child of a lob	•		\$100	0.00	\$100.00
government the contract is with:		Lacedary Legislative	ı — '						

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contribut	ions from	Individu	ıals						
Last Name Peckingham	First Name Mary		MI	Cash	contribution:    X   Personal Cl	heck 0616	tion ID#	Amount of Contribution			
Residential Street Address 77 Fairview Ave		City West Haven		State CT	Zip Code 06516	Date Receive 07/10/20					
Principal Occupation  Caterer		Name of Employer Allen's Catering (Owner)			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 \$25.00	\$25.00			
Last Name Picard	First Name John		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0619	ition ID#	Amount of Contribution			
Residential Street Address 212 Ocean Ave		City West Haven		State CT	Zip Code 06516	Date Receive 07/10/20					
Principal Occupation  Mayor		Name of Employer City of West Haven		•	Is this contribution associa fundraising event listed in If yes, list Event # 071	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 \$25.00	\$25.00			
Last Name Picard	First Name Tara		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0620	tion ID#	Amount of Contribution			
Residential Street Address 212 Ocean Ave		City West Haven		State CT	Zip Code 06516	Date Receive 07/10/20					
Principal Occupation Program Mgr		Name of Employer UTC Sikorsky			Is this contribution associa fundraising event listed in If yes, list Event # 071	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 Weiss	First Name Steve		MI	X Cash	contribution:  Personal Cl y Order Credit/Deb	heck 0977	ition ID#	Amount of Contribution			
Residential Street Address 51 Taylor Ave		City Bethel		State CT	Zip Code 06801	Date Receive 07/10/20					
Principal Occupation  Life Guard		Name of Employer Wilton YMCA			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- state contractor? Is yes, indicate which 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	
Friends Of Gerry Garcia											
		B. Ite	mized Contributio	ons from	Individu	ıals					
Last Name Loeb	First Name John			MI	X Cash	contribution: Personal ( y Order Credit/De		Contributi 0578	on ID#	Amount of Contribution	
Residential Street Address 130 Johnson Pt		City Branford			State CT	Zip Code 06405		ate Received			
Principal Occupation Retired		Name of Emp	ployer			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	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob es X	byist?	Aggre	gate Contrib	\$20.00	\$20.00	
Last Name Loeb	First Name Rhonda			MI	X Cash	contribution: Personal ( y Order Credit/De		Contributi 0579	on ID#	Amount of Contribution	
Residential Street Address 130 Johnson Pt		City Branford			State CT	Zip Code 06405		ate Received			
Principal Occupation Retired		Name of Emp	ployer			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	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contrib	utions \$40.00	\$40.00	
Last Name Sherman	First Name Norman			MI	Cash	contribution: Personal ( y Order		Contributi 0608	on ID#	Amount of Contribution	
Residential Street Address 17 South Mdws		City Woodbury			State CT	Zip Code 06798		ate Received 7/10/201			
Principal Occupation retired community health manage	r	Name of Emp	ployer			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	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contrib	ations \$50.00	\$50.00	
Last Name Lincoln	First Name Maryanne			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contributi 0568	on ID#	Amount of Contribution	
Residential Street Address 26 Summer Island Rd		City Branford			State CT	Zip Code 06405		ate Received 7/10/201			
Principal Occupation		Name of Emp Retired	ployer		•	Is this contribution assoc fundraising event listed in If yes, list Event #		12	Yes 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  Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contrib	utions \$25.00	\$25.00	

		I. MONETA	RY RECE	EIPTS	(Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Itemized Co	ntributions	s from	Individu	als				
Last Name Sullivan	First Name Chris		М	11	Method of c	contribution:    X   Personal C		Contribution 0577	ID#	Amount of Contribution
Residential Street Address 100 Hemlock Rd Unit 6-1		City Branford			State CT	Zip Code 06405		7/10/2010		
Principal Occupation Enu analyst		Name of Employer CT Dep		•		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 Legislati	de		tor a lobbyist child of a lobbes	byist?	Aggre	gate Contributio	ons 35.00	\$35.00
Last Name Cardona	First Name Heriberto		M	1I	Method of comments of the Method of Comments of Commen	contribution: Personal C		Contribution 0658	ID#	Amount of Contribution
Residential Street Address 55 Redfield St		City New Haven			State CT	Zip Code 06519		ate Received 7/10/2010		
Principal Occupation Whole Sale		Name of Employer Watkins Foods		•		Is this contribution associ- fundraising event listed in If yes, list Event # 07	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 Legislati	de		tor a lobbyist	byist?	Aggre	gate Contributio	ons 00.00	\$100.00
Last Name Carrano	First Name Frank		M	1I	Method of c	contribution: Personal C		Contribution 0569	ID#	Amount of Contribution
Residential Street Address 64 Marion St		City Boston	•		State MA	Zip Code 02128		rate Received		
Principal Occupation Physician		Name of Employer Newton Wellesley Ho	ospital			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 Legislati	de		tor a lobbyist child of a lobl	byist?	Aggre	gate Contributio	ons 25.00	\$25.00
Last Name Da Ros	First Name Anthony		M	1I	Method of c Cash Money	contribution:    X   Personal C		Contribution 0575	ID#	Amount of Contribution
Residential Street Address 27 Watrous Ave		City Stony Creek			State CT	Zip Code 06405		ate Received 7/10/2010		
Principal Occupation Selectman		Name of Employer Town of Branford				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 Legislati	de		tor a lobbyist	byist?	Aggre	gate Contribution	ons 50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE							FILING	G DUE DATE				
Friends Of Gerry Garcia												
B. Itemized Contributions from Individuals												
Last Name De Frutos	First Name Alejandro		MI	x Cash	contribution: Personal C	heck 0613	ntion ID#	Amount of Contribution				
Residential Street Address 155 Church St		City West Haven		State CT	Zip Code 06516	Date Receiv 07/10/20						
Principal Occupation Restaurant Owner		Name of Employer OH Madrid LLC			Is this contribution associa fundraising event listed in If yes, list Event # 071		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	\$50.00	\$50.00				
Last Name De Frutos	First Name Esmeralda	a	MI	X Cash	contribution:  Personal Conder  Credit/Deb	heck 0614	ntion ID#	Amount of Contribution				
Residential Street Address 155 Church St		City West Haven		State CT	Zip Code 06516	Date Receiv 07/10/20						
Principal Occupation  Bartender		Name of Employer OH Madrid LLC		•	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 Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00				
Last Name Leavitt	First Name Edward		MI	X Cash	contribution: Personal C	heck 0615	ntion ID#	Amount of Contribution				
Residential Street Address 25 Bluff Ave		City West Haven		State CT	Zip Code 06510	Date Receiv 07/10/20						
Principal Occupation  Lawyer		Name of Employer Self		•	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	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contr	sbutions \$20.00	\$20.00				
Last Name Conlon	First Name Deborah		MI	x Cash	contribution: Personal Ci y Order Credit/Deb	heck 0617	ntion ID#	Amount of Contribution				
Residential Street Address 343 Beach St # 402		City West Haven		State CT	Zip Code 06516	Date Receiv 07/10/20						
Principal Occupation Office Mgr		Name of Employer Local 34 FUE/Retired	_		Is this contribution associa fundraising event listed in If yes, list Event # 071	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 es	byist?	Aggregate Contr	stations \$40.00	\$40.00				

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contribut	ions fron	Individu	ıals						
Last Name Joaquin	First Name Clico		MI	x Cash	contribution: Personal Cl	heck 0698	ution ID#	Amount of Contribution			
Residential Street Address 72 Arch St		City New Haven		State CT	Zip Code 06519	Date Receiv					
Principal Occupation teachers asst		Name of Employer Lulac Head Start			Is this contribution associa fundraising event listed in If yes, list Event # 071		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	sibutions \$100.00	\$100.00			
Last Name Manzi-Platt	First Name Rosalie		MI	Cash	contribution: Personal Cl  / Order X Credit/Debi	heck 0609	ution ID#	Amount of Contribution			
Residential Street Address 495 Washington Rd		City Woodbury		State CT	Zip Code 06798	Date Receiv 07/10/20					
Principal Occupation Office Manager		Name of Employer Woodbury Insurance Agency	/	•	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 Contr	sibutions \$10.00	\$10.00			
Last Name Kuhr	First Name Adam		MI	Cash	contribution: Personal Cl  Order X Credit/Debi	heck 0611	ution ID#	Amount of Contribution			
Residential Street Address 85D E Broadway		City Milford		State CT	Zip Code 06460	Date Receiv					
Principal Occupation Freelance Advertising Copywriter		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	byist?	Aggregate Conti	sibutions \$100.00	\$100.00			
Last Name Bernstein	First Name Carl		MI	X Cash	contribution: Personal Cl  Order Credit/Debi	heck 0979	ution ID #	Amount of Contribution			
Residential Street Address 126 Valley Forge Rd		City Weston		State CT	Zip Code 06883	Date Receiv					
Principal Occupation  Lawyer		Name of Employer sefl			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 Contr	ibutions \$50.00	\$50.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Friends Of Gerry Garcia											
		B. It	emized Contributi	ons fron	ı Individu	ıals					
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of	
Caplan	Elisabeth				Cash Money	y Order X Personal C		0581		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
86 Old Post Rd		Northford	d		СТ	06472	0	7/10/201	0		
Principal Occupation		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	or prospective		Yes X No	Is contrib	utor a lobbyis	t, spouse, or	Aggre	gate Contribu	ıtions	<u> </u>	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	I '─	child of a lob	*		5	\$25.00	\$25.00	
Last Name	First Name			MI		contribution:		Contribution	on ID #		
Sittnick	Keith				Cash	y Order Personal Credit/De		0574	on id #	Amount of Contribution	
Residential Street Address		City		•	State	Zip Code	D	ate Received		1	
338 Shore Dr		Branford			СТ	06405	0	7/10/201	0		
Principal Occupation		Name of Er	mployer		•	Is this contribution associ			Yes	Ī	
Attorney		Self				fundraising event listed in If yes, list Event #	n Section J	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	utor a lobbyis child of a lob Yes	bbyist?	Aggre	egate Contribu	itions \$50.00	\$50.00	
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of	
Gould	Warren				Cash Money	y Order X Personal C		0576		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
19 Taylor Pl		Branford			СТ	06405	0	7/10/201	0	<u> </u>	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes		
Owner		Specialty	y Solutions, LLC			If yes, list Event #	i bection s	х	No		
Is contributor a principal of a state contractor	or prospective	•	Yes X No		utor a lobbyis		Aggre	gate Contribu	itions	İ	
state contractor? Is yes, indicate which branch or branches of					child of a lob	•		9	\$50.00	\$50.00	
government the contract is with:	<u></u>	Executive	Legislative	+ -	res X			1		1	
Last Name Picard	First Name Jeannine			MI	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution	
ricard	Jeannine					y Order Credit/De		0618		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
16 Gregory Rd		West Hav	/en		СТ	06516	0	7/10/201	0	_	
Principal Occupation		Name of Er				Is this contribution associ		1^	Yes		
Merchandise Coordinator		Christma	as Tree Shops			fundraising event listed in  If yes, list Event # 07			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	Tracket of		child of a lob	•		9	\$20.00	\$20.00	
government the contract is with:		Executive	Legislative	Т п,	es 🔼	INO	1				

		I. MC	ONETARY REC	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Iten	nized Contributio	ons from	Individu	ıals				
Last Name Hechavarria	First Name Caridad			MI	Cash	contribution:    X   Personal C		Contribution	on ID#	Amount of Contribution
Residential Street Address 199 Pawson Rd		City Branford			State CT	Zip Code 06405		ate Received 7/10/2010	)	
Principal Occupation  Consultant		Name of Emplo	-			Is this contribution association fundraising event listed in If yes, list Event # 072	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	gate Contribu \$	tions 325.00	\$25.00
Last Name Larrieu	First Name Yvette			MI	Cash	contribution:  X Personal C  y Order Credit/Del		Contribution	on ID #	Amount of Contribution
Residential Street Address 199 Pawson Rd		City Branford			State CT	Zip Code 06405		ate Received 7/10/2010	)	
Principal Occupation Accountant		Name of Empl	loyer		•	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  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contribu	tions 25.00	\$25.00
Last Name Bonilla	First Name Magda			MI	x Cash	contribution: Personal C		Contribution 0659	on ID #	Amount of Contribution
Residential Street Address 85 Fifth St		City New Haven	1		State CT	Zip Code 06519		ate Received	)	
Principal Occupation Teacher		Name of Empl Milford BO	-			Is this contribution association fundraising event listed in If yes, list Event # 07:	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 lobbyis child of a lob es	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
Last Name Ohio	First Name Samuel			MI	x Cash	contribution:  Personal C y Order Credit/Deb		Contribution 0653	on ID#	Amount of Contribution
Residential Street Address 59 Redfield St		City New Haven	1		State CT	Zip Code 06519		ate Received 7/10/2010	)	
Principal Occupation Transportation		Name of Empl	loyer wner/Operator		•	Is this contribution association fundraising event listed in If yes, list Event # 07:	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 Contribu \$1	tions .00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Rayas	First Name Nick		MI	x Cash	contribution:  Personal Cl y Order Credit/Debi	neck 0669	bution ID #	Amount of Contribution			
Residential Street Address 60 Grieb Trl		City Wallingford		State CT	Zip Code 06492	Date Rece 07/10/2					
Principal Occupation General Manager		Name of Employer El Amigo Felix			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 DeLeon	First Name Agnes		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 0954	bution ID#	Amount of Contribution			
Residential Street Address 57 Willow Glen Dr		City Coventry		State CT	Zip Code 06238	Date Rece 07/10/2					
Principal Occupation  Bail Bond Asent		Name of Employer ADL Bail Bonds		•	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 \$100.00	\$100.00			
Last Name Pietrosimone	First Name Mark		MI	Cash	contribution:    X   Personal Cl	neck 0956	bution ID #	Amount of Contribution			
Residential Street Address 221 Summit St		City New Haven		State CT	Zip Code 06513	Date Rece 07/10/2					
Principal Occupation Controller		Name of Employer City of New Haven			Is this contribution associa fundraising event listed in If yes, list Event # 071	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 Con	tributions \$20.00	\$20.00			
Last Name Rayas	First Name Felix		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 0670	bution ID #	Amount of Contribution			
Residential Street Address 60 Grieb Trl		City Wallingford		State CT	Zip Code 06492	Date Rece 07/11/2					
Principal Occupation Owner		Name of Employer El Amigo Felix			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							FII	LING DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contributi	ions fron	Individu	ıals						
Last Name Ponciano	First Name Emilio		MI	X Cash	contribution:  Personal Cl y Order  Credit/Debi	neck 0	ontribution ID	# Amount of Contribution			
Residential Street Address 1033 Whalley Ave		City New Haven		State CT	Zip Code		Received .1/2010				
Principal Occupation Cook		Name of Employer Amigo Felix			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 \$100.0	\$100.00			
Last Name Ospina	First Name Marcela		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 0	ontribution ID	# Amount of Contribution			
Residential Street Address 153 Hemlock St		City West Haven		State CT	Zip Code 06516		Received .1/2010				
Principal Occupation Outpatient Registar		Name of Employer Yale New Haven Hosp		•	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	Contributions \$100.0	\$100.00			
Last Name Rayas	First Name Rosa		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 0	ontribution ID	# Amount of Contribution			
Residential Street Address 60 Grieb Trl		City Wallingford		State CT	Zip Code 06492		Received .1/2010				
Principal Occupation Housekeeping		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 es x	byist?	Aggregate	Contributions \$100.0	\$100.00			
Last Name Arguello-Ballestero	First Name Sindy		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 0	ontribution ID	# Amount of Contribution			
Residential Street Address 1015 Whalley Ave		City New Haven		State CT	Zip Code 06515		Received .1/2010				
Principal Occupation Student		Name of Employer None			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 \$100.0	\$100.00			

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE								FILING	DUE DATE			
Friends Of Gerry Garcia												
		B. Itemized Contributi	ons fron	Individu	ıals							
Last Name Mesham	First Name David		MI	X Cash	contribution: Personal Ch y Order Credit/Debi		Contribution	ı ID#	Amount of Contribution			
Residential Street Address 15 High St		City New Haven		State CT	Zip Code		te Received //11/2010					
Principal Occupation Project Research		Name of Employer Yale University		•	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?	Aggreg	ate Contributi \$10	ions 00.00	\$100.00			
Last Name Rodriguez	First Name Aila		MI	X Cash	contribution: Personal Cl		Contribution	ı ID#	Amount of Contribution			
Residential Street Address 19 Arch St		City New Haven		State CT	Zip Code 06519		te Received //11/2010					
Principal Occupation asst teacher		Name of Employer City of New Haven			Is this contribution associate fundraising event listed in 1 If yes, list Event # 070		? 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	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggrega	ate Contributi \$10	ions 00.00	\$100.00			
Last Name Matos	First Name Angelica		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contribution	n ID#	Amount of Contribution			
Residential Street Address 89 E Pearl St		City New Haven		State CT	Zip Code 06513		te Received					
Principal Occupation Program Executive		Name of Employer Atlantic Philanthropies			Is this contribution associate fundraising event listed in the second of 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 es x	byist?	Aggrega	ate Contributi \$10	ions 00.00	\$100.00			
Last Name Jackson	First Name Catherine		MI	Cash	contribution: Personal Ch y Order X Credit/Debi		Contribution	ı ID#	Amount of Contribution			
Residential Street Address 54 Killams Pt		City Branford		State CT	Zip Code 06405		te Received //11/2010					
Principal Occupation writer		Name of Employer none			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 Contributi \$5	ions 50.00	\$50.00			

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE								FILING	DUE DATE			
Friends Of Gerry Garcia												
		B. Itemized Contributi	ons fron	Individu	ıals							
Last Name Knowles	First Name Kevin		MI G	Cash	contribution:    X   Personal Characteristics   Personal Characteristics   Credit/Debit   Personal Characteristics   Personal Cha		Contribution	ı ID#	Amount of Contribution			
Residential Street Address 15 Park Ave		City Naugatuck		State CT	Zip Code 06770		te Received 7/11/2010					
Principal Occupation  Executive Director		Name of Employer  Naugatuck Housing Authority	/	•	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?	Aggreg	ate Contributi \$10	ions 00.00	\$100.00			
Last Name Saltzman	First Name Stephen		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 0623	n ID#	Amount of Contribution			
Residential Street Address 37 Country Club Dr		City Woodbridge		State CT	Zip Code 06525		te Received 7/11/2010					
Principal Occupation Attorney		Name of Employer Brenner Saltzman Wallman L	.LP	•	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 Contributi \$10	ions 00.00	\$100.00			
Last Name Winters	First Name Regina		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi		Contribution	ı ID#	Amount of Contribution			
Residential Street Address 271 Howard Ave		City New Haven		State CT	Zip Code 06519	- 1	te Received					
Principal Occupation  Architect		Name of Employer  Zared Architecture			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?	Aggreg	ate Contributi \$10	ions 00.00	\$100.00			
Last Name Kalamarides	First Name John		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution	n ID#	Amount of Contribution			
Residential Street Address 180 Westport Rd		City Wilton		State CT	Zip Code 06897	- 1	te Received 1/11/2010					
Principal Occupation Financial Advisor		Name of Employer Source Capital Group 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?	Aggreg	ate Contributi \$5	ions 50.00	\$50.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name	First Name		MI	Method of	contribution:	Contribu	ition ID #	Amount of			
Halfar	Christine			Cash Money	Personal C x Credit/Deb	0718		Contribution			
Residential Street Address		City	•	State	Zip Code	Date Receive	ed				
8 Settlers Hill Rd		Danbury		СТ	06811	07/12/20	10	1			
Principal Occupation		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 No  Executive Legislative	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$75.00	\$75.00			
Last Name Paolillo Sr	First Name Alphonse		MI	X Cash	contribution:  Personal Ci y Order Credit/Deb	heck 0661	tion ID#	Amount of Contribution			
Residential Street Address 151 Huntington Rd		City New Haven		State CT	Zip Code 06512	Date Receive 07/12/20					
Principal Occupation State Marshal		Name of Employer State of CT			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	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00			
Last Name	First Name		MI		contribution:	Contribu	tion ID#	Amount of			
Rodriguez	Sumirram	nis		X Cash Mone	y Order Personal C Credit/Deb	0664		Contribution			
Residential Street Address		City		State	Zip Code	Date Receive					
56 Redfield St		New Haven		СТ	06519	07/12/20	10	+			
Principal Occupation  Administrative Asst		Name of Employer  City of New Haven Police D	Dept		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	byist?	Aggregate Contri	butions \$100.00	\$100.00			
Last Name Seda	First Name Noemiver	<del>_</del>	MI	Method of Cash	contribution:	heck 0665	ition ID#	Amount of Contribution			
Residential Street Address		City		State	y Order Credit/Deb	Date Receive	od.	1			
56 Redfield St		New Haven		CT	06519	07/12/20					
Principal Occupation Housewife		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	depender	butor a lobbyis at child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00			

		I. MONETARY RI	ECEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FIL	ING DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribu	tions fron	ı Individu	ıals		•	
Last Name Seda	First Name Andres		MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address 56 Redfield St		City New Haven		State CT	Zip Code 06519		e Received /12/2010	
Principal Occupation Supervisor		Name of Employer Watson Foods			Is this contribution association 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?	Aggrega	ste Contributions \$100.0	0 \$100.00
Last Name Garcia	First Name Manuel		MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address 87B Karen Ct		City Bridgeport		State CT	Zip Code 06606		e Received /12/2010	
Principal Occupation  In school suspension officer		Name of Employer City of Bridgeport		•	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?	Aggrega	te Contributions \$50.0	0 \$50.00
Last Name Morales	First Name Priscilla		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address PO Box 8472		City New Haven	•	State CT	Zip Code 06530		e Received /12/2010	
Principal Occupation		Name of Employer		•	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?	Aggrega	te Contributions \$50.0	0 \$50.00
Last Name Gomez	First Name Victor		MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address 15 Vera St		City East Haven		State CT	Zip Code 06512		e Received /12/2010	
Principal Occupation reverend		Name of Employer unemployed		•	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?	Aggrega	te Contributions \$40.0	0 \$5.00

		I. M	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Ite	mized Contributi	ons fron	Individu	ıals		•		
Last Name Donato	First Name Luz			MI E	Cash	contribution:  X Personal C  y Order Credit/Det		Contributio	n ID#	Amount of Contribution
Residential Street Address 15 Vera St		City East Have	n		State CT	Zip Code 06512		7/12/2010	l	
Principal Occupation Assistant nurse		Name of Em Amedisys	-			Is this contribution association 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	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00
Last Name McAllisten	First Name John			MI	x Cash	contribution: Personal C		Contributio	n ID#	Amount of Contribution
Residential Street Address 50 Turkey Plain Rd		City Bethel			State CT	Zip Code 06801		ate Received 7/12/2010	ı	
Principal Occupation Police Officer		Name of Em Town of F	-			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	Executive	Yes X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribut	tions 00.00	\$100.00
Last Name Saadi	First Name Thomas			MI J	Cash	contribution:  X Personal C  Order Credit/Det		Contributio	n ID#	Amount of Contribution
Residential Street Address 24 Tobin Ct		City Danbury			State CT	Zip Code 06810		nate Received 7/12/2010	l	
Principal Occupation Attorney		Name of Emp	ployer Connecticut		•	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	Executive	Yes X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut	tions 50.00	\$50.00
Last Name DeMatteo	First Name Rosemari	e		MI	x Cash	contribution: Personal C		Contributio	n ID#	Amount of Contribution
Residential Street Address 504 Woodward Ave		City New Have	n		State CT	Zip Code 06512		ate Received 7/12/2010		
Principal Occupation		Name of Emp Retired	ployer		•	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	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut \$1	tions 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE							FILIN	G DUE DATE				
Friends Of Gerry Garcia												
		B. Itemized Contribu	ıtions fron	n Individu	ıals							
Last Name	First Name		MI		contribution:	Contrib	ution ID#	Amount of				
DeMatteo	Joseph			Cash Money	y Order Personal C Credit/Deb	0657		Contribution				
Residential Street Address		City	-	State	Zip Code	Date Receiv	red					
504 Woodward Ave		New Haven		СТ	06512	07/12/20	)10	1				
Principal Occupation		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	outor a lobbyis at child of a lob Yes	byist?	Aggregate Conti	sibutions \$100.00	\$100.00				
Last Name Mota	First Name Joshua		MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck 0893	ution ID#	Amount of Contribution				
Residential Street Address 18 Abbott St		City Bridgeport	•	State CT	Zip Code 06606	Date Receiv						
Principal Occupation Electrical Tech		Name of Employer ASML		•	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	butor a lobbyis at child of a lob Yes	byist?	Aggregate Conti	sibutions \$100.00	\$100.00				
Last Name Garcia-Perez	First Name Ana		MI	x Cash	contribution: Personal C	heck 0662	ution ID#	Amount of Contribution				
Residential Street Address 55 Redfield St		City New Haven	•	State CT	Zip Code 06519	Date Receiv 07/12/20						
Principal Occupation  Cafeteria		Name of Employer Yale New Haven Hosp		•	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	butor a lobbyis at child of a lob Yes	byist?	Aggregate Conti	ibutions \$100.00	\$100.00				
Last Name Caldera	First Name Yolanda		MI	Cash	contribution: Personal C	heck 0630	ution ID#	Amount of Contribution				
Residential Street Address		City		State	Zip Code	Date Receiv						
93 Knobb Hill Rd		Milford		СТ	06460	07/12/20		1				
Principal Occupation		Name of Employer			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 at child of a lob	byist?	Aggregate Conti	ibutions \$30.00	\$30.00				

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name Andino	First Name Lissette			MI	Cash	contribution: Personal ( y Order X Credit/De		Contributi 0631	on ID#	Amount of Contribution
Residential Street Address 102 Lansdale Ave		City Milford			State CT	Zip Code 06460		Date Received		
Principal Occupation Public Affairs		Name of E	mployer st Utilities			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 Adorno	First Name Maria			MI	Cash	contribution:  X Personal ( y Order		Contributi 0640	on ID#	Amount of Contribution
Residential Street Address 43 Maltby St		City New Hav	ren		State CT	Zip Code 06513		Date Received		
Principal Occupation		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 es	byist?	Aggre	egate Contrib	utions \$25.00	\$25.00
Last Name Feliciano	First Name Raul			MI	X Cash	contribution: Personal 0 y Order Credit/De		Contributi 0642	on ID#	Amount of Contribution
Residential Street Address 260 Bull Hill Ln		City West Ha	ven		State CT	Zip Code 06516		Date Received		
Principal Occupation Pastor		Name of E	mployer			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 Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contrib	utions \$60.00	\$60.00
Last Name Caban	First Name Manuel			MI	X Cash	contribution: Personal ( y Order Credit/De		Contributi 0643	on ID#	Amount of Contribution
Residential Street Address 246 Elm St		City West Ha	ven		State CT	Zip Code 06516		Date Received		
Principal Occupation Minister		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	byist?	Aggre	egate Contrib	utions \$10.00	\$10.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE FILING DU										
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Rodriguez	First Name Maria		MI	x Cash	contribution: Personal Cl	heck 0892	ution ID#	Amount of Contribution		
Residential Street Address 579 Wooster St		City Naugatuck		State CT	Zip Code 06770	Date Receiv 07/12/20				
Principal Occupation Office manager		Name of Employer CET			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 Contr	\$100.00	\$100.00		
Last Name Rodriguez	First Name Leonardo		MI	x Cash	contribution: Personal Cl / Order Credit/Deb	heck 0883	ution ID#	Amount of Contribution		
Residential Street Address 579 Wooster St		City Naugatuck		State CT	Zip Code 06770	Date Receiv 07/12/20				
Principal Occupation  Arch		Name of Employer Podriquez Associates		•	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 Contr	ibutions \$100.00	\$100.00		
Last Name Wilson	First Name Andrea		MI	Cash	contribution:    X   Personal Cl	heck 0637	ution ID#	Amount of Contribution		
Residential Street Address 111 Nashville Rd		City Bethel		State CT	Zip Code 06801	Date Receiv 07/12/20				
Principal Occupation		Name of Employer unemployed		•	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 Contr	ibutions \$100.00	\$100.00		
Last Name Burgos	First Name Diana		MI	Cash	contribution:    X   Personal Cl	heck 0634	ution ID#	Amount of Contribution		
Residential Street Address 8 Corn Tassle Rd		City Danbury		State CT	Zip Code 06811	Date Receiv 07/12/20				
Principal Occupation Public Housing Administrator		Name of Employer Ridgefield Housing Authority	,		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	G DUE DATE
Friends Of Gerry Garcia										
		B. Itemized Contri	ibutions f	from Indi	ividu	als				
Last Name Jackson	First Name Peter		MI		nod of c Cash Money	ontribution: Personal Cl Order X Credit/Deb		Contribution	on ID#	Amount of Contribution
Residential Street Address 54 Killam's Pt		City Branford		State CT	;	Zip Code 06405		7/12/2010		
Principal Occupation  Architect		Name of Employer Peter Jackson Architects	;			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 N  Executive Legislative		endent child of		pyist?	Aggreg	gate Contribu	50.00	\$25.00
Last Name Jackson	First Name Peter		MI		od of c Cash Money	ontribution: Personal Cl Order X Credit/Deb		Contribution 0633	on ID#	Amount of Contribution
Residential Street Address 54 Killam's Pt		City Branford		State CT	;	Zip Code 06405		ate Received 7/12/2010	0	
Principal Occupation  Architect		Name of Employer Peter Jackson Architects	5	•		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 N  Executive Legislative		ontributor a lo		pyist?	Aggreg	gate Contribu	itions \$50.00	\$25.00
Last Name Kuhr	First Name Gayle		MI		nod of c Cash Money	ontribution: Personal Cl Order X Credit/Deb		Contribution	on ID#	Amount of Contribution
Residential Street Address 85D E Broadway		City Milford		State CT	;	Zip Code 06460		ate Received 7/12/2010		
Principal Occupation Account Manager		Name of Employer ADP		•		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 N  Executive Legislative	Is co	endent child of		pyist?	Aggreg	gate Contribu	tions \$50.00	\$50.00
Last Name Onorado	First Name		MI	X.	nod of c Cash Money	ontribution: Personal Cl Order Credit/Deb		Contribution 0673	on ID#	Amount of Contribution
Residential Street Address 54 Howard St		City New Haven		State CT		Zip Code 06513		ate Received 7/12/2010		
Principal Occupation Attorney		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 N  Executive Legislative		ontributor a lo		pyist?	Aggreg	gate Contribu \$1	itions	\$100.00

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribu	ıtions fron	n Individu	ıals			
Last Name Schleifer	First Name Nancy		MI E	x Cash	contribution: Personal Ch y Order Credit/Debi	neck 0638	ution ID#	Amount of Contribution
Residential Street Address 65 Old Stagecoach Rd		City Redding		State CT	Zip Code 06896	Date Receiv		
Principal Occupation Photographer		Name of Employer self		•	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 No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggregate Cont	ributions \$100.00	\$100.00
Last Name Yannielli	First Name Leonard		MI	Cash	contribution:  Personal Ch y Order  X Credit/Debi	neck 0717	ution ID #	Amount of Contribution
Residential Street Address 9 Chestnut St		City Naugatuck		State CT	Zip Code 06770	Date Receiv		
Principal Occupation Retired Educator		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	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Cont	ributions \$10.00	\$10.00
Last Name Rodriguez	First Name Evelyn		MI	x Cash	contribution:  Personal Ch y Order Credit/Debi	neck 0666	ution ID#	Amount of Contribution
Residential Street Address 79 Arch St		City New Haven	·	State CT	Zip Code 06519	Date Receiv		
Principal Occupation Adjudication Specialist		Name of Employer Dept of Labor			Is this contribution associate fundraising event listed in St. 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 Cont	ributions \$100.00	\$100.00
Last Name Pipeling	First Name Jeff		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	neck 0667	ution ID #	Amount of Contribution
Residential Street Address 463 Second Ave		City West Haven		State CT	Zip Code 06516	Date Receiv		
Principal Occupation  Independent Marketing Consultant	t	Name of Employer Self employed		•	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	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	G DUE DATE	
Friends Of Gerry Garcia									
		B. Itemized Contribut	ions fron	Individu	ıals				
Last Name	First Name		MI		contribution:	Contrib	ıtion ID#	Amount of	
Garcia	Gregorio			X Cash Money	Personal Cl y Order Credit/Deb	0644		Contribution	
Residential Street Address		City		State	Zip Code	Date Receiv	ed		
66 Altwater St		New Haven		СТ	06513	07/12/20	10	_	
Principal Occupation		Name of Employer		•	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 Contr	\$5.00	\$5.00	
Last Name Hernandez	First Name Miguel		MI	Cash	contribution:    X   Personal Cl	heck 0645	ution ID#	Amount of Contribution	
Residential Street Address 45 Wolsy St		City New Haven		State CT	Zip Code 06513	Date Receiv 07/12/20			
Principal Occupation pastor		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 Yes	byist?	Aggregate Contr	systems \$75.00	\$75.00	
Last Name Joel	First Name Diaz		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	heck 0646	ution ID#	Amount of Contribution	
Residential Street Address  2A Station Cart		City New Haven		State CT	Zip Code 06519	Date Receiv 07/12/20			
Principal Occupation Pator		Name of Employer self		<b>!</b>	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 x	byist?	Aggregate Contr	ibutions \$100.00	\$100.00	
Last Name Macri	First Name Edie		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	heck 0649	ution ID#	Amount of Contribution	
Residential Street Address		City		State	Zip Code	Date Receiv	ed	]	
89 Terrace St		East Haven		СТ	06512	07/12/20	10	1	
Principal Occupation		Name of Employer Retired			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	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Contr	ibutions \$100.00	\$100.00	

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contributi	ons fron	ı Individu	ıals			
Last Name Diosa	First Name Hernando		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	eck 065	ribution ID #	Amount of Contribution
Residential Street Address 40 Pine View Dr		City East Haven		State CT	Zip Code 06512	Date Reco		
Principal Occupation Bus Driver		Name of Employer First Student		•	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 Co	ntributions \$100.00	\$100.00
Last Name Diosa	First Name Christoph	er	MI	X Cash	contribution:  Personal Ch y Order Credit/Debi	eck 065	ribution ID#	Amount of Contribution
Residential Street Address 40 Pine View Dr		City East Haven		State CT	Zip Code 06512	Date Reco		
Principal Occupation Asst. Pharmacist		Name of Employer St Raphael's Hospital			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 Co	ntributions \$100.00	\$100.00
Last Name Alvarez	First Name Veronica		MI	x Cash	contribution:  Personal Ch y Order Credit/Debi	eck 089	ribution ID #	Amount of Contribution
Residential Street Address 528 Conn Ave		City Bridgeport		State CT	Zip Code 06607	Date Reco		
Principal Occupation Sales person		Name of Employer Burlington Coat Factory			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 Co	s50.00	\$50.00
Last Name Flores	First Name Jeanette		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	eck 089	ribution ID#	Amount of Contribution
Residential Street Address 111 Carieton Ave		City Bridgeport		State CT	Zip Code 06604	Date Reco		
Principal Occupation		Name of Employer Self employed			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	byist?	Aggregate Co	ntributions \$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions from	Individu	ıals					
Last Name Foldy	First Name Thomas		MI	Cash	contribution:    X   Personal Cl	heck 1001	ution ID#	Amount of Contribution		
Residential Street Address 79 Tesiny Ave		City Bridgeport		State CT	Zip Code 06606	Date Receiv 07/12/20				
Principal Occupation  Marshall		Name of Employer State 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- state contractor? Is yes, indicate which 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 Appleby	First Name Arnold		MI	X Cash	contribution: Personal Cl	heck 0976	ution ID#	Amount of Contribution		
Residential Street Address 29 Elmsted Rd		City Trumbull		State CT	Zip Code 06611	Date Receiv 07/13/20				
Principal Occupation		Name of Employer self employed		•	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 Yes	byist?	Aggregate Contr	ibutions \$20.00	\$20.00		
Last Name Torres	First Name Myrna		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	heck 0983	ution ID#	Amount of Contribution		
Residential Street Address 106 Judson Pl		City Bridgeport		State CT	Zip Code 06610	Date Receiv 07/13/20				
Principal Occupation operating room tech		Name of Employer Bridgeport Hosp			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	byist?	Aggregate Contr	ibutions \$100.00	\$100.00		
Last Name Ayala	First Name Lisa		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	heck 0905	ution ID#	Amount of Contribution		
Residential Street Address 318 Pleasantview Ave		City Bridgeport		State CT	Zip Code 06606	Date Receiv 07/13/20				
Principal Occupation Teacher		Name of Employer City of Bpt		•	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 Contr	ibutions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contributi	ions from	Individu	ıals					
Last Name Quinones	First Name David		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck 0901	oution ID#	Amount of Contribution		
Residential Street Address 318 Pleasantview Ave		City Bridgeport		State CT	Zip Code 06606	Date Recei 07/13/2				
Principal Occupation Technician		Name of Employer Cablevision			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	ributions \$100.00	\$100.00		
Last Name Arguela	First Name Jonathan		MI	X Cash	contribution: Personal Cl	neck 0902	oution ID#	Amount of Contribution		
Residential Street Address 87 Kent Ave		City Bridgeport		State CT	Zip Code 06610	Date Recei 07/13/2				
Principal Occupation  Mail Carrier		Name of Employer United Postal Service		•	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		
Last Name Martinez	First Name Miguel		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 0904	oution ID#	Amount of Contribution		
Residential Street Address 148 Wheeler Ave		City Bridgeport		State CT	Zip Code 06606	Date Recei 07/13/2				
Principal Occupation  Carpentor		Name of Employer Construction Systems M.A.			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	ributions \$100.00	\$100.00		
Last Name Solano	First Name Amy		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck 0913	oution ID#	Amount of Contribution		
Residential Street Address 250 Myrtle St		City Shelton		State CT	Zip Code 06484	Date Recei 07/13/2				
Principal Occupation Sales Administrator		Name of Employer Bank Card Depot		•	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	ributions \$100.00	\$100.00		

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ions from	Individu	ıals				
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
Adorno	Denise				X Cash Money	y Order Personal C		0914		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
173 Myrtle St		Shelton			СТ	06484	0	7/13/201	0	
Principal Occupation		Name of E	mployer		•	Is this contribution assoc	ated with	a [	Yes	Ī
Hairdressing asst		Self emp	oloyed			fundraising event listed in If yes, list Event #	Section I	J1?	No	
Is contributor a principal of a state contractor of state contractor?	or prospective		Yes X No		utor a lobbyis		Aggre	egate Contribu	utions	
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:		Contributi	on ID#	Amount of
Rivera	Lyndia				Cash Money	y Order X Personal C		0915		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		1
49 Hillside Ave		Bridgepo	rt		СТ	06604	0	7/13/201	0	
Principal Occupation		Name of E	mployer			Is this contribution associ			Yes	
Teacher		City of B	Bpt			fundraising event listed in If yes, list Event #	i Section .	)1?	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	1 —	child of a lob	•		\$:	100.00	\$100.00
government the contract is with:	<u></u>	Executive	Legislative	+ -	1			1		<u> </u>
Last Name Rodriguez	First Name William			MI	Method of Cash	contribution:  Personal 0	Check	Contribution	on ID#	Amount of Contribution
						y Order Credit/De	bit Card	0917		Commodition
Residential Street Address		City			State	Zip Code	D	ate Received		
488 William St		Bridgepo	rt		СТ	06608	0	7/13/201	0	
Principal Occupation		Name of E	mployer			Is this contribution associ fundraising event listed in			Yes	
Landscaping		Self				If yes, list Event #	i section .	, 1 ·	No	
Is contributor a principal of a state contractor of	or prospective		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			_	I	child of a lob	•		\$:	100.00	\$100.00
government the contract is with:		Executive	Legislative	L \	res X	No		1		
Last Name	First Name			MI	Method of Cash	contribution:	Theck	Contributi	on ID#	Amount of
Solano	Denise					y Order Credit/De		0934		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
755 Artic St		Bridgepo	rt		СТ	06608	0	7/13/201	0	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes	
Hair styler		self emp	oloyed			If yes, list Event #	. Section :	х	No	
Is contributor a principal of a state contractor of	or prospective	•	Yes X No		utor a lobbyis		Aggre	gate Contribu	utions	Ī
state contractor? Is yes, indicate which branch or branches of		P 2		dependent	child of a lob	-		9	\$75.00	\$75.00
government the contract is with:	ᆜ	Executive	Legislative	Т п,	es	INO				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ions fron	ı Individu	ıals				
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of
Ayala	Ines				X Cash	y Order Personal C		0936		Contribution
Residential Street Address		City			State			ate Received		1
1606 Madison Ave Fl 1		City Bridgepo	rt		CT	Zip Code 06606		7/13/201		
Principal Occupation		Name of Er	mployer		-	Is this contribution associ	ated with	a [	Yes	İ
consultant		self emp				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	t, spouse, or	Aggre	egate Contribu	utions	†
state contractor? Is yes, indicate which branch or branches of					child of a lob	-		9	\$75.00	\$75.00
government the contract is with:	<u></u> Ц	Executive	Legislative	+-			<u> </u>	1		<u> </u>
Last Name LaLuz	First Name Angle			MI	Method of Cash	contribution:  Personal C	Check	Contribution	on ID#	Amount of Contribution
					Money	y Order Credit/De	bit Card	0650		
Residential Street Address		City			State	Zip Code		ate Received		
72 Fairmont Ave # 201B		New Have	en		СТ	06511	0	7/13/201	0	
Principal Occupation		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	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:	•	Contributi	on ID#	Amount of
Marden	Wanda				Cash Money	y Order		0652		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
24 Alyssa Ln		Fairfield			СТ	06825	0	7/13/201	0	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in		<sub>11?</sub>	Yes	
Tax Collector		Georgeto	own Fire District			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	egate 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	+ -	1			1		<u> </u>
Last Name Hernandez	First Name Gilberto			MI	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution
						y Order Credit/De	bit Card	0694		Commodulon
Residential Street Address		City			State	Zip Code	D	ate Received		
225 Hough St		Bridgepo	rt		СТ	06608	0	7/13/201	0	
Principal Occupation		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 state contractor?	or prospective		Yes X No		utor a lobbyis child of a lob		Aggre	egate Contribu	utions \$50.00	\$50.00
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		res x	No			, 0	\$30.00

		I. M	ONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Ite	mized Contributi	ons from	Individu	ıals		•		
Last Name Rodriguez	First Name Myrian			MI	X Cash	contribution: Personal C y Order Credit/Det		Contributio	n ID#	Amount of Contribution
Residential Street Address 194 Hamilton St		City New Have	n		State CT	Zip Code		7/13/2010	l	
Principal Occupation Social Worker		Name of Emp	•		•	Is this contribution association 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	utor a lobbyis child of a lob es X	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00
Last Name Pothin	First Name Timothy			MI	X Cash	contribution:  Personal C  y Order Credit/Del		Contributio	n ID#	Amount of Contribution
Residential Street Address 17 Mill Rd		City Guilford			State CT	Zip Code 06437		ate Received 7/13/2010	ı	
Principal Occupation attorney		Name of Emp			•	Is this contribution association fundraising event listed in If yes, list Event # 07:	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  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribut	tions 45.00	\$45.00
Last Name Ford	First Name Daniel			MI	X Cash	contribution: Personal C		Contributio	n ID#	Amount of Contribution
Residential Street Address 9 Marne Ave		City Fairfield			State CT	Zip Code 06825		ate Received 7/13/2010	ı	
Principal Occupation attorney		Name of Em	ployer		•	Is this contribution association fundraising event listed in If yes, list Event # 072	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	byist?	Aggre	gate Contribut	tions 10.00	\$10.00
Last Name Galalioto	First Name Santo			MI	x Cash	contribution:  Personal C y Order Credit/Deb		Contributio 0702	n ID#	Amount of Contribution
Residential Street Address 170 Ohman Ave		City Orange			State CT	Zip Code 06477		7/13/2010	ı	
Principal Occupation teacher		Name of Em	ployer Public Schools			Is this contribution association fundraising event listed in If yes, list Event # 07:	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	byist?	Aggre	gate Contribut	tions 20.00	\$20.00

		I. MC	ONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Iten	nized Contributi	ons from	Individu	ıals		•		
Last Name Cabrera	First Name Eric			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0719	ı ID#	Amount of Contribution
Residential Street Address 264 Sunrise Ter .		City Bridgeport			State CT	Zip Code 06606		7/13/2010		
Principal Occupation Community Clinician		Name of Empl	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	child of a lob	byist?	Aggre	gate Contributi \$5	ions 50.00	\$50.00
Last Name Delgado	First Name Pedro			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0720	n ID#	Amount of Contribution
Residential Street Address 83 Bonnie View Dr		City Trumbull			State CT	Zip Code		ate Received 7/13/2010		
Principal Occupation  Management Consulting		Name of Empl EditgroupII	-		•	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 res	byist?	Aggre	gate Contributi \$10	ions 00.00	\$100.00
Last Name Gettinger	First Name Margaret			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0706	n ID#	Amount of Contribution
Residential Street Address 17 Orchard St		City Milford			State CT	Zip Code 06460		Pate Received		
Principal Occupation nurse		Name of Empl Masonicare	-			Is this contribution associ- fundraising event listed in If yes, list Event # 07	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 lobbyis child of a lob res	byist?	Aggre	gate Contributi \$5	ions 50.00	\$50.00
Last Name Mangini	First Name Louis			MI	Cash	contribution:  X Personal C  y Order Credit/Del		Contribution 0712	ı ID#	Amount of Contribution
Residential Street Address  1 Front St # U116		City New Haven			State CT	Zip Code 06513		ate Received 7/13/2010		
Principal Occupation staff		Name of Empl US House	-			Is this contribution associfundraising event listed in If yes, list Event # 07	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 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								FILING	DUE DATE		
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Tessitore	First Name Carmina		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck	Contribution 0713	ID#	Amount of Contribution		
Residential Street Address 18 Church Rd		City Seymour		State CT	Zip Code 06483		e Received /13/2010				
Principal Occupation Atty/clerk		Name of Employer NH Superior Court			Is this contribution associa fundraising event listed in If yes, list Event # 071		· X				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which 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 \$1	ons 10.00	\$10.00		
Last Name Spennato	First Name Gionanni		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck	Contribution 0714	ID#	Amount of Contribution		
Residential Street Address 47 S Montowese St		City Branford		State CT	Zip Code 06405		e Received /13/2010				
Principal Occupation		Name of Employer State Of CT		•	Is this contribution associa fundraising event listed in If yes, list Event # 071	Section J1?	2 X				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which 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?	Aggrega	ate Contribution	ons 25.00	\$25.00		
Last Name Tickey	First Name James		MI J	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck	Contribution 0716	ID#	Amount of Contribution		
Residential Street Address 6 Coachmans Ln		City Huntington		State CT	Zip Code 06484		e Received /13/2010				
Principal Occupation field director		Name of Employer Friends Of Susan 2010			Is this contribution associa fundraising event listed in If yes, list Event # 071	Section J1?	· x				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which 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 \$2	ons 25.00	\$25.00		
Last Name Arcata	First Name Joseph		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck	Contribution 0703	ID#	Amount of Contribution		
Residential Street Address 23 Glenbrook Rd # 637		City Stamford		State CT	Zip Code 06902		e Received /13/2010				
Principal Occupation attorney		Name of Employer self			Is this contribution associa fundraising event listed in If yes, list Event # 071	Section J1?	x				
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which 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 30.00	\$30.00		

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)						
NAME OF COMMITTEE							1	FILING	DUE DATE		
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Allen	First Name Roy		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	neck	Contribution 0856	ID#	Amount of Contribution		
Residential Street Address 138 Mangold Ave		City Bridgeport		State CT	Zip Code 06606		e Received /13/2010				
Principal Occupation Driver		Name of Employer N.E. Transport			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 No  Executive Legislative	dependent	utor a lobbyis child of a lob es X	byist?	Aggregat	ste Contribution \$10	ons 0.00	\$100.00		
Last Name Davilla	First Name Vivian		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck	Contribution	ID#	Amount of Contribution		
Residential Street Address 109 Seeley St		City Bridgeport		State CT	Zip Code 06605		e Received /13/2010				
Principal Occupation  Marketing asst		Name of Employer Breitling USA, Inc		•	Is this contribution associal fundraising event listed in S If yes, list Event #		) X	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 Yes	byist?	Aggregat	ate Contribution	ons 0.00	\$100.00		
Last Name Torres	First Name Paul		MI	X Cash	contribution:  Personal Ch y Order Credit/Debi	neck	Contribution 0854	ID#	Amount of Contribution		
Residential Street Address 208 Colorado Ave		City Bridgeport		State CT	Zip Code 06605		e Received /13/2010				
Principal Occupation  Mechanic		Name of Employer Self employed			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?	Aggregat	ste Contribution \$10	ons 0.00	\$100.00		
Last Name Padilla, III	First Name Julio		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck	Contribution 0938	ID#	Amount of Contribution		
Residential Street Address 50 Breyer Ave		City Bridgeport		State CT	Zip Code 06606		e Received /13/2010				
Principal Occupation Stock		Name of Employer Lindley Catering			Is this contribution associal fundraising event listed in S 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	ons 0.00	\$50.00		

		I. MONETARY RI	ECEIPTS	S (Sectio	n A-I)						
NAME OF COMMITTEE							FII	LING DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Rosado	First Name Diana		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 0	ontribution ID	# Amount of Contribution			
Residential Street Address 289 Hough Ave		City Bridgeport		State CT	Zip Code 06606		Received .3/2010				
Principal Occupation RN		Name of Employer A.B.C.D.		•	Is this contribution associa fundraising event listed in 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	Contributions \$100.0	\$100.00			
Last Name Means	First Name Tia		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 0	ontribution ID	# Amount of Contribution			
Residential Street Address 1606 Madison Ave Fl 2		City Bridgeport		State CT	Zip Code 06606		Received .3/2010				
Principal Occupation  Nurses Aide		Name of Employer		•	Is this contribution associa fundraising event listed in 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	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	Contributions \$100.0				
Last Name Podilla	First Name Elizabeth		MI	x Cash	contribution:  Personal Cl y Order Credit/Deb	heck 0	ontribution ID	# Amount of Contribution			
Residential Street Address 218 Honeyspot Rd		City Stratford		State CT	Zip Code 06614		Received .3/2010				
Principal Occupation Analyst		Name of Employer RBS			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 \$100.0				
Last Name Swilling	First Name Roderick		MI	x Cash	contribution:  Personal Cl y Order Credit/Deb	heck 0	ontribution ID	# Amount of Contribution			
Residential Street Address 848 Hancock Ave		City Bridgeport		State CT	Zip Code 06605		Received .3/2010				
Principal Occupation  Machinist		Name of Employer PTC, INC		•	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 \$100.0				

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)						
NAME OF COMMITTEE								FILING	DUE DATE		
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Cooper	First Name Maeghan		MI M	x Cash	contribution: Personal Ch y Order Credit/Debi	neck	Contribution 0704	ID#	Amount of Contribution		
Residential Street Address 37 Pleasant St		City New Haven		State CT	Zip Code 06511		e Received /13/2010				
Principal Occupation attorney		Name of Employer state of ct		•	Is this contribution associal fundraising event listed in 1 If yes, list Event # 071			Yes No			
Is contributor a principal of a state 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	nte Contributio \$2	ons 20.00	\$20.00		
Last Name Gettinger	First Name Benjamin		MI	Cash	contribution:  X Personal Characteristics (Credit/Debi	neck	Contribution 0707	ID#	Amount of Contribution		
Residential Street Address 2 Lincoln St		City New Haven		State CT	Zip Code 06510		e Received /13/2010				
Principal Occupation attorney		Name of Employer Lynch,Traub, keefe		•	Is this contribution associal fundraising event listed in 1 If yes, list Event # 071	Section J1?	? <b>x</b>				
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which 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 Contributio	ons 25.00	\$25.00		
Last Name Sutton	First Name Anthony		MI D	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck	Contribution 0708	ID#	Amount of Contribution		
Residential Street Address 8 Lynmore St		City Milford		State CT	Zip Code 06460		e Received /13/2010				
Principal Occupation attorney		Name of Employer Jacobs, Grudberg			Is this contribution associate fundraising event listed in If yes, list Event # 071	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	nte Contributio \$5	ons 50.00	\$50.00		
Last Name Martinez	First Name Lydia		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck	Contribution 0696	ID#	Amount of Contribution		
Residential Street Address 85 William St		City Bridgeport		State CT	Zip Code 06608		e Received /13/2010				
Principal Occupation		Name of Employer retired			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 25.00	\$25.00		

		I. MONETARY RI	ECEIPT	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	ILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contribu	tions fron	n Individu	ıals		•		
Last Name Johnson	First Name Kylan		MI	Cash	contribution:		Contribution II	D#	Amount of Contribution
Residential Street Address 400 Blake St Apt 4111		City New Haven		State CT	Zip Code 06515		ite Received 7/13/2010		
Principal Occupation		Name of Employer student			Is this contribution associa fundraising event listed in If yes, list Event # 071	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	dependen	outor a lobbyis at child of a lob Yes	byist?	Aggreg	gate Contribution: \$25		\$25.00
Last Name Blancato	First Name Allison		MI	x Cash	contribution:  Personal C y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 30 Tunxis VIg		City Farmington		State CT	Zip Code 06032		ite Received 7/13/2010		
Principal Occupation  Legislative a1d		Name of Employer State of Connecticut, House Democrats	2	•	Is this contribution associa 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	Yes X No  Executive Legislative	dependen	outor a lobbyis at child of a lob Yes	byist?	Aggreg	gate Contribution: \$80		\$80.00
Last Name Hart	First Name David		MI	x Cash	contribution:  Personal C y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 48 Amsterdam Ave		City Bridgeport		State CT	Zip Code 06606		te Received 7/13/2010		
Principal Occupation		Name of Employer None		•	Is this contribution associa fundraising event listed in If yes, list Event #		1 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	dependen	outor a lobbyis at child of a lob Yes	bbyist?	Aggreg	gate Contribution: \$50		\$50.00
Last Name Ayala	First Name Daisy		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 18 Abbott St		City Bridgeport		State CT	Zip Code 06606		tte Received 7/13/2010		
Principal Occupation  Cafeteria-aid		Name of Employer Bpt Nutrition			Is this contribution associa 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	Yes X No  Executive Legislative	dependen	outor a lobbyis at child of a lob	byist?	Aggreg	gate Contributions		\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)						
NAME OF COMMITTEE							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Swirskey	First Name Charles		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	eck 0709	oution ID#	Amount of Contribution			
Residential Street Address 797 Orange St		City New Haven		State CT	Zip Code 06511	Date Recei					
Principal Occupation campaign Manager		Name of Employer Friends Of Rosa DeLaura			Is this contribution associate fundraising event listed in St. If yes, list Event # 071		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 Con	tributions \$50.00	\$50.00			
Last Name Ayala, Jr	First Name Alberto		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck 0942	oution ID#	Amount of Contribution			
Residential Street Address 18 Abbott St		City Bridgeport		State CT	Zip Code 06606	Date Recei					
Principal Occupation Student		Name of Employer None		•	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	byist?	Aggregate Con	tributions \$25.00	\$25.00			
Last Name Avallone	First Name Joy		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck 0697	oution ID#	Amount of Contribution			
Residential Street Address  1 Ashford Ct	•	City Wallingford		State CT	Zip Code 06492	Date Recei					
Principal Occupation  consultant		Name of Employer Deloite tax LLP			Is this contribution associate fundraising event listed in St. 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	\$50.00	\$50.00			
Last Name Sterling	First Name Alinor		MI	Cash	contribution:  Personal Ch y Order  X  Credit/Debi	eck 0722	oution ID#	Amount of Contribution			
Residential Street Address 256 Clark Ave		City Branford		State CT	Zip Code 06405	Date Recei					
Principal Occupation attorney		Name of Employer Koskoff, Koskoff & Bieder		•	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	byist?	Aggregate Con	tributions \$25.00	\$25.00			

		I. MONETARY RE	CEIPTS	S (Section	n A-I)						
NAME OF COMMITTEE							I	FILING	DUE DATE		
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Lopez	First Name Laura		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	neck	Contribution 1	ID#	Amount of Contribution		
Residential Street Address 438 Painter Dr		City West Haven		State CT	Zip Code 06516		e Received /13/2010				
Principal Occupation		Name of Employer unemployed			Is this contribution associate fundraising event listed in the state of the state o			Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which 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	te Contributio \$100	ons 0.00	\$100.00		
Last Name gonzalez	First Name carolyn		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck	Contribution 1	ID#	Amount of Contribution		
Residential Street Address 86 Pinepoint Dr		City Bridgeport		State CT	Zip Code 06606		e Received 13/2010				
Principal Occupation nonprofit		Name of Employer community capital		•	Is this contribution associal fundraising event listed in S 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 es x	byist?	Aggregat	te Contributio \$50	ons 0.00	\$50.00		
Last Name Dorgan	First Name Johanna		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck	Contribution I	ID#	Amount of Contribution		
Residential Street Address 88 Lance Cir		City Bridgeport		State CT	Zip Code 06606		e Received /13/2010				
Principal Occupation Constituent Services		Name of Employer City Of Bridgeport	_		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?	Aggregat	te Contributio \$100	ons 0.00	\$100.00		
Last Name Chiara	First Name David		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	neck	Contribution 1	ID#	Amount of Contribution		
Residential Street Address 12 Huntington Ct		City Bethel		State CT	Zip Code 06801		e Received 13/2010				
Principal Occupation sales		Name of Employer GNC			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?	Aggregat	te Contributio \$100	ons 0.00	\$100.00		

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ons from	ı Individu	ıals		•		
Last Name Smith	First Name Sandra			MI	Cash	contribution:    X   Personal C		Contributio	on ID#	Amount of Contribution
Residential Street Address 5 Anchorage Dr		City Milford			State CT	Zip Code 06460		Pate Received 17/13/2010	)	
Principal Occupation attorney		Name of Er Parotti, I	nployer Parto, Parese			Is this contribution associ- fundraising event listed in If yes, list Event # 07	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  Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribut	tions 20.00	\$20.00
Last Name Padilla	First Name Aida			MI	x Cash	contribution:  Personal C y Order Credit/Del		Contributio	on ID#	Amount of Contribution
Residential Street Address 194 Marigold Ave		City Bridgepo	rt		State CT	Zip Code 06606		ate Received 17/13/2010	)	
Principal Occupation		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	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	egate Contribut	tions 25.00	\$25.00
Last Name Sanchez	First Name Ismael			MI	x Cash	contribution: Personal C y Order Credit/Del		Contributio	on ID#	Amount of Contribution
Residential Street Address 1285 Pembroke St		City Bridgepo	rt		State CT	Zip Code 06608		oate Received 07/13/2010	)	
Principal Occupation Handyman		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  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	egate Contribut \$1	tions 00.00	\$100.00
Last Name Rodriguez	First Name Jose			MI	x Cash	contribution:  Personal C  y Order Credit/Del		Contributio	on ID#	Amount of Contribution
Residential Street Address 1285 Pembroke St		City Bridgepo	rt		State CT	Zip Code 06608		oate Received 17/13/2010	)	
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 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 RE	CEIPTS	S (Section	n A-I)						
NAME OF COMMITTEE							F	ILING	DUE DATE		
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Sibal	First Name Miriam		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	eck 0	Contribution II	D#	Amount of Contribution		
Residential Street Address 773 Kossuth St		City Bridgeport		State CT	Zip Code 06608		Received 13/2010				
Principal Occupation Bartender/waitress		Name of Employer Metric Bar Grill		•	Is this contribution associat fundraising event listed in S If yes, list Event #		X N	res No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which 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 \$100		\$100.00		
Last Name Keyes	First Name Suzanne		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck 0	Contribution II	D#	Amount of Contribution		
Residential Street Address 63 Marvel Rd		City New Haven		State CT	Zip Code		Received 13/2010				
Principal Occupation Homemaker		Name of Employer None		•	Is this contribution associat fundraising event listed in S If yes, list Event #		X N	res No			
Is contributor a principal of a state contractor state contractor? Is yes, indicate which 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 \$100		\$100.00		
Last Name carmody	First Name samuel		MI L	Cash	contribution:  X Personal Ch y Order Credit/Debi	eck 0	Contribution II	D#	Amount of Contribution		
Residential Street Address 210 High St		City Wallingford		State CT	Zip Code 06492		Received 13/2010				
Principal Occupation reg of voters		Name of Employer town of wallingford			Is this contribution associat fundraising event listed in S  If yes, list Event # 071	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 ves	byist?	Aggregate	e Contribution \$50		\$15.00		
Last Name Goldberg	First Name Carol		MI	Cash	contribution:    X   Personal Ch	eck 0	Contribution II	D#	Amount of Contribution		
Residential Street Address 5 N Humiston Dr		City Bethany		State CT	Zip Code 06524		Received 13/2010				
Principal Occupation Attorney		Name of Employer State of Connecticut			Is this contribution associat fundraising event listed in S If yes, list Event #		X N	res No			
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which 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 \$75		\$75.00		

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)						
NAME OF COMMITTEE							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Droyton-Rogers	First Name Mary Ann	1	MI	Cash	contribution:  X Personal Characteristics of the contribution:  y Order Credit/Debi	eck 087	atribution ID #	Amount of Contribution			
Residential Street Address 95 Good Hill Rd		City Oxford		State CT	Zip Code 06478	Date Rec 07/14/					
Principal Occupation First Selectman		Name of Employer Town of Oxford			Is this contribution associate fundraising event listed in St. 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 \$30.00	\$30.00			
Last Name Avila	First Name Raul		MI	x Cash	contribution: Personal Chy Order Credit/Debi	eck 073	atribution ID#	Amount of Contribution			
Residential Street Address 137 Wolcott St		City New Haven		State CT	Zip Code 06513	Date Rec 07/14/					
Principal Occupation		Name of Employer			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 lobbyis child of a lob es	byist?	Aggregate Co	ontributions \$25.00	\$25.00			
Last Name Avila	First Name Raul		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck 073	atribution ID #	Amount of Contribution			
Residential Street Address 137 Wolcott St		City New Haven	•	State CT	Zip Code 06513	Date Rec 07/14/					
Principal Occupation		Name of Employer			Is this contribution associate fundraising event listed in St. 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 \$25.00	\$25.00			
Last Name Petronella	First Name Ronald	,	MI	Cash	contribution: Personal Ch y Order X Credit/Debi	eck 073	atribution ID#	Amount of Contribution			
Residential Street Address 868 Monroe Tpke		City Monroe		State CT	Zip Code 06468	Date Rec					
Principal Occupation union rep		Name of Employer U.f.c.w			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	byist?	Aggregate Co	ontributions \$100.00	\$100.00			

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	ILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contributi	ons fron	Individu	ıals		·		
Last Name Geller	First Name Barbara		MI	x Cash	contribution: Personal Ch  Order Credit/Debi	eck 0	Contribution II	D#	Amount of Contribution
Residential Street Address 276 Marvelwood Dr		City New Haven		State CT	Zip Code 06515		Received 14/2010		
Principal Occupation Administrator		Name of Employer State of CT - DMHAS		•	Is this contribution associat fundraising event listed in S If yes, list Event #		X N	es No	
Is contributor a principal of a state contractor state contractor?  Is yes, indicate which 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 Hughes	First Name John		MI	Cash	contribution:  X Personal Ch  Order Credit/Debi	eck 0	Contribution II	D#	Amount of Contribution
Residential Street Address 68 W Rock Ave		City New Haven		State CT	Zip Code 06515		Received 14/2010		
Principal Occupation Physicial		Name of Employer West Haven VA		•	Is this contribution associat fundraising event listed in S If yes, list Event #		X N	es Io	
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	e Contribution \$100		\$100.00
Last Name Morten	First Name Charles		MI	Cash	contribution: Personal Ch v Order X Credit/Debi	eck 0	Contribution II	D#	Amount of Contribution
Residential Street Address 975 Peter Rd		City Southbury		State CT	Zip Code 06488		Received 14/2010		
Principal Occupation Physcian Assistant		Name of Employer  Danbury Health Systems			Is this contribution associat fundraising event listed in S If yes, list Event #		X No	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 Pena	First Name David		MI	Cash	contribution: Personal Ch / Order X Credit/Debi	eck 0	Contribution II	D#	Amount of Contribution
Residential Street Address 11 Avalon Dr		City Avon		State CT	Zip Code 06001		Received 14/2010		
Principal Occupation Consultant		Name of Employer self			Is this contribution associat fundraising event listed in S 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	byist?	Aggregate	e Contribution \$25		\$25.00

		I. MONETARY RI	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILIN	NG DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribu	tions fron	ı Individu	ıals			
Last Name Walker	First Name Toni		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address 1643 Ella Grasso Blvd		City New Haven		State CT	Zip Code 06511		Received 14/2010	
Principal Occupation Social Worker		Name of Employer New Haven Adult Education	1		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	e Contributions \$50.00	\$50.00
Last Name Cassella	First Name Marilyn		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck	Contribution ID #	Amount of Contribution
Residential Street Address 17 Seaview Ave		City Branford		State CT	Zip Code 06405		Received 14/2010	
Principal Occupation		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	outor a lobbyis t child of a lob Yes	byist?	Aggregate	e Contributions \$25.00	\$25.00
Last Name Courts	First Name Lyndell		MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck C	Contribution ID #	Amount of Contribution
Residential Street Address 1606 Madison Ave		City Bridgeport		State CT	Zip Code 06606		Received 14/2010	
Principal Occupation Homemaker		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	dependen	outor a lobbyis t child of a lob Yes	bbyist?	Aggregate	e Contributions \$75.00	\$75.00
Last Name Garner, Sr	First Name Kenneth		MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck	Contribution ID#	Amount of Contribution
Residential Street Address 1606 Madison Ave		City Bridgeport		State CT	Zip Code 06606		Received 14/2010	
Principal Occupation Technician		Name of Employer City of Bpt		•	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	e Contributions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contribut	ions from	Individu	ıals						
Last Name	First Name		MI		contribution:		tion ID#	Amount of			
Maher	Kenneth			Cash Money	X Personal Cl y Order Credit/Debi	0748		Contribution			
Residential Street Address	•	City		State	Zip Code	Date Receiv	ed				
10 Knorr Rd		Oxford		СТ	06478	07/14/20	10				
Principal Occupation		Name of Employer Disabled			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 Contr	butions \$60.00	\$60.00			
Last Name Rodriguez	First Name Sergio		MI	Cash	contribution:  X Personal Cl  y Order Credit/Debi	heck 0739	tion ID#	Amount of Contribution			
Residential Street Address 142 Judwin Ave		City New Haven		State CT	Zip Code 06515	Date Receive 07/14/20					
Principal Occupation Empoyment Specialist		Name of Employer Career Resources Inc.			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 Contr	butions \$75.00	\$75.00			
Last Name Mojica	First Name Rafael		MI A	X Cash	contribution:  Personal Cl y Order  Credit/Debi	heck 0980	tion ID#	Amount of Contribution			
Residential Street Address 109 Wordin Ave		City Bridgeport		State CT	Zip Code 06605	Date Receive 07/14/20					
Principal Occupation		Name of Employer retired		<b>!</b>	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 Contr	butions \$100.00	\$100.00			
Last Name Pires	First Name Jose		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	heck 0735	tion ID#	Amount of Contribution			
Residential Street Address 47 St Nicholas Dr		City Bridgeport	•	State CT	Zip Code 06604	Date Receive 07/14/20					
Principal Occupation Accountant		Name of Employer City for 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- state contractor? Is yes, indicate which 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	butions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Con	tributions f	from Individu	ıals						
Last Name Chiara	First Name Nick		MI	x Cash	contribution:  Personal Contribution:  Personal Contribution:  Personal Contribution:	1026	ion ID#	Amount of Contribution			
Residential Street Address 12 Huntington Ct		City Bethel	·	State CT	Zip Code 06801	Date Received 07/14/201					
Principal Occupation		Name of Employer student			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	depe	ontributor a lobbyis endent child of a lob Yes	byist?	Aggregate Contrib	outions 100.00	\$100.00			
Last Name Reynolds	First Name Barbara		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	1015	ion ID#	Amount of Contribution			
Residential Street Address 20 Cannondale Rd		City Weston		State CT	Zip Code 06883	Date Received 07/14/201					
Principal Occupation		Name of Employer homemaker		•	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	depe	ontributor a lobbyis endent child of a lob Yes	byist?	Aggregate Contrib	outions 100.00	\$100.00			
Last Name Germano	First Name David		MI	x Cash	contribution: Personal C	0835	ion ID#	Amount of Contribution			
Residential Street Address 27 Forest Ct N		City Hamden		State CT	Zip Code 06518	Date Received 07/14/201					
Principal Occupation student/delivery		Name of Employer Elli's Hamden		•	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	depe	ontributor a lobbyis endent child of a lob Yes	byist?	Aggregate Contrib	outions 100.00	\$100.00			
Last Name Feliu	First Name David		MI	x Cash	contribution: Personal Ci y Order Credit/Deb	0744	ion ID#	Amount of Contribution			
Residential Street Address 500 Chestnut St		City Cheshire		State CT	Zip Code 06410	Date Received 07/14/201					
Principal Occupation lawyer		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  Executive Legislative	depe	endent child of a lob	byist?	Aggregate Contrib	outions 100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contribut	ions fron	Individu	ıals						
Last Name	First Name		MI	Method of	contribution:		oution ID#	Amount of			
Sherman	Norman			Cash Money	Personal Cl x Credit/Deb	0727		Contribution			
Residential Street Address	•	City	•	State	Zip Code	Date Recei	ved	1			
17 South Mdws		Woodbury		СТ	06798	07/14/2	010				
Principal Occupation		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	utor a lobbyis child of a lob es X	byist?	Aggregate Cont	ributions \$50.00	\$50.00			
Last Name Darvick	First Name Murray		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 0726	oution ID#	Amount of Contribution			
Residential Street Address 97 Holmes Rd		City Ridgefield		State CT	Zip Code 06877	Date Recei					
Principal Occupation		Name of Employer retired		<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 es	byist?	Aggregate Cont	ributions \$25.00	\$25.00			
Last Name Fishman	First Name Joelle		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0751	oution ID #	Amount of Contribution			
Residential Street Address 17 Hobart St		City New Haven		State CT	Zip Code 06511	Date Recei 07/14/2					
Principal Occupation		Name of Employer		1	Is this contribution associa fundraising event listed in If yes, list Event #	ited with a	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 \$5.00	\$5.00			
Last Name Byrne	First Name Emily		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0734	oution ID#	Amount of Contribution			
Residential Street Address 24 Lyon St	•	City New Haven	•	State CT	Zip Code 06511	Date Recei					
Principal Occupation deputy chief of staff		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	dependent	utor a lobbyis child of a lob es	byist?	Aggregate Cont	ributions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	IG DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contribu	tions fron	n Individu	ıals		·				
Last Name Minter	First Name Catherine	2	MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 09	ntribution ID#	Amount of Contribution			
Residential Street Address 14 Shinnecock Pl	•	City Weston	•	State CT	Zip Code 06883	Date Re	eceived -/2010				
Principal Occupation		Name of Employer unemployed		•	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 \$5.00	\$5.00			
Last Name grimsley	First Name justin		MI f	x Cash	contribution:  Personal Cl y Order Credit/Deb	heck 07	ntribution ID#	Amount of Contribution			
Residential Street Address 2093 Plank Rd		City Cheshire		State CT	Zip Code 06410	Date Re	eceived -/2010				
Principal Occupation manager		Name of Employer citizens bank		•	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	\$50.00			
Last Name Casagrande	First Name Antony		MI A	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 10	ntribution ID #	Amount of Contribution			
Residential Street Address 5 Bolduc Ct		City Wolcott		State CT	Zip Code 06716	Date Re					
Principal Occupation Attorney		Name of Employer Carmody & Torrance 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	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggregate C	Contributions \$100.00	\$100.00			
Last Name McGuinness	First Name Sean		MI	x Cash	contribution:  Personal Cl y Order Credit/Deb	heck 08	ntribution ID#	Amount of Contribution			
Residential Street Address 21203 Town Walk Dr		City Hamden		State CT	Zip Code 06518	Date Re 07/14	eceived 1/2010				
Principal Occupation Prosecutor		Name of Employer State's Attorney's Office Ne	w Haven	•	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 \$20.00	\$20.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Friends Of Gerry Garcia											
		B. Itemize	ed Contribution	ons from	Individu	ıals					
Last Name Lioumis	First Name Jason			MI	X Cash	contribution: Personal 0  Order Credit/De		Contribution 0842	on ID#	Amount of Contribution	
Residential Street Address 38 Roosevelt St		City Hamden			State CT	Zip Code 06514		ate Received			
Principal Occupation real estate investment		Name of Employer self	r			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 es X	byist?	Aggre	gate Contribu	utions 100.00	\$100.00	
Last Name baltimore	First Name richard			MI	Cash	contribution:    X   Personal (		Contribution 0837	on ID#	Amount of Contribution	
Residential Street Address 38 Roosevelt St		City Hamden			State CT	Zip Code 06514		ate Received 7/14/201			
Principal Occupation Attorney		Name of Employer City of Hamde			•	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	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribu	utions \$95.00	\$90.00	
Last Name Levin	First Name Dana			MI	Cash	contribution:    X   Personal (		Contribution 1012	on ID#	Amount of Contribution	
Residential Street Address 241 Georgetown Rd		City Weston			State CT	Zip Code 06883		ate Received			
Principal Occupation		Name of Employer none	r			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 Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	egate Contribu	ations \$25.00	\$25.00	
Last Name Shapiro	First Name Amy			MI	Cash	contribution:  X Personal of Order Credit/De		Contribution 1008	on ID#	Amount of Contribution	
Residential Street Address  8 Bridge Rd		City Weston			State CT	Zip Code 06883		ate Received			
Principal Occupation  VP of programming		Name of Employer Vivicast Media				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	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions \$5.00	\$5.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Bixler	First Name Edward		MI	Method of Cash	contribution:		ition ID#	Amount of Contribution			
		T		-	y Order X Credit/Debi	it Card		-			
Residential Street Address  95 Gray Ln		City Goshen		State CT	Zip Code 06756	Date Receive 07/14/20					
Principal Occupation Associate Publisher		Name of Employer Maplegate Media			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	byist?	Aggregate Contr	butions \$25.00	\$25.00			
Last Name Wade	First Name Antionette	e	MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck 0889	ition ID#	Amount of Contribution			
Residential Street Address 110 Pixlee Pl		City Bridgeport		State CT	Zip Code 06610	Date Receive 07/14/20					
Principal Occupation R Nurse		Name of Employer St Vincents			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	byist?	Aggregate Contr	butions \$100.00	\$100.00			
Last Name Dominquez	First Name Daniel		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck 0890	ition ID#	Amount of Contribution			
Residential Street Address 1530 Noble Ave Fl 3		City Bridgeport		State CT	Zip Code 06610	Date Receive 07/14/20					
Principal Occupation DJ		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 No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	butions \$100.00	\$100.00			
Last Name Rodado	First Name David		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck 0891	tion ID#	Amount of Contribution			
Residential Street Address 705 Beechwood Ave		City Bridgeport		State CT	Zip Code 06606	Date Receive 07/14/20					
Principal Occupation mechanic		Name of Employer Self employed			Is this contribution associa fundraising event listed in If yes, list Event #	Section J19	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	butions \$100.00	\$100.00			

		I. MONETARY RI	ECEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contribu	tions fron	ı Individu	ıals				
Last Name Vereen	First Name Willie		MI	x Cash	contribution:  Personal C y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 84 C Yarmich Dr		City Bridgeport		State CT	Zip Code 06608		nte Received 7/14/2010		
Principal Occupation Lineman		Name of Employer Metro North			Is this contribution associa fundraising event listed in If yes, list Event #		L Y	res No	
Is contributor a principal of a 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 Contribution \$100		\$100.00
Last Name Calo	First Name Christoph	ner	MI	x Cash	contribution:  Personal C y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 204 Rosewood Pl		City Bridgeport		State CT	Zip Code 06610		nte Received 7/14/2010		
Principal Occupation  Truck Driver		Name of Employer American Heating Oil			Is this contribution association fundraising event listed in If yes, list Event #		L 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	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggreg	gate Contribution \$100		\$100.00
Last Name Drayton	First Name Koketa		MI	x Cash	contribution:  Personal C y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 181 Garfield Ave		City Bridgeport		State CT	Zip Code 06606		nte Received 7/14/2010		
Principal Occupation Reception		Name of Employer Optimus Health Care			Is this contribution association fundraising event listed in If yes, list Event #			res No	
Is contributor a principal of a 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 Contribution \$100		\$100.00
Last Name Lewis	First Name Karmen		MI	x Cash	contribution:  Personal C y Order Credit/Deb		Contribution II	D#	Amount of Contribution
Residential Street Address 210 Sylvan St		City Bridgeport		State CT	Zip Code 06606		nte Received 7/14/2010		
Principal Occupation		Name of Employer Retired			Is this contribution associa fundraising event listed in If yes, list Event #			res No	
Is contributor a principal of a 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 Contribution \$100		\$100.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contribut	ions fron	Individu	ıals						
Last Name Means	First Name Danielle		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 0885	oution ID#	Amount of Contribution			
Residential Street Address 713 Madison Ave		City Bridgeport		State CT	Zip Code 06606	Date Recei					
Principal Occupation		Name of Employer stay at home mom			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 \$100.00	\$100.00			
Last Name Ramos	First Name Elvis		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 0886	oution ID#	Amount of Contribution			
Residential Street Address 705 Beachwood Ave		City Bridgeport		State CT	Zip Code 06606	Date Recei 07/14/2					
Principal Occupation  Handy man		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 X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	tributions \$100.00	\$100.00			
Last Name Gee	First Name Richard		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 0887	oution ID #	Amount of Contribution			
Residential Street Address 89 Cottage St		City Bridgeport		State CT	Zip Code 06605	Date Recei 07/14/2					
Principal Occupation  Driver for pharmacy		Name of Employer Hancock Pharmacy		•	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 Con	tributions \$100.00	\$100.00			
Last Name Lopez	First Name Coralis		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0874	oution ID#	Amount of Contribution			
Residential Street Address 89 A Chamber St		City New Haven		State CT	Zip Code 06513	Date Recei					
Principal Occupation Payroll Coordinator		Name of Employer Contibuem of Care			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	stributions \$50.00	\$50.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Friends Of Gerry Garcia											
		B. Itemized Contr	ibutions f	from Indiv	vidua	ıls					
Last Name Velasquez	First Name Adam		MI	X c	od of cor Cash Money C	ntribution: Personal Cl Order Credit/Debi		Contribution	on ID#	Amount of Contribution	
Residential Street Address 1761 Dixwell Ave		City Hamden		State CT		Zip Code 06514		7/14/2010			
Principal Occupation  Roofine		Name of Employer Ernest Peterson				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 N  Executive Legislative		contributor a lol endent child of Yes		vist?	Aggreg	gate Contribu	tions 50.00	\$50.00	
Last Name Beckwith	First Name Gail		MI	X c	od of co Cash Money C	ntribution: Personal Cl Order Credit/Debi		Contribution	on ID#	Amount of Contribution	
Residential Street Address 67 Pond St		City Bridgeport		State CT		Zip Code 06606		ate Received 7/14/2010	0		
Principal Occupation		Name of Employer self employed		•		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 N  Executive Legislative		contributor a lol endent child of Yes	-	vist?	Aggre	gate Contribu	utions	\$100.00	
Last Name Barichko	First Name Rick		MI	X c	od of cor Cash Money C	ntribution: Personal Cl Order Credit/Debi		Contributio	on ID#	Amount of Contribution	
Residential Street Address 67 Pond St		City Bridgeport		State CT		Zip Code 06606		nte Received 7/14/2010			
Principal Occupation  Maintenance		Name of Employer St Vincents		•		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 N  Executive Legislative	Is condepe	contributor a lol endent child of Yes		vist?	Aggre	gate Contribu	utions	\$100.00	
Last Name Padilla, Sr	First Name Julio		MI	X c	od of cor Cash Money C	ntribution: Personal Cl Order Credit/Debi		Contribution 0867	on ID#	Amount of Contribution	
Residential Street Address 50 Breyer Ave		City Bridgeport		State CT	- 1	Zip Code 06606		ate Received 7/14/2010			
Principal Occupation Driver		Name of Employer Lindley Foods, Inc				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 N  Executive Legislative		contributor a lol endent child of Yes	-	vist?	Aggreg	gate Contribu	itions	\$100.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Friends Of Gerry Garcia											
		B. It	emized Contributi	ons from	ı Individu	ıals					
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of	
Champagne	Jose				Cash Money	y Order X Personal C		0855		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
115 Cedar St		New Have	en		СТ	06519	0	7/14/201	0		
Principal Occupation Pastor		Name of Er Church o	nployer of God of Prophecy		•	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?	or prospective	<u> </u>	Yes X No		outor a lobbyis t child of a lob	-	Aggre	gate Contribu			
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	1 m	res x	•		\$:	100.00	\$100.00	
Last Name	First Name			MI	Method of	contribution:	1	Contributi	on ID #	Amount of	
Marino	Katherine				X Cash Money	y Order Personal C		0839		Contribution	
Residential Street Address	-	City			State	Zip Code	D	ate Received			
597 Chapel St		New Have	en		СТ	06511	0	7/14/201	0		
Principal Occupation		Name of Er	mployer			Is this contribution associ			Yes		
Teacher		Immanu	el Lutheran School	_		fundraising event listed in If yes, list Event #	1 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  Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggre	gate Contribu	utions 100.00	\$100.00	
Last Name	First Name			MI		contribution:		Contributi	on ID#	Amount of	
Lauzier	Scott				X Cash Money	y Order Personal C		0995		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
13A Colonial Dr		Rocky Hil	I		СТ	06067	0	7/14/201	0		
Principal Occupation		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 prospective	•	Yes X No		outor a lobbyis		Aggre	gate Contribu	ıtions	ĺ	
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		t child of a lob Yes	-		\$3	100.00	\$100.00	
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of	
Gillman	Toby				Cash Money	y Order X Personal C		0840		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
20 Adla Dr		Hamden			СТ	06514	0	7/14/201	0	ļ	
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes		
Substitute teacher		Kelly Ser	rvices			If yes, list Event #	. Section :	х	No		
Is contributor a principal of a state contractor state contractor?	or prospective	•	Yes X No		outor a lobbyis t child of a lob	-	Aggre	gate Contribu	itions	\$100.00	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	Y	res x	No		Ψ.		\$100.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Casini	First Name Kevin		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 0843	ution ID#	Amount of Contribution			
Residential Street Address 78 Olive St Apt 30S		City New Haven		State CT	Zip Code 06511	Date Receiv 07/14/20					
Principal Occupation Attorney		Name of Employer Hunt Leibert			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	sibutions \$100.00	\$100.00			
Last Name Flores	First Name Marcial		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0847	ution ID#	Amount of Contribution			
Residential Street Address 2346 Greenwich Ave		City New Haven		State CT	Zip Code 06519	Date Receiv 07/14/20					
Principal Occupation Security Guard		Name of Employer  New Haven Parking Authority	У	•	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 Contr	sibutions \$100.00	\$100.00			
Last Name Espinal	First Name America		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0850	ution ID#	Amount of Contribution			
Residential Street Address 690 Washington Ave Fl 2		City New Haven		State CT	Zip Code 06519	Date Receiv 07/14/20					
Principal Occupation		Name of Employer unemployed			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	byist?	Aggregate Conti	sibutions \$100.00	\$100.00			
Last Name Torres	First Name Carmen		MI	Cash	contribution:    X   Personal Cl	heck 0852	ution ID#	Amount of Contribution			
Residential Street Address 89 Chambers St		City New Haven		State CT	Zip Code 06511-6513	Date Receiv 07/14/20					
Principal Occupation Nursing		Name of Employer Concentra			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 Contr	ibutions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							F	FILING	DUE DATE		
Friends Of Gerry Garcia											
		B. Itemized Contributi	ions fron	ı Individu	ıals		•				
Last Name Agustin	First Name Jose		MI	x Cash	contribution:  Personal Cl y Order Credit/Deb	neck	Contribution I	ID#	Amount of Contribution		
Residential Street Address 268 First Ave # 3		City West Haven		State CT	Zip Code 06516		e Received 14/2010				
Principal Occupation Cosinero		Name of Employer Scott		•	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 Younger, Sr	First Name Andrew		MI	X Cash	contribution:  Personal Cl y Order Credit/Deb	neck	Contribution I	ID#	Amount of Contribution		
Residential Street Address 291 Vine St		City Bridgeport		State CT	Zip Code 06606		e Received 14/2010				
Principal Occupation  Bouncer		Name of Employer Self employed (Entertainmer	nt)	•	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	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregat	te Contribution		\$100.00		
Last Name Houger	First Name Marisol		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	neck	Contribution I	ID#	Amount of Contribution		
Residential Street Address 291 Vine St		City Bridgeport		State CT	Zip Code 06606		e Received 14/2010				
Principal Occupation Teacher		Name of Employer A.B.C.D.		•	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 Vera	First Name Hector		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	neck	Contribution I	ID#	Amount of Contribution		
Residential Street Address 95 Wharton Pl		City West Haven		State CT	Zip Code 06516		e Received 14/2010				
Principal Occupation Pastor/IT Proffessional		Name of Employer  New Haven Adult Education	Center	•	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		\$100.00		

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contribut	ions fron	Individu	ıals		<u> </u>		
Last Name Mendez	First Name Daniel		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	neck (	Contribution II	ID#	Amount of Contribution
Residential Street Address 268 First Ave		City West Haven		State CT	Zip Code 06516		Received 14/2010		
Principal Occupation Pantry Carmen Antony, New Haven		Name of Employer Scott			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	te Contribution \$50	ns 0.00	\$50.00
Last Name Perez	First Name Jessica		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck	Contribution II	ID#	Amount of Contribution
Residential Street Address 3091 Old Town Rd		City Bridgeport		State CT	Zip Code 06606		Received // 14/2010		
Principal Occupation Phys. Asst. LPRN		Name of Employer Norwalk Hospital		•	Is this contribution associal fundraising event listed in S 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?	Aggregate	te Contribution \$100	1	\$100.00
Last Name Miranda	First Name Melissa		MI	X Cash	contribution:  Personal Ch y Order Credit/Debi	neck (	Contribution II	ID#	Amount of Contribution
Residential Street Address 3091 Old Town Rd		City Bridgeport		State CT	Zip Code 06606		Received 14/2010		
Principal Occupation Teacher		Name of Employer City of Westport BOE			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?	Aggregate	te Contribution \$100	1	\$100.00
Last Name Miranda	First Name Jose		MI	x Cash	contribution: Personal Cl y Order Credit/Debi	neck (	Contribution II	ID#	Amount of Contribution
Residential Street Address 3091 Old Town Rd		City Bridgeport		State CT	Zip Code 06606		Received 14/2010		
Principal Occupation Police Officer		Name of Employer New Haven Police Dept			Is this contribution associal fundraising event listed in S 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	1	\$100.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contribut	tions fron	ı Individu	ıals		•				
Last Name Liberatore	First Name marilyn		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 076	ibution ID #	Amount of Contribution			
Residential Street Address 6 Greens Farms Holw		City Westport		State CT	Zip Code 06880	Date Rece 07/14/2					
Principal Occupation administrator		Name of Employer norwalk public schools			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	\$50.00			
Last Name Liberatore	First Name marilyn		MI	Cash	contribution:  Personal Cl y Order X Credit/Deb	heck 076	ibution ID #	Amount of Contribution			
Residential Street Address 6 Greens Farms Holw		City Westport		State CT	Zip Code 06880	Date Rece 07/14/2					
Principal Occupation administrator		Name of Employer norwalk public schools		•	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	\$50.00			
Last Name Santos	First Name Maria		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 075	ibution ID #	Amount of Contribution			
Residential Street Address 399 Grand Ave Unit 10		City New Haven		State CT	Zip Code 06513	Date Rece 07/14/2					
Principal Occupation		Name of Employer		•	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 \$10.00	\$10.00			
Last Name Mezzo	First Name Eileen		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	heck 072	ibution ID #	Amount of Contribution			
Residential Street Address 63 Beacon Manor Cir		City Naugatuck		State CT	Zip Code	Date Recei					
Principal Occupation Administrator		Name of Employer Naugatuck Board of Educati	on	•	Is this contribution associa fundraising event listed in If yes, list Event # 071	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 lobbyist child of a lob	byist?	Aggregate Cor	stributions \$100.00	\$100.00			

		I. MONETARY RE	CEIPTS (Secti	on A-I)			
NAME OF COMMITTEE						FILING	G DUE DATE
Friends Of Gerry Garcia							
		B. Itemized Contribut	ions from Indivi	luals			
Last Name Mackiewicz	First Name Jeffrey		Cas	of contribution:  h Personal C  ney Order X Credit/Deb	0725	ion ID#	Amount of Contribution
Residential Street Address 10 E Scard Rd		City Wallingford	State CT	Zip Code 06492	Date Received 07/14/201		
Principal Occupation sales		Name of Employer Harty Press	•	Is this contribution association 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	Is contributor a lobby dependent child of a larger Yes	-	Aggregate Contrib	utions 100.00	\$100.00
Last Name McGarry	First Name Patricia		Cas	of contribution:  h Personal C  ney Order X Credit/Deb	0729	ion ID#	Amount of Contribution
Residential Street Address 50 E Hill Rd Unit 6A		City Canton	State CT	Zip Code 06019	Date Received 07/14/201		
Principal Occupation		Name of Employer Retired	•	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	Is contributor a lobby dependent child of a l	-	Aggregate Contrib	utions \$25.00	\$25.00
Last Name Ray	First Name Amy		Cas	of contribution:  h Personal C  ney Order X Credit/Det	0733	ion ID#	Amount of Contribution
Residential Street Address 389 S Main St Apt 9		City Seymour	State CT	Zip Code 06483	Date Received 07/14/201		
Principal Occupation aide		Name of Employer U.S. Congress	•	Is this contribution associa fundraising event listed in If yes, list Event #	Section J17	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	Is contributor a lobby dependent child of a larger Yes		Aggregate Contrib	utions \$20.00	\$20.00
Last Name Iodice	First Name Lillian		Cas	of contribution:  h X Personal C  ney Order Credit/Deb	0736	ion ID#	Amount of Contribution
Residential Street Address 50 B Greenhouse		City Bridgeport	State CT	Zip Code 06606	Date Received 07/14/201		
Principal Occupation		Name of Employer	•	Is this contribution association 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:		Yes X No  Executive Legislative	Is contributor a lobby dependent child of a l		Aggregate Contrib	utions \$50.00	\$50.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contributi	ions fron	ı Individu	ıals						
Last Name Whetstone	First Name Susan		MI	Cash	contribution:    X   Personal Cl	heck 0742	ution ID#	Amount of Contribution			
Residential Street Address 243 B Front St		City New Haven		State CT	Zip Code 06513	Date Receiv 07/14/20					
Principal Occupation Public Admin		Name of Employer CT Housing Finance Authorit	у		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	\$100.00	\$100.00			
Last Name Marari	First Name Alex		MI	x Cash	contribution: Personal Cl y Order Credit/Deb	heck 0743	ution ID#	Amount of Contribution			
Residential Street Address 25 Fillmore St		City New Haven		State CT	Zip Code 06513	Date Receiv 07/14/20					
Principal Occupation		Name of Employer unemployed		•	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	ibutions \$10.00	\$10.00			
Last Name Feliu	First Name Iris		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0746	ution ID#	Amount of Contribution			
Residential Street Address 516 Anton St		City Bridgeport		State CT	Zip Code 06606	Date Receiv					
Principal Occupation		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 No  Executive Legislative	dependent	outor a lobbyis t child of a lob Yes	byist?	Aggregate Conti	ibutions \$100.00	\$100.00			
Last Name Medina	First Name Elba		MI	x Cash	contribution: Personal Cl y Order Credit/Deb	heck 0745	ution ID#	Amount of Contribution			
Residential Street Address 516 Anton St		City Bridgeport		State CT	Zip Code 06606	Date Receiv					
Principal Occupation		Name of Employer retired			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 Conti	ibutions \$100.00	\$100.00			

		I. MONETAR	Y RECE	IPTS	(Section	n A-I)				
NAME OF COMMITTEE								1	FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Itemized Con	tributions	from	Individu	als				
Last Name Cardona	First Name Ana		MI	I	Method of c	contribution: Personal C Order Credit/Deb		Contribution 0747	ID#	Amount of Contribution
Residential Street Address 3 Crofton St		City New Haven			State CT	Zip Code 06513		ate Received 7/14/2010		
Principal Occupation  Carpenter		Name of Employer New Haven Partitions				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  Executive Legislativ	der		tor a lobbyist shild of a lobb	byist?	Aggre	gate Contributio	ons 0.00	\$20.00
Last Name Halpern	First Name Jackie		MI	I	Method of c	X Personal C		Contribution 0749	ID#	Amount of Contribution
Residential Street Address 58 Jackson Cove Rd		City Oxford			State CT	Zip Code 06478		ate Received 7/14/2010		
Principal Occupation  Communication Consultant		Name of Employer CSS		·		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	der		tor a lobbyist	oyist?	Aggre	gate Contributio	ons 60.00	\$30.00
Last Name Fishman	First Name Edyth		MI	I	Method of c	contribution: Personal C Order Credit/Deb		Contribution 0750	ID#	Amount of Contribution
Residential Street Address 120 M Wooster St		City New Haven			State CT	Zip Code 06511		ate Received 7/14/2010		
Principal Occupation		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	der		tor a lobbyist child of a lobb	pyist?	Aggre	gate Contributio	ons 55.00	\$5.00
Last Name Aponte	First Name Nilda		MI	I	Method of cash Cash Money	ontribution:  X Personal C Order Credit/Deb		Contribution 0752	ID#	Amount of Contribution
Residential Street Address 137 Lloyd St # 1		City New Haven			State CT	Zip Code 06513		ate Received 7/14/2010		
Principal Occupation Licensing Coordinator		Name of Employer All Our Kin, Inc.		•		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	deg		tor a lobbyist	oyist?	Aggre	gate Contributio	ons 5.00	\$5.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FIL	ING DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contribut	ions fron	Individu	ıals						
Last Name Maldonado	First Name Denise		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck 07	ontribution ID #	Amount of Contribution			
Residential Street Address 309 Exchange St		City New Haven		State CT	Zip Code 06513		Received 4/2010				
Principal Occupation  Market research		Name of Employer CFR Meriden			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 (	Contributions \$5.00	\$5.00			
Last Name Santos	First Name Santa		MI	x Cash	contribution:  Personal Cl y Order Credit/Debi	neck 07	ontribution ID #	Amount of Contribution			
Residential Street Address 399 Grand Ave Unit 5		City New Haven		State CT	Zip Code 06513		Received 4/2010				
Principal Occupation		Name of Employer			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 Galatino	First Name Chris		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 08	ontribution ID #	Amount of Contribution			
Residential Street Address 170 Ohman Ave		City Orange		State CT	Zip Code 06477		Received 4/2010				
Principal Occupation Finance		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 es x	byist?	Aggregate (	Contributions \$100.00	\$100.00			
Last Name Cardozo	First Name Horacio		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 10	ontribution ID #	Amount of Contribution			
Residential Street Address 24 Alyssa Ln		City Fairfield		State CT	Zip Code 06825		Received 4/2010				
Principal Occupation appraiser		Name of Employer Integrity Real Estate			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 (	Contributions \$50.00	\$50.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contribu	tions fron	ı Individu	ıals						
Last Name Lucibello	First Name Mario		MI	x Cash	contribution:  Personal C y Order Credit/Deb	0845	tion ID#	Amount of Contribution			
Residential Street Address 455 Ocean Ave		City West Haven		State CT	Zip Code 06516	Date Receive 07/14/20					
Principal Occupation Accountant		Name of Employer Greenhouse Rionden & Co L	_LP		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 Contri	butions \$100.00	\$100.00			
Last Name Younger, Jr	First Name Andrew		MI	x Cash	contribution:  Personal C y Order Credit/Deb	0937	tion ID#	Amount of Contribution			
Residential Street Address 291 Vine St		City Bridgeport		State CT	Zip Code 06605	Date Receive 07/14/20					
Principal Occupation Security Guard		Name of Employer RBS		•	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 Contri	butions \$50.00	\$50.00			
Last Name Mc Guire	First Name Teresa		MI	x Cash	contribution:  Personal C y Order Credit/Deb	0939	tion ID#	Amount of Contribution			
Residential Street Address 50 Breyer St		City Bridgeport		State CT	Zip Code 06606	Date Receive					
Principal Occupation Admin Asst		Name of Employer Grecco Agency		•	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 Contri	butions \$75.00	\$75.00			
Last Name Rodriguez	First Name Vivian		MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck 0924	tion ID#	Amount of Contribution			
Residential Street Address 35 Dixon St		City Bridgeport		State CT	Zip Code 06601	Date Receive 07/14/20					
Principal Occupation Accountant		Name of Employer Hernandez and Hope		•	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- 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			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Santos	First Name Manuel			MI	x Cash	contribution: Personal of Order Credit/De		Contribution	on ID#	Amount of Contribution	
Residential Street Address 415 Lincoln Ave		City Bridgeport			State CT	Zip Code 06606		te Received 7/14/2010			
Principal Occupation  Landscaping		Name of Employer Self				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	Ye Executive Le	s X No	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	gate Contribu \$1	ntions	\$100.00	
Last Name Caban	First Name Freddie			MI	x Cash	contribution: Personal Order Credit/De		Contribution	on ID#	Amount of Contribution	
Residential Street Address 64 Rosedale St		City Bridgeport			State CT	Zip Code 06604		te Received 7/14/2010	0		
Principal Occupation Driver		Name of Employer Self				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	Ye Executive Le	s X No	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	gate Contribu	utions	\$100.00	
Last Name Kozios	First Name Colleen			MI	x Cash	contribution: Personal (		Contribution	on ID#	Amount of Contribution	
Residential Street Address 228 Aspen Glen Dr		City Hamden			State CT	Zip Code 06518		ite Received 7/14/2010			
Principal Occupation		Name of Employer Student				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	Ye Executive Le	s X No	dependent	utor a lobbyis child of a lob	byist?	Aggreg	gate Contribu	utions	\$100.00	
Last Name Vereen	First Name Troy			MI	x Cash	contribution: Personal		Contribution 0928	on ID#	Amount of Contribution	
Residential Street Address 10 Lorraine St		City Bridgeport			State CT	Zip Code 06604		te Received 7/14/2010			
Principal Occupation  Cabient Maker		Name of Employer De Carle COnsti	ruction			Is this contribution assoc fundraising event listed i 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	Ye Executive Le	s X No	dependent	utor a lobbyis child of a lob res	byist?	Aggreg	gate Contribu	utions	\$100.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Serrano	First Name Lynette		MI	x Cash	contribution: Personal C	heck 0929	bution ID #	Amount of Contribution			
Residential Street Address 2465 E Main St		City Bridgeport		State CT	Zip Code 06608	Date Recei					
Principal Occupation Kitchen Aide		Name of Employer ABCD			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	\$100.00	\$100.00			
Last Name Gamble	First Name Mary		MI	x Cash	contribution:  Personal Conder  Credit/Deb	heck 0930	bution ID#	Amount of Contribution			
Residential Street Address 12212 Town Walk Dr		City Hamden		State CT	Zip Code 06518	Date Recei					
Principal Occupation		Name of Employer Student		•	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 \$100.00	\$100.00			
Last Name Alvarez	First Name Israel		MI	X Cash	contribution: Personal C	heck 0931	bution ID #	Amount of Contribution			
Residential Street Address 189 Wheeler Ave		City Bridgeport		State CT	Zip Code 06606	Date Recei					
Principal Occupation Automotive Tech		Name of Employer Port and Chester		•	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			
Last Name Rojas	First Name Fatima		MI	Cash	contribution:    X   Personal C	heck 0932	bution ID #	Amount of Contribution			
Residential Street Address 49 Livingston St # 1		City New Haven		State CT	Zip Code 06511	Date Recei					
Principal Occupation		Name of Employer unemployed			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			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Santos	First Name Aude		MI	x Cash	contribution: Personal Cl	heck 0933	ution ID#	Amount of Contribution			
Residential Street Address 35 Wells St		City Bridgeport		State CT	Zip Code 06606	Date Receiv 07/14/20					
Principal Occupation		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 X No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Conti	\$50.00	\$50.00			
Last Name Santiago	First Name Luis		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 0919	ution ID#	Amount of Contribution			
Residential Street Address 49 Livingston St # 1		City New Haven		State CT	Zip Code 06517-6511	Date Receiv 07/14/20					
Principal Occupation  Mechanic Assembly		Name of Employer Zane's Cycles		•	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	ibutions \$180.00	\$80.00			
Last Name Gorham	First Name Albert		MI	x Cash	contribution: Personal Cl	heck 0920	ution ID#	Amount of Contribution			
Residential Street Address 75 Albemarke St		City Bridgeport		State CT	Zip Code 06606	Date Receiv					
Principal Occupation Psych Tech		Name of Employer Bpt Hospital			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 Conti	ibutions \$100.00	\$100.00			
Last Name Spector	First Name Jessica		MI	Cash	contribution:    X   Personal Cl	heck 0990	ution ID#	Amount of Contribution			
Residential Street Address 220 Weston Rd		City Weston		State CT	Zip Code 06883	Date Receiv 07/14/20					
Principal Occupation  Writer		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	byist?	Aggregate Contr	ibutions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Friends Of Gerry Garcia											
		B. It	emized Contributi	ons fron	ı Individu	ıals					
Last Name	First Name			MI		contribution:		Contribution	on ID#	Amount of	
Williams	Curtis				X Cash Money	y Order Personal Credit/De		0994		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
986 Whopoorwill Care		Stratford			СТ	06614	0	7/14/2010	0		
Principal Occupation electrician		Name of E	mployer			Is this contribution assoc fundraising event listed in		11?			
						If yes, list Event #			No		
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of	or prospective	Executive	Yes X No  Legislative	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00	
government the contract is with:  Last Name	First Name	LACCULIVE	Degislative	МІ		contribution:	<u> </u>		ID //		
Guzman	Socrates			IVII	Cash	y Order Credit/De		Contribution 1005	on ID#	Amount of Contribution	
Residential Street Address		City		•	State	Zip Code	D	ate Received			
23 Crown St		Danbury			СТ	06810	0	7/14/2010	0		
Principal Occupation		Name of Er	mployer		•	Is this contribution assoc			Yes		
maint		Danbury	Hosp			fundraising event listed in If yes, list Event #	n Section J	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  Legislative	dependent	utor a lobbyis child of a lob Yes	bbyist?	Aggre	gate Contribu	utions 100.00	\$100.00	
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of	
Hunt	Ralph				Cash Money	y Order		1006		Contribution	
Residential Street Address		City			State	Zip Code	D	ate Received			
215 Danbury Rd		Wilton			СТ	06897	0	7/14/2010	0		
Principal Occupation		Name of E	mployer			Is this contribution assoc fundraising event listed is		11?	_		
DVM		Sell				If yes, list Event#		<u>x</u>	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 government the contract is with:		Executive	Legislative	I —	child of a lob	-		\$1	100.00	\$100.00	
Last Name	First Name			MI		contribution:		Contribution	on ID#	Amount of	
Morgan	Courtney			J	X Cash Money	y Order Personal Credit/De		0899		Contribution	
Residential Street Address		City			State	Zip Code		ate Received			
709 Honey HI		Norwalk			СТ	06851		7/14/2010	0		
Principal Occupation		Name of Er				Is this contribution assoc fundraising event listed in If yes, list Event #		11?	Yes 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	\$100.00	
Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	res X	No		φ.	100.00	\$100.00	

		I. MONETA	RY REC	EIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Itemized Co	ntribution	ns from	Individu	als				
Last Name Mocayo	First Name Alex			MI	Method of o	contribution: Personal C		Contribution 0968	ı ID#	Amount of Contribution
Residential Street Address 221 Saltonstall Ave # 2		City New Haven			State CT	Zip Code 06513		ate Received 7/14/2010		
Principal Occupation  Carpenter		Name of Employer Ted Empre 55				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 Legislat		dependent	tor a lobbyist child of a lob es	byist?	Aggre	gate Contribution \$10	ions 00.00	\$100.00
Last Name Dorival	First Name Darison			MI T	Method of o	contribution: Personal C Order Credit/Del		Contribution 0970	ı ID#	Amount of Contribution
Residential Street Address 730 George St		City New Haven			State CT	Zip Code 06511		ate Received 7/14/2010		
Principal Occupation CLC		Name of Employer Patch Comm				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 Legislat			ntor a lobbyist child of a lob es	byist?	Aggre	gate Contribution \$10	ions 00.00	\$100.00
Last Name Stephens	First Name John			MI	Method of o	contribution: Personal C		Contribution	ı ID#	Amount of Contribution
Residential Street Address 167 Wiollow St # 3		City New Haven			State CT	Zip Code 06511		7/14/2010		
Principal Occupation  Lab technician		Name of Employer New Haven Central	Vet Hospita	al		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 Legislat			utor a lobbyist child of a lob es	byist?	Aggre	gate Contribution \$10	ions 00.00	\$100.00
Last Name Munson	First Name Amy			MI	x Cash	contribution: Personal C		Contribution	ı ID#	Amount of Contribution
Residential Street Address 12 Joels Dr		City New Fairfield			State CT	Zip Code 06812		7/14/2010		
Principal Occupation manager		Name of Employer one stop cleaners				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 Legislat		dependent	utor a lobbyist child of a lob es	byist?	Aggre	gate Contributi	ions 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE								FILING	G DUE DATE	
Friends Of Gerry Garcia										
	В.	Itemized Contributi	ons fron	Individu	ıals					
Last Name First N	ne		MI	Method of	contribution:		Contributi	on ID#	Amount of	
Goldstein	ne			Cash Money	y Order		1023		Contribution	
Residential Street Address	City			State	Zip Code	D	ate Received	l		
43 Goodhill Rd	Westor	1		СТ	06883	0	7/14/201	0		
Principal Occupation		Employer			Is this contribution association fundraising event listed in			Yes		
owner-dressing the part	self		_		If yes, list Event #		×	No No		
Is contributor a principal of a state contractor or prospostate contractor?	tive	Yes X No		utor a lobbyis child of a lob		Aggre	gate Contrib	utions		
Is yes, indicate which branch or branches of government the contract is with:	Executive	Legislative		res x	-		\$	100.00	\$100.00	
Last Name First N	ne		MI		contribution:		Contributi	on ID#	Amount of	
Calixto Sash				X Cash Money	y Order Personal C		1021		Contribution	
Residential Street Address	City			State	Zip Code	D	ate Received	l		
13A Cinque Grn	New Ha	aven		СТ	06519	0	7/14/201	0		
Principal Occupation		Employer			Is this contribution association fundraising event listed in			Yes		
sales	We Bu	y Gold			If yes, list Event #		х	No		
Is contributor a principal of a state contractor or prospe	tive	Yes X No		utor a lobbyis		Aggre	gate Contrib	utions		
state contractor? Is yes, indicate which branch or branches of	Executive	Legislative	I —	child of a lob	-		\$	100.00	\$100.00	
government the contract is with:  Last Name First N		Legislative	МІ		contribution:	1	Ctilti	ID #		
Guzman Benja			lwn	X Cash	Personal C	Check	Contributi 0999	on ID#	Amount of Contribution	
				Money	y Order Credit/Deb	bit Card	0333			
Residential Street Address 283 Highland St	City New Ha	aven		State CT	Zip Code 06511		ate Received 7/14/201			
Principal Occupation	_			Ci	Is this contribution associa					
Inventory Associate	Wal m	Employer art			fundraising event listed in		11?	Yes No		
					If yes, list Event #			Y No		
Is contributor a principal of a state contractor or prosper state contractor?	tive	Yes X No		utor a lobbyis child of a lob		Aggre	gate Contrib			
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 N	ne		MI		contribution:		Contributi	on ID#	Amount of	
Cronin John				X Cash Money	y Order Personal C		1022		Contribution	
Residential Street Address	City			State	Zip Code	D	ate Received	l		
98 Boyston	Newing	ton		СТ	06111	0	7/15/201	0		
Principal Occupation		Employer			Is this contribution association fundraising event listed in		112			
Bail Bonds	Bail Pr	obail Bonds			If yes, list Event #		×	No		
Is contributor a principal of a state contractor or prospe	tive	Yes X No		utor a lobbyis		Aggre	gate 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	

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE								FILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contributi	ions from	ı Individu	ıals				
Last Name Ramos	First Name Steve		MI	X Cash	contribution:  Personal Cl y Order Credit/Deb		Contribution	ID#	Amount of Contribution
Residential Street Address 126 Silver Ln		City East Hartford		State CT	Zip Code 06118		te Received /15/2010		
Principal Occupation Bondsman		Name of Employer ASAP Bail Bonds LLC			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 50.00	\$50.00
Last Name Andrews	First Name Benjamin		MI	x Cash	contribution:  Personal Cl y Order Credit/Deb		Contribution 1025	ID#	Amount of Contribution
Residential Street Address 133 Indian Hill Rd		City Wilton		State CT	Zip Code 06897		te Received /15/2010		ı
Principal Occupation		Name of Employer student		•	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	ons 00.00	\$100.00
Last Name Dease	First Name Twaine		MI	x Cash	contribution: Personal Cl y Order Credit/Deb		Contribution 1027	ID#	Amount of Contribution
Residential Street Address 148 Diamond St		City New Haven		State CT	Zip Code 06515		te Received /15/2010		r
Principal Occupation asst supervisor		Name of Employer Church Street South			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 00.00	\$100.00
Last Name Lebov	First Name Bennett		MI	Cash	contribution:    X   Personal Cl y Order   Credit/Deb		Contribution	ID#	Amount of Contribution
Residential Street Address 22 Riveredge		City Milford		State CT	Zip Code 06460		te Received /15/2010		
Principal Occupation Sales		Name of Employer Supreme Corp			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 RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	ILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name Moreno	First Name Richard		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck 1	Contribution II	D#	Amount of Contribution
Residential Street Address 883 Slater Rd		City New Britain		State CT	Zip Code 06053		Received 15/2010		
Principal Occupation Bondsman		Name of Employer Blanco Bail Bonds LLC			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 es x	byist?	Aggregate	e Contributions		\$100.00
Last Name Schaeffer	First Name Griffin		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck 1	Contribution IE	D#	Amount of Contribution
Residential Street Address 9 Punkin Dr		City Ellington		State CT	Zip Code 06029		Received 15/2010		
Principal Occupation Bail Bonds		Name of Employer Bailpro bail bonds		•	Is this contribution associat fundraising event listed in S 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	Yes X No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate	e Contribution: \$100		\$100.00
Last Name Coleman	First Name Jeffrey		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck 1	Contribution IE	D#	Amount of Contribution
Residential Street Address 143 Timber Trl		City East Hartford		State CT	Zip Code 06118		Received 15/2010		
Principal Occupation Tutor		Name of Employer self employed			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		\$100.00
Last Name Samuel	First Name Gwen		MI	Cash	contribution: Personal Ch y Order Credit/Debi	eck 1	Contribution IE	D#	Amount of Contribution
Residential Street Address 53 Vine St Fl 2		City Meriden		State CT	Zip Code 06451		Received 15/2010		
Principal Occupation contractor		Name of Employer self			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 Contributions		\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Itemized Co	ontributio	ons from	Individu	ıals				
Last Name Avallone	First Name Jonathan			MI	Cash	contribution:  X Personal of Credit/Dec		Contribution 1033	on ID#	Amount of Contribution
Residential Street Address 100 Mc Kinley Ave		City New Haven			State CT	Zip Code 06515		7/15/2010		
Principal Occupation Supervise Residents		Name of Employer Chapel Haven				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	Yes  Executive Legisla	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	ntions	\$100.00
Last Name Trachten	First Name Murray			MI	Cash	contribution:  X Personal  y Order Credit/De		Contribution 1035	on ID#	Amount of Contribution
Residential Street Address 8 Edgemere Rd		City Hamden			State CT	Zip Code 06517		ate Received 7/15/2010	0	
Principal Occupation Attorney		Name of Employer self				Is this contribution assoc fundraising event listed i 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  Executive Legisla	X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions	\$100.00
Last Name Fontanez	First Name Wilfredo			MI	Cash	contribution: Personal of Credit/De		Contribution 1036	on ID#	Amount of Contribution
Residential Street Address 22 Oak St		City New Britain			State CT	Zip Code 06051		ate Received 7/15/2010		
Principal Occupation Owner		Name of Employer Willy's BBQ				Is this contribution assoc fundraising event listed i 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  Executive Legisla	X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu \$1	itions	\$100.00
Last Name Rayes	First Name Angelo			MI	x Cash	contribution: Personal		Contribution 1037	on ID#	Amount of Contribution
Residential Street Address 442 Lexington Ave		City New Haven			State CT	Zip Code 06513		ate Received 7/15/2010		
Principal Occupation laudrymat owner		Name of Employer self				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	Yes  Executive Legisla	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	itions	\$100.00

		I. MONE	ΓARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE								1	FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Itemized	Contributi	ons from	Individu	ıals		•		
Last Name Reyes	First Name Rosa			MI	x Cash	contribution: Personal C y Order Credit/De		Contribution 1038	ID#	Amount of Contribution
Residential Street Address 452 Grand Ave		City New Haven			State CT	Zip Code 06513		ate Received 7/15/2010		
Principal Occupation Grocery store owner		Name of Employer self			-	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 Leg	x No	dependent	child of a lob	byist?	Aggre	gate Contributio	ons 5.00	\$25.00
Last Name Santos	First Name Maria			MI	x Cash	contribution: Personal C y Order Credit/De		Contribution 1039	ID#	Amount of Contribution
Residential Street Address 399 Grand Ave		City New Haven			State CT	Zip Code 06513		ate Received 7/15/2010		
Principal Occupation  Justice of the peace		Name of Employer self			•	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 Leg	x No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contributio	ons 0.00	\$20.00
Last Name Santos	First Name Maria			MI	x Cash	contribution: Personal C		Contribution 1120	ID#	Amount of Contribution
Residential Street Address 399 Grand Ave		City New Haven			State CT	Zip Code 06513		ate Received 7/15/2010		
Principal Occupation  Justice of the peace		Name of Employer self				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 Leg		dependent	utor a lobbyis child of a lob res	byist?	Aggre	gate Contributio	ons 0.00	\$70.00
Last Name Fontanez	First Name Jonathan			MI	Cash	contribution: Personal C y Order Credit/De		Contribution 1040	ID#	Amount of Contribution
Residential Street Address 22 Oak St		City New Britain			State CT	Zip Code 06052		ate Received 7/15/2010		
Principal Occupation COOK		Name of Employer Willi's BBQ				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 Leg	x No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contributio	ons 0.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Holder-Winfield	First Name Natalie		MI	x Cash	contribution: Personal Cl y Order Credit/Debi	neck 1041	ution ID#	Amount of Contribution		
Residential Street Address 480 Wichester Ave		City New Haven		State CT	Zip Code 06511	Date Receiv				
Principal Occupation  Marketing		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	child of a lob	byist?	Aggregate Cont	sibutions \$50.00	\$50.00		
Last Name Winfield	First Name Gary		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1052	ution ID#	Amount of Contribution		
Residential Street Address 480 Wichester Ave		City New Haven		State CT	Zip Code 06511	Date Receiv				
Principal Occupation Union Staff		Name of Employer SCSU AAUP		•	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 res	byist?	Aggregate Cont	ributions \$100.00	\$100.00		
Last Name Stango	First Name Benjamin		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1042	ution ID#	Amount of Contribution		
Residential Street Address 94 Howe St		City New Haven		State CT	Zip Code 06510	Date Receiv				
Principal Occupation Student		Name of Employer student			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 res	byist?	Aggregate Cont	ributions \$50.00	\$50.00		
Last Name Padilla	First Name Isaac		MI	x Cash	contribution: Personal Cl y Order Credit/Debi	neck 1043	ution ID#	Amount of Contribution		
Residential Street Address 161 Hodge Ave		City Ansonia		State CT	Zip Code 06401	Date Receiv				
Principal Occupation electrician		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 Cont	ributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Carroll	First Name Charles		MI	Cash	contribution:    X   Personal Cl	heck 1044	ition ID#	Amount of Contribution		
Residential Street Address 2496 North Ave		City Bridgeport		State CT	Zip Code 06604	Date Receive 07/15/20				
Principal Occupation Administrator		Name of Employer City of Bridgeport			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 \$100.00	\$100.00		
Last Name Meek	First Name Amy		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	heck 1046	tion ID#	Amount of Contribution		
Residential Street Address 20 Clark # 2		City New Haven		State CT	Zip Code 06511	Date Receive 07/15/20				
Principal Occupation Reentry coordinator		Name of Employer City of New Haven		•	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 \$50.00	\$50.00		
Last Name Capasso	First Name Carlmine		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	heck 1047	tion ID#	Amount of Contribution		
Residential Street Address 39 Auger St		City Hamden		State CT	Zip Code 06513	Date Receive 07/15/20				
Principal Occupation maison		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	byist?	Aggregate Contri	butions \$100.00	\$100.00		
Last Name Capasso	First Name Vincent		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	heck 1048	tion ID#	Amount of Contribution		
Residential Street Address 1867 Chapel St		City New Haven		State CT	Zip Code 06513	Date Receive 07/15/20				
Principal Occupation  Maison		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 es	byist?	Aggregate Contri	butions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions from	Individu	ıals					
Last Name Fabrizio	First Name John		MI	x Cash	contribution: Personal Cl	neck 1049	tion ID#	Amount of Contribution		
Residential Street Address 60 Lexington Ave		City New Haven		State CT	Zip Code 06513	Date Receive 07/15/20				
Principal Occupation dry cleaner owner		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 Yes	byist?	Aggregate Contr	butions \$25.00	\$25.00		
Last Name Fiondella	First Name Filomena		MI	x Cash	contribution: Personal Cl / Order Credit/Deb	neck 1050	ition ID#	Amount of Contribution		
Residential Street Address 90 Morris St		City New Haven		State CT	Zip Code 06519	Date Receive 07/15/20				
Principal Occupation  clerk		Name of Employer city of new haven		•	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 Contr	butions \$20.00	\$20.00		
Last Name Fitch	First Name Michael		MI	Cash	contribution:    X   Personal Cl	neck 1054	ition ID#	Amount of Contribution		
Residential Street Address 203 Fitch Hill Rd		City Guilford		State CT	Zip Code 06437	Date Receive 07/15/20				
Principal Occupation  Carpenter		Name of Employer  New Haven Partitions			Is this contribution associa fundraising event listed in If yes, list Event #	Section J19	Yes  No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which 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	\$100.00		
Last Name Fitch	First Name Robert		MI	Cash	contribution:    X   Personal Cl	neck 1055	tion ID#	Amount of Contribution		
Residential Street Address 21 Great Oaks Rd		City Northford		State CT	Zip Code 06472	Date Receive 07/15/20				
Principal Occupation owner		Name of Employer New haven partitions			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 ves	byist?	Aggregate Contr	butions \$100.00	\$100.00		

		I. N	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ions from	ı Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Cappiello	Laura				Cash Money	y Order X Personal C		1056		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
135 Florence Rd Unit B		Branford			СТ	06492	0	7/15/201	0	
Principal Occupation		Name of E	mployer		•	Is this contribution assoc			Yes	
Accounting		New Hav	en partitions, Inc			fundraising event listed in If yes, list Event #	n Section .	)1?   <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		F		I '─	child of a lob	*		\$3	100.00	\$100.00
government the contract is with:		Executive	Legislative	+ =	1		<u> </u>	1		
Last Name Meeker	First Name dawn			MI	Method of Cash	contribution:	Check	Contributi	on ID#	Amount of Contribution
. recite		_				y Order Credit/De	bit Card	1057		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
8 Quarry Cir		East Hav	en		СТ	06513	0	7/15/201	0	
Principal Occupation		Name of E	nployer		-	Is this contribution associ			Yes	
controller		New Hav	en Partitions			fundraising event listed in If yes, list Event #	n Section .	)1?   <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		Executive	Legislative	1 —	child of a lob	-		\$	100.00	\$100.00
government the contract is with:	<u></u>	Executive	Legislative	+ -	I		<u> </u>	1		
Last Name Ellisa	First Name Ratner			MI	Method of Cash	contribution:	Check	Contribution	on ID#	Amount of Contribution
					_	y Order Credit/De	bit Card	1061		Commodition
Residential Street Address		City			State	Zip Code	D	ate Received		
18 Tower Ln Apt 262		New Hav	en		СТ	06519	0	7/15/201	0	
Principal Occupation		Name of E	nployer		-	Is this contribution associ			Yes	
tutor		self				fundraising event listed in If yes, list Event #	n Section .	)1?	No	
Is contributor a principal of a state contractor	or prospective		Yes X No	Is contrib	utor a lobbyis	t snouse or	1	t- Ct'h-	-4:	
state contractor?  Is yes, indicate which branch or branches of			Yes No		child of a lob	byist?	Aggre	egate Contribu :\$	100.00	\$100.00
government the contract is with:		Executive	Legislative	Y	res x	No		·		
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Hadelman	Allen				Cash Money	y Order Personal C		1062		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
38 Vineyard Ave		Guilford			СТ	06437	0	7/15/201	0	
Principal Occupation		Name of Er	mployer			Is this contribution associ			Yes	
real estate		Hadley i	nc.			fundraising event listed in If yes, list Event #	a Section .	x	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				_	child of a lob	-		\$:	100.00	\$100.00
government the contract is with:	Ц	Executive	Legislative	Y	res X	No				

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Ite	mized Contributio	ons from	Individu	ıals				
Last Name Rosenthal	First Name Alan			MI	Cash	contribution:  X Personal of the property of t		Contributi	on ID#	Amount of Contribution
Residential Street Address 51 Bridle Path Pl		City Madison			State CT	Zip Code 06443		7/15/201		
Principal Occupation retired		Name of Emp	ployer			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	byist?	Aggre	egate Contribu	utions 100.00	\$100.00
Last Name Guman	First Name Dorothy			MI	x Cash	contribution: Personal of the property of the		Contributi	on ID#	Amount of Contribution
Residential Street Address 135 Hickory St		City Bridgeport	t		State CT	Zip Code 06610		ate Received		
Principal Occupation		Name of Emp	ployer			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	gate Contrib	utions 100.00	\$100.00
Last Name Machuca	First Name Febricio			MI	x Cash	contribution: Personal ( y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 38 Guilford Ct		City East Have	n		State CT	Zip Code 06512		ate Received		
Principal Occupation handyman		Name of Emp	ployer			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	byist?	Aggre	gate Contrib	utions 100.00	\$100.00
Last Name Machuca	First Name Kristen			MI	x Cash	contribution: Personal of the property of the		Contributi	on ID#	Amount of Contribution
Residential Street Address 38 Guilford Ct		City East Have	n		State CT	Zip Code 06512		ate Received		
Principal Occupation Restaurant owner		Name of Emp	ployer			Is this contribution assoc 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 es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name Malonado	First Name Jovana		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	eck 107	ribution ID#	Amount of Contribution
Residential Street Address 38 Guilford Ct		City East Haven		State CT	Zip Code 06512	Date Rec 07/15/		
Principal Occupation Small business specialist		Name of Employer SAMA		•	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 Co	\$100.00	\$100.00
Last Name Gonzalez	First Name Maria		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck 106	ribution ID#	Amount of Contribution
Residential Street Address 102 Blake St		City New Haven		State CT	Zip Code 06511	Date Rec 07/15/		
Principal Occupation receptionist		Name of Employer SAMA		•	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 Co	stributions \$100.00	\$100.00
Last Name Alicea	First Name Alberto		MI	X Cash	contribution:  Personal Ch y Order Credit/Debi	eck 106	ribution ID #	Amount of Contribution
Residential Street Address 437 Columbus Ave		City New Haven		State CT	Zip Code 06519	Date Rec 07/15/		
Principal Occupation kitchen assistant		Name of Employer Mar Y Tierra Restaurant			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 Co	\$100.00	\$100.00
Last Name Rivera	First Name Angel		MI	x Cash	contribution: Personal Chy Order Credit/Debi	eck 107	ribution ID#	Amount of Contribution
Residential Street Address 144 Peck St		City New Haven		State CT	Zip Code 06513	Date Rec 07/15/		
Principal Occupation  Barber		Name of Employer El Gidaro			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	byist?	Aggregate Co	ontributions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Mazario	First Name Denise		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	neck 1073	oution ID#	Amount of Contribution		
Residential Street Address 144 Peck St		City New Haven		State CT	Zip Code 06513	Date Recei				
Principal Occupation receptionist		Name of Employer SAMA			Is this contribution associate fundraising event listed in St. 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		
Last Name Congton	First Name Holly		MI	x Cash	contribution: Personal Cl	neck 1072	oution ID#	Amount of Contribution		
Residential Street Address 232 Main St Apt 6		City West Haven		State CT	Zip Code 06516	Date Recei				
Principal Occupation Secretary		Name of Employer Mar y Tierra Restaurant		•	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 Con	ributions \$100.00	\$100.00		
Last Name Marcoccia	First Name Frank		MI	X Cash	contribution:  Personal Ch y Order Credit/Debi	neck 1074	oution ID #	Amount of Contribution		
Residential Street Address 645 Westfield Ave		City Bridgeport		State CT	Zip Code 06606	Date Recei				
Principal Occupation		Name of Employer Unemployed		•	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 Con	ributions \$100.00	\$100.00		
Last Name Gineobble	First Name Lilly		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	neck 1078	oution ID#	Amount of Contribution		
Residential Street Address 260 Cutlesfarm		City Monroe		State CT	Zip Code 06468	Date Recei				
Principal Occupation		Name of Employer homemaker			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 es	byist?	Aggregate Con	ributions \$100.00	\$100.00		

		I. MON	ETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Itemize	ed Contributi	ons from	Individu	ıals				
Last Name Magiocco	First Name Angelo			MI	X Cash	contribution: Personal ( y Order Credit/De		Contribution	ID#	Amount of Contribution
Residential Street Address 4425 Madison Ave		City Trumbull			State CT	Zip Code 06611		ate Received 7/15/2010		
Principal Occupation		Name of Employer retired				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 Contributi \$5	ons 50.00	\$50.00
Last Name Teiteira	First Name Manny			MI	X Cash	contribution: Personal ( y Order Credit/De		Contribution	ID#	Amount of Contribution
Residential Street Address 566 Amsterdam Ave		City Bridgeport			State CT	Zip Code 06606		ate Received 7/15/2010		
Principal Occupation bartender		Name of Employer Solmar restau			•	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	gate Contributi	ons 50.00	\$50.00
Last Name Carroll	First Name Sean			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution	ı ID#	Amount of Contribution
Residential Street Address 11 Old Burn Rd		City Trumbull			State CT	Zip Code 06611		ate Received 7/15/2010		
Principal Occupation president		Name of Employer			•	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 Contribution \$10	ons 00.00	\$100.00
Last Name Bosco	First Name David			MI	Cash	contribution:  X Personal 0 y Order Credit/De		Contribution 1084	ID#	Amount of Contribution
Residential Street Address 14 South		City Redding			State CT	Zip Code 06876	1	ate Received 7/15/2010		
Principal Occupation Union Rep		Name of Employer Congress of C SEIU	T Community C	Colleges		Is this contribution assoc 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 Contributi	ons 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Iten	nized Contributio	ons from	Individu	ıals				
Last Name Tiago	First Name Joe			MI	x Cash	contribution:  Personal  Order  Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 2445 Park Ave Unit 5C		City Bridgeport			State CT	Zip Code 06604		Date Received		
Principal Occupation  contractor		Name of Empl	loyer			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 es x	byist?	Aggre	egate Contribi	utions 100.00	\$100.00
Last Name Giacobbe	First Name Ralph			MI	x Cash	contribution: Personal v Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 1815 Madison Ave		City Bridgeport			State CT	Zip Code 06606		Date Received		
Principal Occupation		Name of Empl	loyer			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	-	Yes X No  Legislative	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Suzuki	First Name Kenneth			MI	Cash	contribution:  X Personal of the Credit/Decoration of the Credit/Decora		Contributi	on ID#	Amount of Contribution
Residential Street Address 95 Cottage St		City New Haven	ı		State CT	Zip Code 06511		Date Received 07/15/201		
Principal Occupation Union Rep		Name of Empl	-			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	byist?	Aggre	egate Contribi	utions 100.00	\$100.00
Last Name Hernandez	First Name Jose			MI	x Cash	contribution: Personal  y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 135 Sylvan Ave		City New Haven	1		State CT	Zip Code 06519		Date Received		
Principal Occupation ALC Technical		Name of Empl	loyer			Is this contribution assoc fundraising event listed i If yes, list Event #		<sub>J12</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	byist?	Aggre	egate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contributi	ions from	Individu	ıals					
Last Name Maysonet	First Name Nelida		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck 1091	ition ID#	Amount of Contribution		
Residential Street Address 309 Summit St		City New Haven		State CT	Zip Code 06513	Date Receive 07/15/20				
Principal Occupation day care		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 \$100.00	\$100.00		
Last Name Gomez	First Name Sol Marie		MI	X Cash	contribution: Personal Cl	neck 1093	tion ID#	Amount of Contribution		
Residential Street Address 321 C Poplar St		City New Haven		State CT	Zip Code 06513	Date Receive 07/15/20				
Principal Occupation		Name of Employer unemployed		•	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 X	byist?	Aggregate Contri	butions \$100.00	\$100.00		
Last Name Ramos	First Name Marangely	у	MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 1094	ition ID#	Amount of Contribution		
Residential Street Address 317 West Spg Apt 40		City West Haven		State CT	Zip Code 06516	Date Receive 07/15/20				
Principal Occupation manager		Name of Employer Radio Amor inc			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 \$100.00	\$100.00		
Last Name Cotrez	First Name Nyvia		MI	x Cash	contribution: Personal Cl y Order Credit/Debi	neck 1095	tion ID#	Amount of Contribution		
Residential Street Address 343 Eastern St Apt C1008		City New Haven		State CT	Zip Code 06513	Date Receive 07/15/20				
Principal Occupation		Name of Employer unemployed			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 state contractor? Is yes, indicate which 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							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contributi	ions fron	Individu	ıals		·			
Last Name Bienes	First Name Dulce		MI	X Cash	contribution:  Personal Cl y Order Credit/Deb	heck 1096	ibution ID #	Amount of Contribution		
Residential Street Address 290 Howard Ave		City New Haven		State CT	Zip Code 06519	Date Rece 07/15/2				
Principal Occupation		Name of Employer unemployed			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 Diaz	First Name Chary		MI	X Cash	contribution:  Personal Cl y Order Credit/Deb	heck 1097	ibution ID #	Amount of Contribution		
Residential Street Address 191 Gando Dr		City New Haven		State CT	Zip Code 06513	Date Rece 07/15/2				
Principal Occupation driver		Name of Employer First Student Bus 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	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Con	stributions \$100.00	\$100.00		
Last Name Williams	First Name Arlene		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 1100	ibution ID #	Amount of Contribution		
Residential Street Address 60 Birch Hill Rd		City Newtown		State CT	Zip Code 06470	Date Rece 07/15/2				
Principal Occupation		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	utor a lobbyis child of a lob	byist?	Aggregate Con	stributions \$100.00	\$100.00		
Last Name DoBona	First Name Madellain	a	MI	Cash	contribution:    X   Personal Cl y Order	heck 1102	ibution ID#	Amount of Contribution		
Residential Street Address 46 Southview Dr		City Watertown		State CT	Zip Code 06795	Date Rece 07/15/2				
Principal Occupation executive secretary		Name of Employer City of Waterbury			Is this contribution associa fundraising event listed in 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	byist?	Aggregate Con	stributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribu	tions fron	ı Individu	ıals		•			
Last Name Hamel	First Name Richelle		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb	heck 1103	ution ID#	Amount of Contribution		
Residential Street Address 884 Highland Ave	•	City Waterbury	•	State CT	Zip Code 06708	Date Receiv 07/15/20				
Principal Occupation Administrative Assistant		Name of Employer City of Waterbury			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 Contr	sibutions \$100.00	\$100.00		
Last Name Odeh	First Name Tess		MI	x Cash	contribution:  Personal Conder  Credit/Deb	heck 1108	ution ID#	Amount of Contribution		
Residential Street Address 46 Fleetwood Ave		City Bethel		State CT	Zip Code 06801	Date Receiv 07/15/20				
Principal Occupation asst manager		Name of Employer Foodbag		•	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 Contr	ibutions \$100.00	\$100.00		
Last Name Zim	First Name A Clif		MI	x Cash	contribution: Personal C	heck 1109	ution ID#	Amount of Contribution		
Residential Street Address 189 Beechmounth Ave		City Bridgeport		State CT	Zip Code 06606	Date Receiv				
Principal Occupation		Name of Employer Cheff		•	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 Contr	ibutions \$100.00	\$100.00		
Last Name Leaf	First Name Frederick		MI	Cash	contribution:    X   Personal C	heck 1110	ution ID#	Amount of Contribution		
Residential Street Address 234 Church St # 401		City New Haven		State CT	Zip Code 06510	Date Receiv				
Principal Occupation		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 No  Executive Legislative	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribut	ions from	Individu	ıals			
Last Name Vergara	First Name Edwin		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	heck 1114	tion ID#	Amount of Contribution
Residential Street Address 82 Main St		City New Haven		State CT	Zip Code 06512	Date Receive 07/15/20		
Principal Occupation Owner		Name of Employer VM Motors			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 Contr	butions \$100.00	\$100.00
Last Name Sanchez	First Name Hugo		MI	X Cash	contribution: Personal Cl	heck 1115	ition ID#	Amount of Contribution
Residential Street Address 127 Hillside Ave		City New Haven		State CT	Zip Code 06512	Date Receive 07/15/20		
Principal Occupation Ass manager		Name of Employer Sorentos Restaurant		•	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 Yes	byist?	Aggregate Contr	butions \$100.00	\$100.00
Last Name Avevebo	First Name Victor		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	heck 1117	tion ID#	Amount of Contribution
Residential Street Address 132 Fillmore St		City New Haven		State CT	Zip Code 06513	Date Receive 07/15/20		
Principal Occupation semi/retired		Name of Employer South Central/ agency of ag	ing		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 Contr	butions \$100.00	\$100.00
Last Name Quirwnes	First Name Maria		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	heck 1118	ition ID#	Amount of Contribution
Residential Street Address 195 Saltonsteal Ave		City New Haven		State CT	Zip Code 06513	Date Receive 07/15/20		
Principal Occupation at home		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 state contractor? Is yes, indicate which 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	butions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contributi	ions fron	Individu	ıals					
Last Name Castro	First Name Migdalia		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 111	ribution ID#	Amount of Contribution		
Residential Street Address 203 Saltonstal Ct Cottage	•	City New Haven		State CT	Zip Code 06513	Date Rec 07/15/				
Principal Occupation jacket attendant		Name of Employer new haven parking authority	,		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	stributions \$65.00	\$65.00		
Last Name Ortiz	First Name Awilda		MI	x Cash	contribution: Personal Cl y Order Credit/Deb	heck 112	ribution ID #	Amount of Contribution		
Residential Street Address 32 Knox St Apt C-5		City West Haven		State CT	Zip Code 06516	Date Rec. 07/15/				
Principal Occupation		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	utor a lobbyis child of a lob Yes	byist?	Aggregate Co	stributions \$100.00	\$100.00		
Last Name Colon	First Name Maria		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 112	ribution ID #	Amount of Contribution		
Residential Street Address 16 Hurlhurt St		City New Haven		State CT	Zip Code 06519	Date Rec 07/15/				
Principal Occupation school security		Name of Employer city of new haven			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		
Last Name Maldonado	First Name Luis		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 112	ribution ID#	Amount of Contribution		
Residential Street Address 16 Horlburt St		City New Haven		State CT	Zip Code 06519	Date Rec 07/15/				
Principal Occupation		Name of Employer unemployed			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	stributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Candelaria	First Name Lourdes		MI	x Cash	contribution: Personal C	heck 1124	bution ID#	Amount of Contribution		
Residential Street Address 18 Hurlburt St		City New Haven		State CT	Zip Code 06519	Date Recei				
Principal Occupation teller		Name of Employer Quinnipiac Bank			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 \$100.00	\$100.00		
Last Name Caine	First Name Theresa		MI	x Cash	contribution:  Personal Conder  Credit/Deb	heck 1125	bution ID#	Amount of Contribution		
Residential Street Address 505 Field St		City Naugatuck		State CT	Zip Code 06770	Date Recei				
Principal Occupation		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	utor a lobbyis child of a lob es X	byist?	Aggregate Con	tributions \$100.00	\$100.00		
Last Name Caine	First Name Julia		MI	X Cash	contribution: Personal C	heck 1127	bution ID#	Amount of Contribution		
Residential Street Address 50 Partridge Ct		City Watertown		State CT	Zip Code 06795	Date Recei				
Principal Occupation		Name of Employer Student, NYU		•	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 \$75.00	\$75.00		
Last Name Farricker	First Name Frank		MI	Cash	contribution:    X   Personal C	heck 1132	bution ID#	Amount of Contribution		
Residential Street Address 14 Mead Ave		City Cos Cob		State CT	Zip Code 01670	Date Recei				
Principal Occupation realtor		Name of Employer TBT Realty			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 RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Farricker	First Name Katherine	3	MI	Cash	contribution:    X   Personal Cl y Order	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 14 Mead Ave		City Cos Cob		State CT	Zip Code 06870		e Received /15/2010		
Principal Occupation		Name of Employer homemaker			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 Fontanez	First Name Edilberto		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 58 Sylvan Ave		City New Haven		State CT	Zip Code 06519		e Received /15/2010		
Principal Occupation merchant		Name of Employer self		•	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	te Contribution		\$100.00
Last Name Flore	First Name Jeffrey		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 112 B Church St S		City New Haven		State CT	Zip Code 06519		e Received /15/2010		
Principal Occupation mantenance		Name of Employer Housing Authority			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 Santiago	First Name Carmen		MI	x Cash	contribution:  Personal Cl y Order Credit/Debi	heck	Contribution I	ID#	Amount of Contribution
Residential Street Address 113 B Church St S		City New Haven		State CT	Zip Code 06519		e Received /15/2010		
Principal Occupation homemaker		Name of Employer homemaker		•	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?	Aggregat	te Contribution		\$100.00

		I. MONETARY RI	ECEIPT	S (Sectio	n A-I)				
NAME OF COMMITTEE							F.	ILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contribu	tions fron	ı Individu	ıals		•		
Last Name Benton	First Name Kimearlin	a	MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck 1	Contribution II	D#	Amount of Contribution
Residential Street Address 507 Newhall St		City Hamden		State CT	Zip Code 06517		Received 15/2010		
Principal Occupation admnistrator		Name of Employer Howard Hill funeral		•	Is this contribution associa fundraising event listed in If yes, list Event #		X N	es No	
Is contributor a principal of a 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	e Contribution \$100		\$100.00
Last Name Cooper	First Name Orsella		MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck 1	Contribution II	D#	Amount of Contribution
Residential Street Address 176 High Top Cir W		City Hamden		State CT	Zip Code 06514		Received 15/2010		
Principal Occupation  Admin		Name of Employer Howard Hill Funeral			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	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate	e Contribution \$100		\$100.00
Last Name Afanador	First Name Meimy		MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck 1	Contribution II	D#	Amount of Contribution
Residential Street Address 32 Hurlburt St		City New Haven		State CT	Zip Code 06519		Received 15/2010		
Principal Occupation  Cashier		Name of Employer New Haven parking Authori	ity		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	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggregate	e Contribution \$100		\$100.00
Last Name Diaz	First Name Lilian		MI	x Cash	contribution:  Personal C y Order Credit/Deb	heck 1	Contribution II	D#	Amount of Contribution
Residential Street Address 370 Sherman Ave Fl 3		City New Haven		State CT	Zip Code 06511		Received 15/2010		
Principal Occupation		Name of Employer homemaker			Is this contribution associa fundraising event listed in If yes, list Event #		X N	⁄es lo	
Is contributor a principal of a 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	e Contribution \$100		\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribut	ions from	Individu	ıals			
Last Name Heredia	First Name Amado		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	heck 1143	ution ID#	Amount of Contribution
Residential Street Address 210 Davenport Ave		City New Haven		State CT	Zip Code 06519	Date Receiv 07/15/20		
Principal Occupation machine operator		Name of Employer Ametech			Is this contribution associate 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 x	byist?	Aggregate Contr	\$100.00	\$100.00
Last Name Candelaria	First Name Nilda		MI	x Cash	contribution: Personal Cl	heck 1144	ution ID#	Amount of Contribution
Residential Street Address 239 Lombart St		City New Haven		State CT	Zip Code 06513	Date Receiv 07/15/20		
Principal Occupation		Name of Employer retired		•	Is this contribution associal fundraising event listed in S 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 X	byist?	Aggregate Contr	ibutions \$100.00	\$100.00
Last Name Candelaria	First Name Juan		MI	X Cash	contribution:  Personal Ch y Order Credit/Debi	heck 1145	ution ID#	Amount of Contribution
Residential Street Address 30 Arch St		City New Haven		State CT	Zip Code 06573	Date Receiv 07/15/20		
Principal Occupation		Name of Employer retired		•	Is this contribution associal fundraising event listed in S 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 yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00
Last Name DeJesus	First Name Carmelina	a	MI	X Cash	contribution: Personal Ch y Order Credit/Debi	heck 1147	ution ID#	Amount of Contribution
Residential Street Address 35 Elliot St		City New Haven		State CT	Zip Code 06519	Date Receiv 07/15/20		
Principal Occupation homemaker		Name of Employer Pando Homecare			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 es	byist?	Aggregate Contr	ibutions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contributi	ons fron	Individu	ıals					
Last Name	First Name		MI	Method of Cash	contribution:		ition ID #	Amount of		
Hart	Dennis				y Order Credit/Deb	1148		Contribution		
Residential Street Address 17 Farm Meadow Rd		City East Haven		State CT	Zip Code 06513	Date Receiv 07/15/20				
Principal Occupation specialist		Name of Employer state of ct		-	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	byist?	Aggregate Contr	ibutions \$100.00	\$100.00		
Last Name Charis	First Name Charmain	е	MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 1149	ntion ID#	Amount of Contribution		
Residential Street Address 1447 Chapel St		City New Haven		State CT	Zip Code 06511	Date Receiv 07/15/20				
Principal Occupation Sr property manager		Name of Employer Demarco Management Corp			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 Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00		
Last Name Victory	First Name Lennox		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 1150	ntion ID#	Amount of Contribution		
Residential Street Address  1 Brewery Sq		City New Haven		State CT	Zip Code 06513	Date Receiv 07/15/20				
Principal Occupation  supervisor		Name of Employer Demarco		•	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 x	byist?	Aggregate Contr	ibutions \$100.00	\$100.00		
Last Name Diaz	First Name Rudy		MI	x Cash	contribution:  Personal Cl y Order Credit/Deb	heck 1151	ntion ID#	Amount of Contribution		
Residential Street Address 119 Short Beach Rd		City East Haven		State CT	Zip Code 06512	Date Receiv 07/15/20				
Principal Occupation grounds		Name of Employer Ct works			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							FILIN	G DUE DATE					
Friends Of Gerry Garcia													
B. Itemized Contributions from Individuals													
Last Name Cintroni	First Name Sally Lope	ez	MI	x Cash	contribution:  Personal C	heck 1152	ution ID#	Amount of Contribution					
Residential Street Address 17 Arthur St		City New Haven		State CT	Zip Code 06519	Date Receiv 07/15/20							
Principal Occupation admin ass		Name of Employer demarco			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 Yes	byist?	Aggregate Conti	sibutions \$100.00	\$100.00					
Last Name Grave	First Name Ted		MI	x Cash	contribution:  Personal Conder  Credit/Deb	heck 1154	ution ID#	Amount of Contribution					
Residential Street Address 136 Jinny Hill Rd		City Cheshire		State CT	Zip Code 06410	Date Receiv 07/15/20							
Principal Occupation		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 Conti	sibutions \$100.00	\$100.00					
Last Name Grave	First Name Sally		MI	X Cash	contribution: Personal C	heck 1155	ution ID#	Amount of Contribution					
Residential Street Address 136 Junny Hill Rd		City Cheshire		State CT	Zip Code 06410	Date Receiv							
Principal Occupation		Name of Employer retired		•	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	utor a lobbyis t child of a lob Yes	byist?	Aggregate Conti	sibutions \$100.00	\$100.00					
Last Name Dowling	First Name Chris		MI	x Cash	contribution: Personal C	heck 1156	ution ID#	Amount of Contribution					
Residential Street Address 23 Westmere Ave		City Norwalk		State CT	Zip Code 06853	Date Receiv 07/15/20							
Principal Occupation  consultant		Name of Employer Gartner Gourp			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 Conti	ibutions \$100.00	\$100.00					

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE									FILING	G DUE DATE		
Friends Of Gerry Garcia												
		B. It	temized Contributi	ons from	Individu	ıals						
Last Name Case	First Name Chloe			MI	X Cash	contribution: Personal of the property of the		Contributi	on ID#	Amount of Contribution		
Residential Street Address 23 Westmere Ave		City Norwalk			State CT	Zip Code 06853		7/15/201				
Principal Occupation streeters		Name of E produce				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	byist?	Aggre	gate Contribu	utions 100.00	\$100.00		
Last Name McFarlin	First Name Alan			MI	X Cash	contribution: Personal of the property of the		Contributi	on ID#	Amount of Contribution		
Residential Street Address 92 Shorefront Park		City Norwalk			State CT	Zip Code 06854		ate Received				
Principal Occupation  contractor		Name of E self	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 Yes	byist?	Aggre	gate Contrib	utions 100.00	\$100.00		
Last Name Bradley	First Name Mark			MI	X Cash	contribution: Personal ( y Order Credit/De		Contributi	on ID#	Amount of Contribution		
Residential Street Address 29 Yarmouth		City Norwalk			State CT	Zip Code 06852		ate Received				
Principal Occupation Political Director		Name of E Lamont	mployer for Governor		•	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	byist?	Aggre	gate Contrib	utions 100.00	\$100.00		
Last Name Lopez	First Name Avero			MI	X Cash	contribution: Personal of the property of the		Contributi	on ID#	Amount of Contribution		
Residential Street Address 33 Bear Paw Rd		City Stratford	i		State CT	Zip Code 06497		ate Received				
Principal Occupation		Name of E retired	mployer			Is this contribution assoc 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 es	byist?	Aggre	gate Contrib	utions 100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Friends Of Gerry Garcia											
		B. Itemized Cor	ntributions	s from	Individu	als					
Last Name Ramos	First Name Moritza		М	11	Method of c	contribution: Personal of Order Credit/De		Contribution 1163	on ID#	Amount of Contribution	
Residential Street Address 55 Bear Paw Rd		City Stratford			State CT	Zip Code 06497		7/15/201			
Principal Occupation  case worker		Name of Employer state of ct				Is this contribution assoc 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 Z	de		tor a lobbyist child of a lobbes	byist?	Aggre	gate Contribu	utions 100.00	\$100.00	
Last Name lopez	First Name ava		М	11	Method of comments of the Method of Comments of Commen	contribution: Personal of Order Credit/De		Contribution 1164	on ID#	Amount of Contribution	
Residential Street Address 55 Bear Paw Rd		City Stratford			State CT	Zip Code 06497		ate Received 7/15/201			
Principal Occupation		Name of Employer retired		•		Is this contribution assoc 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 2	de		tor a lobbyist child of a lobl	byist?	Aggre	gate Contribu	utions 100.00	\$100.00	
Last Name Szeps	First Name Aaron		М	11	Method of c	contribution: Personal (		Contribution 1168	on ID#	Amount of Contribution	
Residential Street Address 210 Covestogo Way		City Glastonbury			State CT	Zip Code 06033		ate Received			
Principal Occupation pipe fitter		Name of Employer mdc				Is this contribution assoc 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 Legislativ	de		tor a lobbyist child of a lobbes	byist?	Aggre	gate Contribu	utions 100.00	\$100.00	
Last Name McCarthy	First Name Tom		М	11	Method of c	contribution: Personal of Order Credit/De		Contribution 1170	on ID#	Amount of Contribution	
Residential Street Address 135 Harlem Ave		City Bridgeport			State CT	Zip Code 06604		ate Received			
Principal Occupation  Lawyer		Name of Employer City of Bridgeport				Is this contribution assoc fundraising event listed in If yes, list Event #		H2 -	Yes No		
Is contributor 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	de		tor a lobbyist child of a lobl	byist?	Aggre	gate Contribu	ations \$50.00	\$50.00	

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Jiminez	First Name Marta		MI	x Cash	contribution: Personal Cl	heck 1171	ition ID#	Amount of Contribution			
Residential Street Address 31 Whiting St		City Hamden		State CT	Zip Code 06514	Date Receive 07/15/20					
Principal Occupation		Name of Employer homemaker			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 Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00			
Last Name Farriker	First Name Tracy		MI	x Cash	contribution: Personal Cl y Order Credit/Debi	heck 1172	tion ID#	Amount of Contribution			
Residential Street Address 96 Valley Rd		City Greenwich		State CT	Zip Code 06807	Date Receive 07/15/20					
Principal Occupation teacher		Name of Employer city of stamford			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 X	byist?	Aggregate Contri	butions \$100.00	\$100.00			
Last Name Hone	First Name Lynne		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	heck 1173	ition ID#	Amount of Contribution			
Residential Street Address 47 Rock Mear Ave		City Greenwich		State CT	Zip Code 06870	Date Receive 07/15/20					
Principal Occupation		Name of Employer homemaker		•	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 x	byist?	Aggregate Contri	butions \$100.00	\$100.00			
Last Name howe	First Name mike		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	heck 1174	ition ID#	Amount of Contribution			
Residential Street Address 47 Rockmere Ave		City Greenwich		State CT	Zip Code 06870	Date Receive 07/15/20					
Principal Occupation		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 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							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contributi	ions fron	Individu	ıals		•				
Last Name Kropp	First Name Elizabeth		MI	x Cash	contribution:  Personal Cl y Order Credit/Deb	heck 117	ibution ID #	Amount of Contribution			
Residential Street Address 96 Valley Rd		City Cos Cob		State CT	Zip Code 06807	Date Reco					
Principal Occupation		Name of Employer student			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	\$20.00	\$20.00			
Last Name DeJesus	First Name Daniel		MI A	x Cash	contribution:  Personal Cl y Order Credit/Deb	heck 097	ribution ID #	Amount of Contribution			
Residential Street Address 9 Birch Ln Unit K		City East Haven		State CT	Zip Code 06513	Date Reco					
Principal Occupation Comunicator Radio		Name of Employer Radio Monte De Santidad		•	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	ntributions \$100.00	\$100.00			
Last Name Bhandare	First Name Pramod		MI V	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 097	ribution ID #	Amount of Contribution			
Residential Street Address 64 Cooper Pl		City New Haven		State CT	Zip Code 06515	Date Reco					
Principal Occupation  Manager Sales		Name of Employer Max Touch Wire			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	s60.00	\$60.00			
Last Name Cajigas	First Name Felix		MI	x Cash	contribution:  Personal Cl y Order Credit/Deb	heck 097	ribution ID #	Amount of Contribution			
Residential Street Address 7A Jose Marti Ct		City New Haven		State CT	Zip Code 06519	Date Reco					
Principal Occupation tech		Name of Employer Clean sweep Restoration			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 \$100.00	\$100.00			

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							1	FILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contributi	ons fron	Individu	ıals				
Last Name Foster	First Name Dora		MI	x Cash	contribution:  Personal Cr y Order Credit/Debi	eck	Contribution	ID#	Amount of Contribution
Residential Street Address 5B Jose Marti Ct		City New Haven		State CT	Zip Code 06519		e Received /15/2010		
Principal Occupation Stocking		Name of Employer Factory/ West Haven/Promod	co	•	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 lobbyis child of a lob es x	byist?	Aggregat	te Contribution \$10	ons 0.00	\$100.00
Last Name Rodriguez-Colon	First Name Orlando		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck	Contribution	ID#	Amount of Contribution
Residential Street Address 5B Jose Marti Ct		City New Haven		State CT	Zip Code 06519		e Received /15/2010		
Principal Occupation  Machine operator		Name of Employer Eagle Leasing Compound		•	Is this contribution associat fundraising event listed in S 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	ons 0.00	\$100.00
Last Name DeJesus	First Name Brenda		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck	Contribution	ID#	Amount of Contribution
Residential Street Address  9 Birch Ln # U6		City East Haven		State CT	Zip Code 06513		e Received /15/2010		
Principal Occupation  Med Records admin		Name of Employer Health Net			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 lobbyis child of a lob es x	byist?	Aggregat	te Contributio	ons 0.00	\$100.00
Last Name Sierra	First Name Evelyn		MI	Cash	contribution:    X   Personal Character   Credit/Debi	eck	Contribution	ID#	Amount of Contribution
Residential Street Address 505 Wickkam Rd		City Glastonbury		State CT	Zip Code 06033		e Received /15/2010		
Principal Occupation sales		Name of Employer Hispanic Vision			Is this contribution associat fundraising event listed in S 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	ons 0.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name Angel	First Name Sierra		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0958	ition ID#	Amount of Contribution			
Residential Street Address 505 Wickham Rd		City Glastonbury		State CT	Zip Code 06033	Date Receive 07/15/20					
Principal Occupation Optician		Name of Employer Hispana Vision			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	depende	ibutor a lobbyis nt child of a lob Yes	byist?	Aggregate Contri	butions \$120.00	\$100.00			
Last Name Mass	First Name Martin		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0959	tion ID#	Amount of Contribution			
Residential Street Address 33 Southpond Rd		City South Glastonbury		State CT	Zip Code 06073	Date Receive 07/15/20					
Principal Occupation Optometrist		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	depende	ibutor a lobbyis nt child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00			
Last Name Mass	First Name Jill		MI	Cash	contribution:  X Personal C y Order Credit/Deb	heck 0960	tion ID#	Amount of Contribution			
Residential Street Address 33 Southpond Rd		City South Glastonbury		State CT	Zip Code 06073	Date Receive 07/15/20					
Principal Occupation at home		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 No  Executive Legislative	depende	ibutor a lobbyis nt child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00			
Last Name Casiano	First Name Julio		MI	Cash	contribution:    X   Personal C y Order   Credit/Deb	heck 0961	tion ID#	Amount of Contribution			
Residential Street Address 23 Pioneer Dr		City Windsor		State CT	Zip Code 06095	Date Receive 07/15/20					
Principal Occupation  Business Development Specialist		Name of Employer SBA		•	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 state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No  Executive Legislative	depende	ibutor a lobbyis nt child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILING	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contribut	ions from	Individu	ıals						
Last Name Hill	First Name Howard		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 0962	ution ID#	Amount of Contribution			
Residential Street Address 1287 Chapel St		City New Haven		State CT	Zip Code 06511	Date Receiv 07/15/20					
Principal Occupation Funeral Director		Name of Employer Self HKW funeral services			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	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 x	byist?	Aggregate Contr	\$100.00	\$100.00			
Last Name Calderon	First Name Jorge		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 0963	ution ID#	Amount of Contribution			
Residential Street Address 7 Emerson St		City Bloomfield		State CT	Zip Code 06002	Date Receiv 07/15/20					
Principal Occupation Owner		Name of Employer Jocal Construction		•	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	ibutions \$100.00	\$100.00			
Last Name Rysso	First Name Mary Jear	n	MI	X Cash	contribution:  Personal Ch y Order Credit/Debi	neck 0964	ution ID#	Amount of Contribution			
Residential Street Address 39 Bluejay Rd		City Northford		State CT	Zip Code 06472	Date Receiv 07/15/20					
Principal Occupation		Name of Employer retired		•	Is this contribution associal fundraising event listed in S If yes, list Event #	Section J19	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 Contr	sibutions \$100.00	\$100.00			
Last Name Maldonado	First Name Jose		MI	Cash	contribution:  X Personal Ch y Order Credit/Debi	neck 0965	ution ID#	Amount of Contribution			
Residential Street Address 44 Grafton St		City New Haven		State CT	Zip Code 06573	Date Receiv 07/15/20					
Principal Occupation Fire Fighter		Name of Employer City of New Haven			Is this contribution associal fundraising event listed in S 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	systems \$75.00	\$75.00			

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE							FILING	G DUE DATE				
Friends Of Gerry Garcia												
B. Itemized Contributions from Individuals												
Last Name De Frutos	First Name Carlos		MI	Cash	contribution:    X   Personal Cl	heck 0966	ntion ID#	Amount of Contribution				
Residential Street Address 153 Church St		City West Haven		State CT	Zip Code 06516	Date Receiv 07/15/20						
Principal Occupation Salesman		Name of Employer Cyberwireless		-	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 Yes	byist?	Aggregate Contr	stations \$100.00	\$100.00				
Last Name King	First Name Angel		MI	x Cash	contribution: Personal Cl	heck 0967	ntion ID#	Amount of Contribution				
Residential Street Address 147C Church St S		City New Haven		State CT	Zip Code 06519	Date Receiv 07/15/20						
Principal Occupation station worker		Name of Employer sodexo		•	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	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00				
Last Name Rodriguez	First Name Luis		MI	X Cash	contribution: Personal Cl y Order Credit/Deb	heck 1007	ntion ID#	Amount of Contribution				
Residential Street Address 26 Mayfield Rd		City Wethersfield		State CT	Zip Code 06109	Date Receiv 07/15/20						
Principal Occupation Owner		Name of Employer Comerio Restaurant			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	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contr	sbutions \$100.00	\$100.00				
Last Name Hickman	First Name Mildred		MI	x Cash	contribution: Personal Cl y Order Credit/Deb	heck 1009	ntion ID#	Amount of Contribution				
Residential Street Address 75 Harry Ln		City Vernon		State CT	Zip Code 06118	Date Receiv 07/15/20						
Principal Occupation  Case Manager		Name of Employer State of Connecticut			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- state contractor? Is yes, indicate which 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	ibutions \$100.00	\$100.00				

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
B. Itemized Contributions from Individuals											
Last Name DeJesus	First Name Ramon		MI	x Cash	contribution: Personal Cl	heck 1010	ution ID#	Amount of Contribution			
Residential Street Address  9C Jose Marti Ct		City New Haven		State CT	Zip Code 06519	Date Receiv					
Principal Occupation nurse		Name of Employer St Raphael Hosp			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	sibutions \$100.00	\$100.00			
Last Name Baba	First Name Michael		MI	x Cash	contribution: Personal Cl / Order Credit/Deb	heck 1013	ution ID#	Amount of Contribution			
Residential Street Address 15 Sefton Dr		City New Britain		State CT	Zip Code 06053	Date Receiv 07/15/20					
Principal Occupation Bondsman		Name of Employer Milse's Bail Bonds 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	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	sibutions \$100.00	\$100.00			
Last Name Burdy	First Name Charlos		MI	X Cash	contribution: Personal Cl	heck 1014	ution ID#	Amount of Contribution			
Residential Street Address 75 First St		City New Britain		State CT	Zip Code 06051	Date Receiv					
Principal Occupation Bondman		Name of Employer AFFord- A-Bail Bail Bonds LL	С		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 es x	byist?	Aggregate Conti	sibutions \$100.00	\$100.00			
Last Name Blanco	First Name Jason		MI	X Cash	contribution: Personal Cl	heck 1016	ution ID#	Amount of Contribution			
Residential Street Address 71 Rosemary Ln		City Newington		State CT	Zip Code 06111	Date Receiv					
Principal Occupation Bondsman		Name of Employer Blanco Bail Bonds 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	utor a lobbyis child of a lob es	byist?	Aggregate Contr	sibutions \$100.00	\$100.00			

I. MONETARY RECEIPTS (Section A-I)												
NAME OF COMMITTEE FILING												
Friends Of Gerry Garcia												
B. Itemized Contributions from Individuals												
Last Name Zelaya	First Name Ciro			MI	x Cash	contribution: Personal		Contributi 0996	on ID#	Amount of Contribution		
Residential Street Address 149 W Coutor St		City Manchester			State CT	Zip Code 06040		Date Received				
Principal Occupation Legistative Aide		Name of Emplo State of Co	-			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 es	byist?	Aggre	egate Contrib	utions 100.00	\$100.00		
Last Name Padilla	First Name Ismael			MI	x Cash	contribution: Personal Order Credit/De		Contributi 0998	on ID#	Amount of Contribution		
Residential Street Address 145 Denver Ave		City Bridgeport			State CT	Zip Code 06605		Date Received 07/15/201				
Principal Occupation roofer		Name of Emplo	oyer			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	_	Yes X No Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggre	egate Contrib	utions 100.00	\$100.00		
Last Name Echavarra	First Name Roberto			MI	x Cash	contribution: Personal		Contributi	on ID#	Amount of Contribution		
Residential Street Address 55 William St		City Danbury			State CT	Zip Code 06810		Date Received 07/15/201				
Principal Occupation Contractor		Name of Emplo Discovery 1	-			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 es	byist?	Aggre	egate Contrib	utions 100.00	\$100.00		
Last Name Marchena	First Name Adalberto			MI	Cash	contribution:  X Personal of Order Credit/Dec		Contributi	on ID#	Amount of Contribution		
Residential Street Address  2 Lea Ln		City New Milford	I		State CT	Zip Code 06776		Date Received				
Principal Occupation Costudial		Name of Emplo	<sup>oyer</sup> d Public School			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 es	byist?	Aggre	egate Contrib	utions 100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)											
NAME OF COMMITTEE									FILING	G DUE DATE	
Friends Of Gerry Garcia											
		B. Itemized Co	ntribution	ns from	Individu	ials					
Last Name Montero	First Name Carmen			MI	Method of o	contribution: Personal (		Contribution 0984	on ID#	Amount of Contribution	
Residential Street Address  10B Jose Marti Ct		City New Haven			State CT	Zip Code 06519		7/15/201			
Principal Occupation bus driver		Name of Employer  Durham School Bus	es			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 Legislat			child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00	
Last Name Cotillo	First Name Joselyn	_		MI	Method of o	contribution:    X   Personal (		Contribution 0989	on ID#	Amount of Contribution	
Residential Street Address 23 Scuppo Rd Unit 4-12		City Danbury			State CT	Zip Code 06811		ate Received			
Principal Occupation Tenant Relation Specialist		Name of Employer BSAC				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 Legislat			ntor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	itions	\$100.00	
Last Name Valentine	First Name Susan			MI	Cash	contribution: Personal of Order X Credit/De		Contribution 0921	on ID#	Amount of Contribution	
Residential Street Address 143 Cottage St Apt C3		City New Haven			State CT	Zip Code 06511		ate Received			
Principal Occupation Organizer		Name of Employer UNITE HERE Local 3	4			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 Legislat			ntor a lobbyist child of a lob es	byist?	Aggre	gate Contribu	stions \$50.00	\$50.00	
Last Name cohen	First Name jason			MI	Method of o	contribution: Personal (  Order X Credit/De		Contribution 0923	on ID #	Amount of Contribution	
Residential Street Address 91 Valley View Rd		City Glastonbury			State CT	Zip Code 06033		ate Received			
Principal Occupation town of colchester		Name of Employer parks recreation				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 Legislat			ator a lobbyist child of a lob es	byist?	Aggre	gate Contribu	itions \$50.00	\$50.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Iter	nized Contribution	ons from	Individu	uals				
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Baran	Hugh				Cash Mone	y Order X Credit/De		0906		Contribution
Residential Street Address		City		•	State	Zip Code	D	ate Received		
143 Cottage St Fl 3		New Haver	ı		СТ	06511	0	7/15/201	0	
Principal Occupation Political Organizer		Name of Emp	oloyer RE Local 35			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor	or prospective	[	Yes X No	Is contrib	utor a lobbyis	st spouse or	Aggra	gate Contrib	utions	 
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative	dependent	child of a lot	obyist?	Aggic	-	\$50.00	\$50.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Lerner	Alan				Cash Mone	y Order X Credit/De		0907		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
2420 Whitney Ave Apt E7		Hamden			СТ	06518	_	7/15/201	0	
Principal Occupation  Computer operator		Name of Emp Nielsen	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 res	-	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name	First Name			MI	Method of	contribution:	•	Contributi	on ID#	Amount of
Agnew	Henry				Cash Mone	y Order X Credit/De		0908		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
395 Orange St Apt 2		New Haver	1		СТ	06511	_	7/15/201	0	ļ
Principal Occupation  QA Analyst		Name of Emp Promether	oloyer us Research			Is this contribution assoc fundraising event listed in If yes, list Event #		J1?	Yes No	
Is contributor a principal of a state contractor	or prospective	[	Yes X No		utor a lobbyis		Aggre	gate Contrib	utions	İ
state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive	Legislative		child of a lob	obyist? No		:	\$30.00	\$30.00
Last Name	First Name			MI	Method of	contribution:		Contributi	on ID#	Amount of
Cobb	Evan				Cash Mone	y Order X Credit/De		0910		Contribution
Residential Street Address		City		-	State	Zip Code	D	ate Received		
70 Howe St Apt 602		New Haver	1		СТ	06511	0	7/15/201	0	
Principal Occupation  Communications Director		Name of Emp UNITE HEI	oloyer RE Local 35			Is this contribution assoc 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 res	-	Aggre	gate Contrib	utions \$25.00	\$25.00

		I. MONE	ΓARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Itemized	Contributi	ons from	Individu	ıals				
Last Name Bombara	First Name Michael			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0911	ı ID#	Amount of Contribution
Residential Street Address 330 Six Rod Hwy		City Hamden			State CT	Zip Code 06518		Pate Received 17/15/2010		
Principal Occupation Director		Name of Employer Alexion Pharmac	ceuticals In		-	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 Leg	x No	dependent	child of a lob	byist?	Aggre	egate Contribution \$10	ons 00.00	\$100.00
Last Name Mills	First Name Derek			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0943	ID#	Amount of Contribution
Residential Street Address 37 Elm St .		City Newport			State RI	Zip Code 02840		Pate Received 07/15/2010		
Principal Occupation Attorney		Name of Employer US Government			•	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 Leg	X No	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contributi	ons 00.00	\$100.00
Last Name Di Lauro	First Name Vincent			MI	Cash	contribution:  X Personal C y Order Credit/Del		Contribution 0946	ID#	Amount of Contribution
Residential Street Address 40 Harbour Close		City New Haven			State CT	Zip Code 06519		Pate Received 17/15/2010		
Principal Occupation Owner		Name of Employer Columbus Auto	Body			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 Leg	_	dependent	utor a lobbyis child of a lob res	byist?	Aggre	egate Contribution \$10	ons 00.00	\$100.00
Last Name Barnes	First Name Jacklyn			MI	Cash	contribution:  X Personal C  y Order Credit/Del		Contribution 0949	ID#	Amount of Contribution
Residential Street Address 581 Crown St Apt 48		City Meriden			State CT	Zip Code 06450		Pate Received 07/15/2010		
Principal Occupation Clinical Technician		Name of Employer Yale University				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 Leg	X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contribution \$10	ons 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions fron	ı Individu	ıals					
Last Name	First Name		MI	Method of	contribution:	Contrib	ution ID#	Amount of		
Sostre	Ana Luisa	1		Cash Money	y Order X Personal Cl	I 0950		Contribution		
Residential Street Address		City		State	Zip Code	Date Receiv	red	]		
32 Judson Ave		New Haven		СТ	06511	07/15/20	)10			
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes			
Out Patient Register		YNHH			If yes, list Event #		x No			
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis		Aggregate Contr	ributions			
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	Method of	contribution:	Contrib	ution ID#	Amount of		
Redente	Frank			Cash Money	y Order X Personal Cl	0951		Contribution		
Residential Street Address	•	City	•	State	Zip Code	Date Receiv	ed	1		
542 Lombard St		New Haven		СТ	06513	07/15/20	)10			
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes			
Oper. Director		Farham House			If yes, list Event #	Section 31:	X No			
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis	-	Aggregate Cont	ributions	Ī		
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:  Last Name	First Name		MI		contribution:	Contrib	ution ID#			
Zayas	Richard			Cash	X Personal Cl	heck 0952	ution 1D#	Amount of Contribution		
Residential Street Address		City		State	Zip Code	Date Receiv	red	1		
7 Hinfer Rd		Simsbury		СТ	06070	07/15/20	)10			
Principal Occupation		Name of Employer			Is this contribution associa fundraising event listed in		Yes			
Lawyer		Self			If yes, list Event #	Section 31:	x No			
Is contributor a principal of a state contractor	or prospective	Yes X No		utor a lobbyis		Aggregate Contr	ributions	†		
state contractor? Is yes, indicate which branch or branches of	П	Executive Legislative		child of a lob			\$100.00	\$100.00		
government the contract is with:  Last Name	First Name	Executive Legislative	I MI	1	contribution:			1		
Santos	Santa		IVII	x Cash	Personal Cl		ution ID#	Amount of Contribution		
		1		Money	y Order Credit/Deb			-		
Residential Street Address 399 Grand Ave Unit 5		City New Haven		State CT	Zip Code 06513	Date Receiv				
		1		Ci	Is this contribution associa			†		
Principal Occupation		Name of Employer			fundraising event listed in		Yes  X No			
					If yes, list Event #		140	1		
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		utor a lobbyis child of a lob	-	Aggregate Cont		*00.00		
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		res X	-		\$100.00	\$90.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contributi	ons from	Individu	ıals		•			
Last Name	First Name		MI	Method of	contribution:		ution ID#	Amount of		
Arroyo	Elisa			Cash Money	V Order X Personal Cl	0758		Contribution		
Residential Street Address	•	City		State	Zip Code	Date Receiv	ed			
89 Mountain Top Ln .		New Haven		СТ	06513	07/15/20	10			
Principal Occupation		Name of Employer			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 Contr	ibutions \$20.00	\$20.00		
Last Name Feliciano	First Name Migna		MI	x Cash	contribution: Personal Cl	heck 0759	ution ID#	Amount of Contribution		
Residential Street Address 168 Sherman Ave		City Meriden		State CT	Zip Code 06450	Date Receiv				
Principal Occupation Secretary		Name of Employer Second Star of Jacob Christia Church	an		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 Yes	byist?	Aggregate Contr	ibutions \$20.00	\$20.00		
Last Name Casaverdo	First Name Matias		MI	X Cash	contribution: Personal Cl	heck 0760	ution ID#	Amount of Contribution		
Residential Street Address 32 Aston St		City New Haven	•	State CT	Zip Code 06513	Date Receiv		]		
Principal Occupation		Name of Employer Empleado		CI	Is this contribution associa fundraising event listed in a If yes, list Event #	ted with a	Yes No			
Is contributor a principal of a state contractor- state contractor? Is yes, indicate which 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 \$20.00	\$20.00		
Last Name Soto	First Name Oscar		MI	Cash	contribution:    X   Personal Cl	heck 0761	ution ID#	Amount of Contribution		
Residential Street Address 14 Kenny Dr		City New Haven		State CT	Zip Code 06513	Date Receiv				
Principal Occupation Technician		Name of Employer New Haven Conservation Set	rvices		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 Contr	ibutions \$50.00	\$50.00		

		I. MONI	ETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Itemize	d Contributi	ons from	Individu	ıals				
Last Name Romero	First Name Manuel			MI	Cash	contribution:    X   Personal C		Contribution 0762	n ID#	Amount of Contribution
Residential Street Address 4 Margo Ln		City Clinton			State CT	Zip Code 06413		ate Received 7/15/2010		
Principal Occupation Librarian		Name of Employer City of New Ha	iven			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		es X No	dependent	utor a lobbyis child of a lob es x	byist?	Aggre	gate Contribut \$10	ions 00.00	\$100.00
Last Name Ramos	First Name Nancy			MI	Cash	contribution:  X Personal C  y Order Credit/Del		Contribution 0763	n ID#	Amount of Contribution
Residential Street Address 26 Clove Pl		City New Haven			State CT	Zip Code 06519		ate Received 7/15/2010		
Principal Occupation Pastor		Name of Employer self			•	Is this contribution associ fundraising event listed in If yes, list Event #		u? <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 I	es X No	dependent	utor a lobbyis child of a lob Yes	byist?	Aggre	gate Contribut \$1	ions 00.00	\$100.00
Last Name Aponte	First Name Eliseo			MI	Cash	contribution:    X   Personal C		Contribution 0764	n ID#	Amount of Contribution
Residential Street Address 342 Summit St		City New Haven			State CT	Zip Code 06513		ate Received 7/15/2010		
Principal Occupation Pastor		Name of Employer self			•	Is this contribution associ fundraising event listed in If yes, list Event #		u? <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		res X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut \$1	ions 00.00	\$100.00
Last Name Chi	First Name Franklin			MI	Cash	contribution: Personal C y Order X Credit/Del		Contribution 0771	n ID#	Amount of Contribution
Residential Street Address 181 W Park Ave .		City New Haven			State CT	Zip Code 06511		ate Received 7/15/2010		
Principal Occupation Consultant		Name of Employer Self-Employed				Is this contribution associ fundraising event listed in If yes, list Event #		u? <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		es X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribut \$10	ions 00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Itemized (	Contributio	ons from	Individu	ıals				
Last Name Bliesener	First Name Dawn			MI	Cash	contribution: Personal y Order X Credit/De		Contribution 0775	on ID#	Amount of Contribution
Residential Street Address 542 Howe Ave .		City Shelton			State CT	Zip Code 06484		ate Received 7/15/2010		
Principal Occupation SELF EMPLOYED		Name of Employer ME		_		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	Yes  Executive Legis	X No	dependent	utor a lobbyis child of a lob es	byist?	Aggre	gate Contribu	\$5.00	\$5.00
Last Name Birks	First Name Carol			MI	Cash	contribution: Personal y Order X Credit/De		Contribution 0778	on ID#	Amount of Contribution
Residential Street Address 339 Red Oak Ln		City Bridgeport			State CT	Zip Code 06606		ate Received 7/15/2010		
Principal Occupation Educator		Name of Employer Bridgeport Public	Schools			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	Yes  Executive Legis	X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Egan	First Name Lisa			MI	Cash	contribution: Personal y Order X Credit/De		Contribution 0781	on ID#	Amount of Contribution
Residential Street Address 1112 Pamela Ln		City Cheshire			State CT	Zip Code 06410		ate Received 7/15/2010		
Principal Occupation Atttorney/Director		Name of Employer self				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	Yes  Executive Legis	X No	dependent	utor a lobbyis child of a lob	byist?	Aggre	gate Contribu	utions 100.00	\$100.00
Last Name Egan	First Name Patrick			MI	Cash	contribution:  X Personal y Order Credit/De		Contribution 0810	on ID#	Amount of Contribution
Residential Street Address 1112 Pamela Ln		City Cheshire			State CT	Zip Code 06410		ate Received 7/15/2010		
Principal Occupation Fire Fighter		Name of Employer City of New Haver	า			Is this contribution assoc fundraising event listed i 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  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									FILING	G DUE DATE	
Friends Of Gerry Garcia											
		B. Itemized Cont	ributions f	from In	dividu	als					
Last Name Paglino	First Name Justin		MI	M	Cash Money	contribution: Personal C Order X Credit/Deb		Contributio	on ID#	Amount of Contribution	
Residential Street Address 37 Edgewood Dr		City Guilford		St C	ate T	Zip Code 06437		ate Received 7/15/2010			
Principal Occupation postdoctoral scientist		Name of Employer Yale University		•		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  Executive Legislative		endent child		pyist?	Aggre	gate Contribu	ations \$25.00	\$25.00	
Last Name Brown	First Name Marion		MI	M X	Cash	contribution: Personal C Order Credit/Deb		Contribution 0783	on ID#	Amount of Contribution	
Residential Street Address 308 Westfield Ave		City Bridgeport		St C	ate T	Zip Code 06606		ate Received 7/15/2010			
Principal Occupation  Truck Driver		Name of Employer Detro				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  Executive Legislative		contributor a endent child Yes	-	oyist?	Aggre	gate Contribu	utions 100.00	\$100.00	
Last Name Abron	First Name Thomas		MI	M	Cash Money	contribution:  X Personal C Order Credit/Deb		Contributio	on ID#	Amount of Contribution	
Residential Street Address 125 Washington St Apt 303		City Norwalk		St C	ate T	Zip Code 06854		ate Received 7/15/2010			
Principal Occupation sales		Name of Employer Cumulus Broadcasting				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  Executive Legislative		endent child		byist?	Aggre	gate Contribu	utions 100.00	\$100.00	
Last Name Keyes	First Name Bridget		MI	X		contribution: Personal C Order Credit/Deb		Contribution 0787	on ID #	Amount of Contribution	
Residential Street Address 63 Marval Rd		City New Haven		St C	ate T	Zip Code 06515		ate Received 7/15/2010			
Principal Occupation Technoligist		Name of Employer  Computer Information				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  Executive Legislative		contributor a endent child		pyist?	Aggre	gate Contribu	utions 100.00	\$100.00	

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Miller	First Name Daniel		MI	Cash	contribution: Personal Cl	heck 0789	oution ID#	Amount of Contribution		
Residential Street Address 311 Enterprise Dr		City Kingston		State NJ	Zip Code 08528	Date Recei 07/15/2				
Principal Occupation Human Resources		Name of Employer Dow Jones & 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 es x	byist?	Aggregate Con	ributions \$100.00	\$100.00		
Last Name Clark	First Name Patrizia		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	heck 0791	oution ID#	Amount of Contribution		
Residential Street Address 100 Kings Hwy		City North Haven		State CT	Zip Code 06473	Date Recei 07/15/2				
Principal Occupation  Clerk of Probate Court		Name of Employer New Haven Probate Court		•	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		
Last Name Rivera	First Name Hector		MI	Cash	contribution: Personal Cl  Order X Credit/Debi	heck 0792	oution ID#	Amount of Contribution		
Residential Street Address 469 Ferry St		City New Haven		State CT	Zip Code 06513	Date Recei 07/15/2				
Principal Occupation  Manufacturing		Name of Employer OF Massberg			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	ributions \$100.00	\$100.00		
Last Name Niclas	First Name Samantha	а	MI	Cash	contribution: Personal Cl  Order X Credit/Debi	heck 0793	oution ID#	Amount of Contribution		
Residential Street Address 19 Windsor		City Nutley		State NJ	Zip Code 07110	Date Recei 07/15/2				
Principal Occupation Attorney		Name of Employer Geoghan Cohen and Buongio	orno	•	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	ributions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contributi	ions fron	Individu	ıals					
Last Name Dorsi	First Name Cortney		MI	Cash	contribution:    X   Personal Cl	neck 0794	ution ID#	Amount of Contribution		
Residential Street Address 10 Roosevelt Ave		City West Haven		State CT	Zip Code 06516	Date Receiv				
Principal Occupation Police Officer		Name of Employer City of West Haven			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 Conti	sibutions \$100.00	\$100.00		
Last Name Brown	First Name Alexander	r	MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 0795	ution ID#	Amount of Contribution		
Residential Street Address 3909 Gettysbug Cir		City Plano		State TX	Zip Code	Date Receiv 07/15/20				
Principal Occupation		Name of Employer Student		•	Is this contribution associa fundraising event listed in 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 Contr	\$20.00	\$20.00		
Last Name Donohe	First Name Kevin		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 0796	ution ID#	Amount of Contribution		
Residential Street Address 16 Anderson St		City New Haven		State CT	Zip Code 06511	Date Receiv				
Principal Occupation Fire Fighter		Name of Employer City of New Haven			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 Conti	sibutions \$20.00	\$20.00		
Last Name PUERTO	First Name JESUS		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0797	ution ID#	Amount of Contribution		
Residential Street Address 120 Wooster St Unit Q		City New Haven		State CT	Zip Code 06511	Date Receiv 07/15/20				
Principal Occupation FRIJOLES NEGROS LLC		Name of Employer PROPRIETOR SOUL DE CUBA	CAFE		Is this contribution associa fundraising event listed in 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	byist?	Aggregate Contr	sibutions \$100.00	\$100.00		

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions fron	Individu	ıals					
Last Name Mayer	First Name Adam		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 079	ibution ID #	Amount of Contribution		
Residential Street Address 200 E 72nd St Apt 18		City New York		State NY	Zip Code 10021	Date Rece 07/15/2				
Principal Occupation Sr. Director		Name of Employer Time Warner Cable			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	\$100.00	\$100.00		
Last Name turcio	First Name rebecca		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 080	ibution ID #	Amount of Contribution		
Residential Street Address 18 Rock St		City New Haven		State CT	Zip Code 06511	Date Rece 07/15/2				
Principal Occupation Admin Asdt		Name of Employer C.A. White			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 Co	s30.00	\$30.00		
Last Name Alanador	First Name Michelle		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	neck 080	ibution ID #	Amount of Contribution		
Residential Street Address 205 Weybosset St		City New Haven		State CT	Zip Code 06513	Date Rece 07/15/2				
Principal Occupation Home visitor NFN		Name of Employer Fairhaven Comm. Health Ce	nter		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 Co	\$20.00	\$20.00		
Last Name Santana	First Name Marta		MI	Method of Cash  X Money	contribution: Personal Cl y Order Credit/Debi	neck 080	ibution ID #	Amount of Contribution		
Residential Street Address 76 Emily Rd		City New Haven		State CT	Zip Code 06515	Date Recei				
Principal Occupation Home Visitor		Name of Employer Fairhaven Clinic (NFN)			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							FI	LING DUE	DATE
Friends Of Gerry Garcia									
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Newton	First Name James		MI	x Cash	contribution:  Personal C y Order Credit/Deb		Contribution ID 0808		Amount of Contribution
Residential Street Address 189 Thompson St		City New Haven		State CT	Zip Code 06511	- 1	tte Received 7/15/2010		
Principal Occupation		Name of Employer Retired			Is this contribution associa fundraising event listed in If yes, list Event #		L re		
Is contributor a principal of a state 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	sate Contributions \$100.		\$100.00
Last Name Aviles	First Name Eric		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution ID 0812		Amount of Contribution
Residential Street Address 310 Dyer St Apt 2A		City New Haven		State CT	Zip Code 06515		ite Received 7/15/2010		
Principal Occupation Realtor		Name of Employer Rosa Realty, LLC		•	Is this contribution associa fundraising event listed in If yes, list Event #		L re		
Is contributor a principal of a state 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 Contributions \$25.		\$25.00
Last Name Serna	First Name		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution ID 0813		Amount of Contribution
Residential Street Address 57 Main St		City New Haven		State CT	Zip Code 06513		te Received 7/15/2010		
Principal Occupation Child Care Provider		Name of Employer Self Employed			Is this contribution associa fundraising event listed in If yes, list Event #		1 1 1 0		
Is contributor a principal of a state 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 Contributions \$100.		\$100.00
Last Name Stern	First Name Christoph	ner	MI	Cash	contribution:  Personal C y Order X Credit/Deb		Contribution ID 0814		Amount of Contribution
Residential Street Address 220 Congress St # 1F		City Brooklyn		State NY	Zip Code 11201		tte Received 7/15/2010		
Principal Occupation Strategy Director		Name of Employer McGraw-Hill Education		•	Is this contribution associa fundraising event listed in If yes, list Event #		1 1 0		
Is contributor a principal of a state 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 Contributions \$50.		\$50.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
		B. Itemized Contribut	ions from	Individu	ıals					
Last Name Arroyo	First Name Ramonita		MI	x Cash	contribution: Personal Cl	heck 0815	bution ID#	Amount of Contribution		
Residential Street Address 13A Cirque Grn		City New Haven		State CT	Zip Code 06519	Date Recei				
Principal Occupation Outreach/Social work		Name of Employer Yale New Haven 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 No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Con	tributions \$100.00	\$100.00		
Last Name Echevarria	First Name Eli		MI	x Cash	contribution: Personal Cl / Order Credit/Deb	heck 0817	bution ID#	Amount of Contribution		
Residential Street Address 43 E Pearl St		City New Haven		State CT	Zip Code 06513	Date Recei				
Principal Occupation Pastor		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 Con	tributions \$50.00	\$50.00		
Last Name Hernandez	First Name Luis		MI	X Cash	contribution: Personal Cl	heck 0820	bution ID #	Amount of Contribution		
Residential Street Address 184 Farren Ave		City New Haven		State CT	Zip Code 06513	Date Recei				
Principal Occupation  Electrical Worker		Name of Employer Elliptiparal			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 \$25.00	\$25.00		
Last Name Hernandez	First Name Lili		MI	Cash	contribution:    X   Personal Cl	heck 0821	bution ID#	Amount of Contribution		
Residential Street Address 184 Farren Ave		City New Haven		State CT	Zip Code 06513	Date Recei				
Principal Occupation Administrator		Name of Employer Second starr of jacob		•	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 \$25.00	\$25.00		

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name Hernandez	First Name Luis		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	eck 109	ribution ID#	Amount of Contribution
Residential Street Address 184 Farren Ave		City New Haven		State CT	Zip Code 06513	Date Rec 07/15/		
Principal Occupation electrician		Name of Employer Elliptiear Electrical company		•	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 Co	\$100.00	\$100.00
Last Name Meadows-Olivier	First Name Mikki		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	eck 082	ribution ID#	Amount of Contribution
Residential Street Address 60 Westerfield Rd		City Hamden		State CT	Zip Code 06514	Date Rec 07/15/		
Principal Occupation  Nurse		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 es X	byist?	Aggregate Co	ontributions \$80.00	\$80.00
Last Name Prokop	First Name Christoph	er	MI	X Cash	contribution:  Personal Ch y Order Credit/Debi	eck 082	ribution ID #	Amount of Contribution
Residential Street Address 1317 Ella Grasso Blvd		City New Haven		State CT	Zip Code 06511	Date Rec 07/15/		
Principal Occupation Social Worker		Name of Employer Yale New Haven Hospital			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 Co	\$40.00	\$40.00
Last Name Diaz	First Name Haydee		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	eck 082	ribution ID #	Amount of Contribution
Residential Street Address  1B Christopher Grn		City New Haven		State CT	Zip Code 06519	Date Rec 07/15/		
Principal Occupation		Name of Employer Disable			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	byist?	Aggregate Co	ontributions \$50.00	\$50.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contributi	ions fron	Individu	ıals			
Last Name	First Name		MI		contribution:		ution ID#	Amount of
Lebron	Juanita			X Cash Money	Personal Cl y Order Credit/Debi	0827		Contribution
Residential Street Address		City		State	Zip Code	Date Recei	ved	]
8A Christopher Grn		New Haven		СТ	06519	07/15/20	010	1
Principal Occupation		Name of Employer Disable			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 res	byist?	Aggregate Cont	ributions \$50.00	\$50.00
Last Name Rivas	First Name Iris		MI	X Cash	contribution: Personal Cl y Order Credit/Debi	heck 0982	oution ID #	Amount of Contribution
Residential Street Address 8A Christopher Grn	•	City New Haven	•	State CT	Zip Code 06519	Date Receiv		
Principal Occupation Sales		Name of Employer We Buy Gold		•	Is this contribution associa fundraising event listed in If yes, list Event #		Yes X No	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	byist?	Aggregate Cont	ributions \$100.00	\$100.00
Last Name Jordan	First Name Sue		MI	x Cash	contribution:  Personal Cl  y Order  Credit/Debi	heck 0828	ution ID #	Amount of Contribution
Residential Street Address 98 Park Ave		City Hamden		State CT	Zip Code 06517	Date Receiv		
Principal Occupation Secretary		Name of Employer Yale University		•	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 res	byist?	Aggregate Cont	ributions \$100.00	\$100.00
Last Name Ramos Jr.	First Name Valeriano		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	heck 0829	ution ID#	Amount of Contribution
Residential Street Address 109 Hampton Rd		City Hamden		State CT	Zip Code	Date Recei		
Principal Occupation State Government Employee		Name of Employer Secretary of the State			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 res	byist?	Aggregate Cont	ributions \$50.00	\$50.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contribution	on ID#	Amount of
Falcon	Clodomiro	)			Cash Money	y Order X Personal C		0831		Contribution
Residential Street Address		City		-	State	Zip Code	D	ate Received		
33 Melrose Ave		Trumbull			СТ	06611	0	7/15/2010	0	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ			Yes	
self employed		The Hisp	anic Commercial Gu	ide, Inc.		fundraising event listed in If yes, list Event #	Section .	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		<b>.</b>		1 °—	child of a lob	*		9	\$50.00	\$50.00
government the contract is with:		Executive	Legislative	+-	1			1		1
Last Name Krauss	First Name Michael			MI	Method of Cash	contribution:	Theck	Contribution	on ID#	Amount of Contribution
Kruuss	Mender					y Order X Credit/De		0833		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
77 Hawley Ave		Milford			СТ	06460	0	7/15/2010	0	_
Principal Occupation		Name of Er	nployer			Is this contribution associ			Yes	
Transportation Director		Workford	ce Alliance			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		Executive	Legislative		child of a lob	-		9	\$25.00	\$25.00
government the contract is with:	<u></u>	Executive	Legislative	+-			<u> </u>	1		1
Last Name Padilla	First Name Jeremy			MI	X Cash	contribution:  Personal C	Check	Contribution	on ID #	Amount of Contribution
					_	y Order Credit/De	bit Card	0997		Commoduon
Residential Street Address		City			State	Zip Code	D	ate Received		
50 Breyer Ave		Bridgepo	rt		СТ	06606	0	7/15/2010	0	<u> </u>
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes	
auto mechanic		self-emp	loyed			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	it, spouse, or	Aggre	gate Contribu	ıtions	†
state contractor? Is yes, indicate which branch or branches of					child of a lob	byist?	, riggic	-	100.00	\$100.00
government the contract is with:		Executive	Legislative	L Y	res x	No				
Last Name	First Name			MI		contribution:	· .	Contribution	on ID#	Amount of
Nemerson	Vivienne				Cash Money	y Order X Credit/De		0880		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
1 Lakeside Dr		Danbury			СТ	06811	0	7/15/2010	0	1
Principal Occupation		Name of Er	nployer			Is this contribution associ fundraising event listed in			Yes	
Retired		Retired				If yes, list Event #	. Decuoii .	x	No	
Is contributor a principal of a state contractor	or prospective	1	Yes X No	Is contrib	utor a lobbyis	it, spouse, or	Agore	gate Contribu	utions	†
state contractor? Is yes, indicate which branch or branches of	_			dependent	child of a lob	bbyist?	1 -05.0	-	100.00	\$100.00
government the contract is with:	Ш	Executive	Legislative	☐ Y	res X	No				

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribut	ions fron	Individu	ıals			
Last Name Sharp	First Name Margaret		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0878	ution ID#	Amount of Contribution
Residential Street Address 38 Bishop Fl 3		City New Haven		State CT	Zip Code 06511	Date Recei		
Principal Occupation Organizer		Name of Employer UNITE HERE Local 34			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 \$50.00	\$50.00
Last Name Chambers Jr.	First Name Michael		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0873	ution ID#	Amount of Contribution
Residential Street Address 308 Fairfield Ave		City Hartford		State CT	Zip Code 06114	Date Recei		
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 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 Cont	ributions \$100.00	\$100.00
Last Name Cianci	First Name Christoph	er	MI	Cash	contribution:    X   Personal Cl	neck 1092	ution ID#	Amount of Contribution
Residential Street Address 11 Goodwill Rd		City North Haven		State CT	Zip Code 06473	Date Recei		
Principal Occupation Project manager		Name of Employer  New Haven partitions		•	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 Cont	ributions \$100.00	\$100.00
Last Name Fitch	First Name Lisa		MI	Cash	contribution:    X   Personal Cl	neck 1058	ution ID#	Amount of Contribution
Residential Street Address 21 Great Oak Rd		City Northford		State CT	Zip Code 06472	Date Recei 07/15/2		
Principal Occupation owner		Name of Employer Quinnipiac River Marina			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 es	byist?	Aggregate Cont	ributions \$100.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contributi	ions fron	Individu	ıals			
Last Name Dunleavy	First Name Martin		MI	x Cash	contribution: Personal Cl y Order Credit/Deb	neck 0804	oution ID#	Amount of Contribution
Residential Street Address 97 W Prospect St		City New Haven		State CT	Zip Code 06511	Date Recei		
Principal Occupation Organizer		Name of Employer National Education Assiciatio	n		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	ributions \$100.00	\$100.00
Last Name Harp	First Name Reynauld		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	neck 1101	oution ID#	Amount of Contribution
Residential Street Address 26 Lynwood Pl Apt 3		City New Haven		State CT	Zip Code 06511	Date Recei 07/15/2		
Principal Occupation  consulting		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 Con	ributions \$50.00	\$50.00
Last Name Fonda	First Name Melinda		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	neck 0786	oution ID#	Amount of Contribution
Residential Street Address 64 Lanes Pond Rd		City Northford		State CT	Zip Code 06472	Date Recei 07/15/2		
Principal Occupation Tax Assessor		Name of Employer Town Of Stratford			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	ributions \$100.00	\$100.00
Last Name Dostie	First Name Herman		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	neck 1060	oution ID#	Amount of Contribution
Residential Street Address 23 Mulligan Dr		City Wallingford		State CT	Zip Code 06492	Date Recei 07/15/2		
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 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 Con	ributions \$100.00	\$100.00

		I. M	IONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ons from	Individu	ıals				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
SCURLOCK	GEORGE				Cash Money	Personal C  X Credit/De		0774		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
80 Longlane Rd		West Har	tford		СТ	06117	0	7/15/2010	)	
Principal Occupation Organizational Consultant		Name of En	nployer itan District Commis	sion		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	itions \$25.00	\$25.00
Last Name	First Name			MI		contribution:		Contribution	on ID #	
Hernandez	Raquel				X Cash	Personal C		0818	on 1D #	Amount of Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
218 Atwater St		New Have	en		СТ	06513	0	7/15/2010	)	
Principal Occupation		Name of Er	nployer		•	Is this contribution associ			Yes	
Data Processor		Radio An	nor			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
Kalla	Joshua				Cash Money	Personal C  X Credit/De		0945		Contribution
Residential Street Address		City			State	Zip Code	D	ate Received		
31 Rosemont Ln		Pittsburg	h		PA	15217	0	7/15/2010	)	•
Principal Occupation		Name of Er				Is this contribution associ fundraising event listed in			Yes	
Student		Yale Univ	versity			If yes, list Event #	r section .	x	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	itions	•
state contractor? Is yes, indicate which branch or branches of	П	Executive	Legislative		child of a lob	-		\$1	100.00	\$50.00
government the contract is with:	F:	Executive	Legislative	+ -				1		
Last Name Fuchs	First Name mitchell			MI	Cash	contribution: Personal C  y Order X Credit/De		Contribution 0834	on ID#	Amount of Contribution
Residential Street Address		City		1	State	Zip Code	D	ate Received		
202 Melody Ln		Fairfield			СТ	06824	0	7/15/2010	0	
Principal Occupation		Name of En	nployer		•	Is this contribution associ			Yes	
real estate		Wellesle	y Corp			fundraising event listed in If yes, list Event #	Section .	x	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	-		\$1	100.00	\$100.00
government the contract is with:		LACCULIVE	Logislative	T	<u>ت</u>	-10	1			

		I. MONETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE							F	FILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contribut	ions fron	Individu	ıals				
Last Name Cordova	First Name Rene		MI	Cash	contribution: Personal C		Contribution I	ID#	Amount of Contribution
Residential Street Address 95 Filmore St		City New Haven		State CT	Zip Code 06513		ate Received 7/15/2010		
Principal Occupation Fire Fighter		Name of Employer City of New Haven			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?	Aggre	gate Contribution \$100		\$70.00
Last Name SteinHardt	First Name David		MI	Cash	contribution:  X Personal Contribution:  y Order Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 125 Village Ln		City Branford		State CT	Zip Code 06405		ate Received 7/15/2010		
Principal Occupation  President		Name of Employer D.S. Sewing 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 es x	byist?	Aggre	gate Contribution \$70	ns 0.00	\$70.00
Last Name Forte	First Name Mario		MI	Cash	contribution:    X   Personal C		Contribution I	ID#	Amount of Contribution
Residential Street Address 30 Front St		City New Haven		State CT	Zip Code 06513		ate Received 7/15/2010		
Principal Occupation		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	byist?	Aggre	gate Contribution \$100		\$100.00
Last Name Cassella	First Name marilyn		MI	Cash	contribution: Personal Ci y Order X Credit/Deb		Contribution I	ID#	Amount of Contribution
Residential Street Address 17 Seaview Ave .		City Branford		State CT	Zip Code 06405		ate Received 7/15/2010		
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	utor a lobbyis child of a lob	byist?	Aggre	gate Contribution	ns 5.00	\$75.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribut	ions fron	Individu	ıals			
Last Name figueroa	First Name juan		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 076	ribution ID #	Amount of Contribution
Residential Street Address 152 Fiesta Hts	l	City Meriden		State CT	Zip Code 06451	Date Reco		
Principal Occupation Attorney		Name of Employer UHCF			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	byist?	Aggregate Co	ntributions \$100.00	\$100.00
Last Name figueroa	First Name helene		MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 077	ribution ID #	Amount of Contribution
Residential Street Address 152 Fiesta Hts		City Meriden		State CT	Zip Code 06451	Date Reco		
Principal Occupation  Consultant		Name of Employer Self-employed			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	byist?	Aggregate Co	ntributions \$100.00	\$100.00
Last Name Petronella	First Name Rosemari	e	MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 082	ribution ID #	Amount of Contribution
Residential Street Address 203 Middle Ridge Rd		City New Canaan		State CT	Zip Code 06840	Date Reco		
Principal Occupation		Name of Employer homemaker			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	byist?	Aggregate Co	stributions \$100.00	\$100.00
Last Name Clerkin	First Name Leslie		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 090	ribution ID #	Amount of Contribution
Residential Street Address 1146 Fox Hill Rd		City Cheshire		State CT	Zip Code 06410	Date Reco		
Principal Occupation planning consultant		Name of Employer self-employed			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 \$25.00	\$25.00

		I. MONETARY R	ECEIPT	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribu	tions fron	ı Individu	ıals		•	
Last Name	First Name		MI	Method of	contribution:	Contrib	ution ID#	Amount of
Widmer	Grace			Cash Money	y Order X Personal Cl	0851		Contribution
Residential Street Address		City	•	State	Zip Code	Date Receiv	ed	
6 Autumn Ridge Rd		Oxford		СТ	06478	07/15/20	)10	1
Principal Occupation		Name of Employer unemployed			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 Contr	ibutions \$50.00	\$50.00
Last Name Cotter	First Name John		MI J	x Cash	contribution: Personal Cl y Order Credit/Deb	heck 1083	ution ID#	Amount of Contribution
Residential Street Address 265 Congress St	•	City Bridgeport	•	State CT	Zip Code 06604	Date Receiv 07/15/20		]
Principal Occupation		Name of Employer Nutmeg ADJ inc		•	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	utor a lobbyis child of a lob	byist?	Aggregate Contr	ibutions \$100.00	\$100.00
Last Name Cordero	First Name Rebecca		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	heck 0798	ution ID#	Amount of Contribution
Residential Street Address 77 Venice Pl	l	City East Haven		State CT	Zip Code 06512	Date Receiv		
Principal Occupation Registered Nurse		Name of Employer Veterans Affairs		!	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	utor a lobbyis child of a lob Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00
Last Name Caine	First Name Allison		MI	x Cash	contribution:  Personal Cl y Order Credit/Deb	heck 1126	ution ID#	Amount of Contribution
Residential Street Address 59 Partridge Ct		City Watertown		State CT	Zip Code 06795	Date Receiv		
Principal Occupation		Name of Employer Student/st mary collage		•	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 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 t child of a lob	byist?	Aggregate Contr	ibutions \$75.00	\$75.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contributi	ons fron	Individu	ıals			
Last Name Caine	First Name Martin		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 1128	ution ID#	Amount of Contribution
Residential Street Address 59 Partridge Ct		City Watertown		State CT	Zip Code 06795	Date Receiv 07/15/20		
Principal Occupation		Name of Employer Student Villanova University			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	ributions \$75.00	\$75.00
Last Name Jackson	First Name Lourie		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1129	ution ID#	Amount of Contribution
Residential Street Address 204 Margaret Cir		City Naugatuck		State CT	Zip Code 06770	Date Receiv 07/15/20		
Principal Occupation Buiro Profesional		Name of Employer  Naugatuck Board of educatio	n	•	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 Contr	ributions \$25.00	\$25.00
Last Name Taf	First Name Joan		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1130	ution ID#	Amount of Contribution
Residential Street Address 219 Margaret Cir		City Naugatuck		State CT	Zip Code 06770	Date Receiv		
Principal Occupation		Name of Employer retired			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 state contractor? Is yes, indicate which 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	sibutions \$25.00	\$25.00
Last Name Cobb	First Name Shannon		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0776	ution ID#	Amount of Contribution
Residential Street Address 20 Westwood Dr		City Danbury		State CT	Zip Code 06811	Date Receiv 07/15/20		
Principal Occupation Director, Community Outreach & Com		Name of Employer The Volunteer Center of Unit	ed Way	•	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 res	byist?	Aggregate Conti	ributions \$100.00	\$100.00

		I. N	ONETARY RE	CEIPTS	S (Sectio	on A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. It	emized Contributi	ons from	Individ	uals				
Last Name Cobb	First Name J Michael			MI	Cash	contribution: Personal y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 20 Westwood Dr		City Danbury			State CT	Zip Code 06811	1	oate Received		
Principal Occupation  Communications consultant		Name of E self	mployer			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 x		Aggre	egate Contrib	utions \$90.00	\$90.00
Last Name grimsley	First Name jennifer			MI I	x Cash	contribution: Personal y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 2093 Plank Rd		City Cheshire			State CT	Zip Code 06410		ate Received		
Principal Occupation social worker		Name of E yale u	mployer			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 Yes		Aggre	egate Contrib	utions 100.00	\$95.00
Last Name Alverio-Melley	First Name Diane			MI	X Cash	contribution: Personal y Order Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 55 Brookside Rd		City New Brit	ain		State CT	Zip Code 06052	1	Pate Received 07/15/201		
Principal Occupation  Media Consultant		Name of E D. Alver	mployer rio \$ Co LLC			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		Aggre	egate Contrib	utions 100.00	\$100.00
Last Name Krinitsky	First Name Joyce			МІ	Cash	contribution: Personal y Order X Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 11 Fairview Ave		City Terryville	e		State CT	Zip Code 06786	1	oate Received 07/15/201		
Principal Occupation realtor		Name of E Prudent	mployer ial CT Realty			Is this contribution assoc fundraising event listed i 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 \$25.00	\$25.00

		I. MONETARY RE	ECEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribut	ions fron	Individu	ıals			
Last Name Jawien	First Name Izabella		MI	Cash	contribution: Personal Cl	heck 0944	ution ID#	Amount of Contribution
Residential Street Address 69 Woodlawn Ave		City Staten Island		State NY	Zip Code 10305	Date Receiv 07/15/20		
Principal Occupation  Room Attendant		Name of Employer Skyline Hotel			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 Yes	byist?	Aggregate Contr	sibutions \$100.00	\$100.00
Last Name Lebov	First Name Philip		MI	Cash	contribution:  X Personal Cl / Order Credit/Debi	heck 1030	ution ID#	Amount of Contribution
Residential Street Address 43 Fox Hill Rd		City Woodbridge		State CT	Zip Code 06525	Date Receiv 07/15/20		
Principal Occupation Subs		Name of Employer Supreme Corp		•	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 Yes	byist?	Aggregate Contr	ibutions \$100.00	\$100.00
Last Name wood	First Name Adam		MI	X Cash	contribution:  Personal Cl  Order Credit/Debi	heck 1165	ution ID#	Amount of Contribution
Residential Street Address 120 Midland Ave		City Bridgeport		State CT	Zip Code 06605	Date Receiv 07/15/20		
Principal Occupation  consultant		Name of Employer self consultant			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 Contr	ibutions \$100.00	\$100.00
Last Name Caban	First Name Manuel		MI	X Cash	contribution: Personal Cl	heck 1106	ution ID#	Amount of Contribution
Residential Street Address 246 Elm St		City West Haven		State CT	Zip Code 06516	Date Receiv 07/15/20		
Principal Occupation  Minister		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #	Section J19	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	\$90.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
B. Itemized Contributions from Individuals										
Last Name Smith	First Name elizabeth		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 0875	oution ID #	Amount of Contribution		
Residential Street Address 401 Route 148		City Killingworth		State CT	Zip Code 06419	Date Recei				
Principal Occupation finace		Name of Employer city of new haven			Is this contribution associate fundraising event listed in the second of 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 es x	byist?	Aggregate Con	tributions \$40.00	\$20.00		
Last Name smith	First Name elizabeth		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0877	oution ID#	Amount of Contribution		
Residential Street Address 401 Route 148		City Killingworth		State CT	Zip Code 06419	Date Recei				
Principal Occupation finace		Name of Employer city of new haven		•	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 Con	tributions \$40.00	\$20.00		
Last Name maya	First Name alma		MI	Cash	contribution:  Personal Ch y Order X Credit/Debi	neck 0769	oution ID #	Amount of Contribution		
Residential Street Address 220 Funston Ave .		City Bridgeport		State CT	Zip Code 06606	Date Recei				
Principal Occupation town clerk		Name of Employer city of bridgeport		•	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 Con	tributions \$25.00	\$25.00		
Last Name Johnson	First Name Ronald		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 0844	oution ID#	Amount of Contribution		
Residential Street Address 597 Farmington Ave		City Hartford		State CT	Zip Code 06108	Date Recei				
Principal Occupation Attorney		Name of Employer Self Employed		•	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 Con	tributions \$100.00	\$50.00		

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE							I	FILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contribut	ions fron	ı Individu	ıals				
Last Name Morrissey	First Name Barbara		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	neck	Contribution 1	ID#	Amount of Contribution
Residential Street Address 86 Gilbert St		City West Haven		State CT	Zip Code 06516		e Received 15/2010		
Principal Occupation Exec Secy		Name of Employer City of West Haven		•	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 lobbyis child of a lob Yes	byist?	Aggregat	te Contributio \$!	ons 5.00	\$5.00
Last Name Peterson	First Name Peter		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	neck	Contribution I	ID#	Amount of Contribution
Residential Street Address 20 Long View Dr		City Simsbury		State CT	Zip Code 06070		e Received 15/2010		
Principal Occupation Insurer Sales		Name of Employer Crump		•	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 lobbyis child of a lob Yes	byist?	Aggregat	te Contributio \$100	ons 0.00	\$100.00
Last Name Hurd	First Name Lorna		MI	Cash	contribution:    X   Personal Character   Credit/Debi	neck	Contribution l	ID#	Amount of Contribution
Residential Street Address 11 Garella Rd		City Bethel		State CT	Zip Code 06801		Received /15/2010		
Principal Occupation Framer		Name of Employer Church Hill Classics			Is this contribution associate fundraising event listed in St. 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?	Aggregat	te Contributio \$100	ons 0.00	\$100.00
Last Name Chambrelli	First Name Dorothy		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	neck	Contribution 1	ID#	Amount of Contribution
Residential Street Address 23 Meadowbrook Rd		City West Haven		State CT	Zip Code 06516		e Received 15/2010		
Principal Occupation Admin Secretary		Name of Employer City of West Haven		•	Is this contribution associat fundraising event listed in S 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?	Aggregat	te Contributio \$20	ons 0.00	\$20.00

		I. MONETARY R	ECEIPT	S (Sectio	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribu	ıtions fron	n Individu	ıals			
Last Name Perkins	First Name Duane		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	0848	tion ID#	Amount of Contribution
Residential Street Address 22 Main St Unit 9		City Danbury		State CT	Zip Code 06810	Date Receive 07/15/20		
Principal Occupation Professor		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	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contri	outions \$100.00	\$100.00
Last Name Dejesus	First Name Rafael Mo	ora	MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	0953	tion ID#	Amount of Contribution
Residential Street Address 106 Victoria Rd		City Hartford		State CT	Zip Code 06114	Date Receive 07/15/203		
Principal Occupation		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	dependen	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contri	outions \$100.00	\$100.00
Last Name Wagner	First Name Matthew		MI	x Cash	contribution: Personal Cl y Order Credit/Deb	1045	tion ID#	Amount of Contribution
Residential Street Address 26 Dalewood Ave		City Fairfield		State CT	Zip Code 06824	Date Receive 07/15/20		
Principal Occupation Reg of voters		Name of Employer Town of Fairfield		•	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	outions \$100.00	\$100.00
Last Name Knowles	First Name Dorothy		MI	Cash	contribution:  X Personal Cl y Order Credit/Deb	1131	tion ID#	Amount of Contribution
Residential Street Address 157 Park Ave		City Naugatuck		State CT	Zip Code 06770	Date Receive 07/15/202		
Principal Occupation		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 contractorstate 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	outions \$100.00	\$100.00

		I. MC	ONETARY REC	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	G DUE DATE
Friends Of Gerry Garcia										
		B. Iten	nized Contributio	ons from	Individu	ıals				
Last Name Santiago	First Name Hilda			MI	x Cash	contribution: Personal of the property of the		Contributi 0765	on ID#	Amount of Contribution
Residential Street Address 86 South Ave		City Meriden			State CT	Zip Code 06451		Date Received		
Principal Occupation		Name of Empl	loyer			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	child of a lob	byist?	Aggre	egate Contrib	utions \$25.00	\$25.00
Last Name Mangiacopra	First Name Vincent			MI	Cash	contribution:  X Personal of the Credit/De		Contributi	on ID#	Amount of Contribution
Residential Street Address 8 Thistle Rd		City Norwalk			State CT	Zip Code 06851		Oate Received 07/15/201		
Principal Occupation  Consulting		Name of Empl	loyer			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	byist?	Aggre	egate Contribi	utions \$10.00	\$10.00
Last Name Gomez	First Name Victor			MI	x Cash	contribution: Personal ( y Order Credit/De		Contributi 0822	on ID#	Amount of Contribution
Residential Street Address 15 Vera St		City East Haven	1		State CT	Zip Code 06512		Date Received		
Principal Occupation reverend		Name of Empl unemploye	•	_		Is this contribution assoc 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  Legislative	dependent	child of a lob	byist?	Aggre	egate Contrib	utions 100.00	\$60.00
Last Name Ruben	First Name Felipe			MI	x Cash	contribution: Personal of the property of the		Contributi	on ID#	Amount of Contribution
Residential Street Address 195 Crestview Dr		City Bridgeport			State CT	Zip Code 06606		Date Received		
Principal Occupation  Mayor's Aide		Name of Empl City of Brid	-			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	byist?	Aggre	egate Contrib	utions 100.00	\$100.00

		I. MONETARY	RECEII	PTS (Section	on A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contr	ibutions f	rom Individ	luals			
Last Name Sierra	First Name Arnaldo		MI	Cash	f contribution:  X Personal ey Order Credit/Do	Check 1011	ution ID#	Amount of Contribution
Residential Street Address 1224 Prospect Ave		City Hartford	•	State CT	Zip Code 06105	Date Receiv 07/15/20		
Principal Occupation Attorney		Name of Employer Self			Is this contribution assoc fundraising event listed i 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 N  Executive Legislative		ontributor a lobby endent child of a lo		Aggregate Conti	ibutions \$100.00	\$100.00
Last Name McClain	First Name Tyrone		MI	X Cash	f contribution: Personal ey Order Credit/De	Check 1075	ution ID#	Amount of Contribution
Residential Street Address 2600 Park Ave		City Bridgeport		State CT	Zip Code 06604	Date Receiv 07/15/20		
Principal Occupation  Mayor's Aide		Name of Employer City of Bridgeport		•	Is this contribution assoc fundraising event listed i 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		ontributor a lobby endent child of a lo		Aggregate Conti	ibutions \$100.00	\$100.00
Last Name Corbett	First Name Milliceni		MI	X Cash	f contribution: Personal ey Order Credit/De	Check 1113	ution ID#	Amount of Contribution
Residential Street Address 120 Fairfax St		City West Haven		State CT	Zip Code 06516	Date Receiv		
Principal Occupation		Name of Employer retired		•	Is this contribution assoc fundraising event listed i If yes, list Event #	n 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	No Is co	ontributor a lobby endent child of a lo		Aggregate Conti	ibutions \$100.00	\$100.00
Last Name Scott	First Name Carolyn		MI	X Cash	f contribution: Personal ey Order Credit/De	Check 0809	ution ID#	Amount of Contribution
Residential Street Address 83 Admiral St		City New Haven		State CT	Zip Code 06511	Date Receiv		
Principal Occupation Purchasing		Name of Employer HB Communications		•	Is this contribution assoc fundraising event listed i 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		ontributor a lobby endent child of a lo		Aggregate Conti	ibutions \$100.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)					
NAME OF COMMITTEE							FILING	G DUE DATE		
Friends Of Gerry Garcia										
B. Itemized Contributions from Individuals										
Last Name Garcia	First Name Edna		MI	Cash	contribution:  X Personal Characteristics of the contribution:  y Order Credit/Debi	neck 0948	ution ID#	Amount of Contribution		
Residential Street Address 1465 E Main St		City Bridgeport		State CT	Zip Code 06608	Date Receiv 07/15/20				
Principal Occupation Teacher		Name of Employer City of Bridgeport			Is this contribution associate fundraising event listed in the street 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 Contr	\$100.00	\$100.00		
Last Name Rodriguez	First Name Sergio		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1107	ution ID#	Amount of Contribution		
Residential Street Address 142 Judwin Ave		City New Haven		State CT	Zip Code 06515	Date Receiv 07/15/20				
Principal Occupation Counselor		Name of Employer Career resources			Is this contribution associal fundraising event listed in the second of the second second in the second sec	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 Contr	ibutions \$25.00	\$25.00		
Last Name Santiago	First Name Marie		MI	Cash	contribution:  Personal Ch y Order X Credit/Debi	neck 0779	ution ID#	Amount of Contribution		
Residential Street Address 490 Lighthouse Rd		City New Haven		State CT	Zip Code 06512	Date Receiv				
Principal Occupation retired		Name of Employer retired		•	Is this contribution associal fundraising event listed in S 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 x	byist?	Aggregate Contr	\$50.00	\$50.00		
Last Name Holloway	First Name James		MI	x Cash	contribution: Personal Ch y Order Credit/Debi	neck 1076	ution ID#	Amount of Contribution		
Residential Street Address 427 Wilmot Ave		City Bridgeport		State CT	Zip Code 06607	Date Receiv				
Principal Occupation City Supervisor		Name of Employer City of Bridgeport			Is this contribution associal fundraising event listed in S If yes, list Event #	Section J19	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. MON	ETARY RE	CEIPTS	S (Section	n A-I)				
NAME OF COMMITTEE									FILING	DUE DATE
Friends Of Gerry Garcia										
		B. Itemize	ed Contributi	ons from	Individu	ıals				
Last Name Ricci	First Name John			MI	X Cash	contribution: Personal C y Order Credit/De		Contribution	ı ID#	Amount of Contribution
Residential Street Address 2675 Park Ave Unit 2		City Bridgeport			State CT	Zip Code 06604		7/15/2010		
Principal Occupation Airport Manager		Name of Employer City of Bridge				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 Contributi \$10	ions 00.00	\$100.00
Last Name wood	First Name Jeffrey			MI	X Cash	contribution: Personal C y Order Credit/De		Contribution	ı ID#	Amount of Contribution
Residential Street Address 260 France St		City Rocky Hill			State CT	Zip Code 06067		ate Received 7/15/2010		
Principal Occupation		Name of Employer retired			•	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 es x	byist?	Aggre	gate Contributi \$10	ions 00.00	\$100.00
Last Name zept	First Name adam			MI	X Cash	contribution:  Personal C y Order Credit/De		Contribution	ı ID#	Amount of Contribution
Residential Street Address 260 France St		City Rocky Hill			State CT	Zip Code 06067		7/15/2010		
Principal Occupation nutritionist		Name of Employer Supplement 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	dependent	utor a lobbyis child of a lob	byist?	Aggre	egate Contributi \$10	ions 00.00	\$100.00
Last Name szeps	First Name holly			MI	x Cash	contribution: Personal C y Order Credit/De		Contribution	ı ID#	Amount of Contribution
Residential Street Address 260 France St		City Rocky Hill			State CT	Zip Code 06067		7/15/2010		
Principal Occupation sales		Name of Employer Carey manufa				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	byist?	Aggre	gate Contributi \$10	ions 00.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Sectio	n A-I)				
NAME OF COMMITTEE								FILING	G DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contributi	ons from	ı Individu	ıals				
Last Name Williams	First Name Antoinette	e	MI R	x Cash	contribution: Personal Ch y Order Credit/Debi		Contribution	on ID#	Amount of Contribution
Residential Street Address 60 Main St		City Farmington		State CT	Zip Code 06032	- 1	nte Received 7/15/2010	)	
Principal Occupation Administrator		Name of Employer Miss Porter's School		•	Is this contribution associate fundraising event listed in State of the 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	.00.00	\$100.00
Last Name Chertow	First Name Marian		MI	Cash	contribution: Personal Cl y Order X Credit/Debi		Contribution	on ID#	Amount of Contribution
Residential Street Address 35 Huntington St		City New Haven		State CT	Zip Code 06511		nte Received 7/15/2010	)	
Principal Occupation Professor		Name of Employer Yale University			Is this contribution associate fundraising event listed in State of the 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	ons.00.00	\$100.00
Last Name Walker	First Name Toni		MI	Cash	contribution:    X   Personal Character   Credit/Debit		Contribution 1153	on ID#	Amount of Contribution
Residential Street Address 1643 Ella Grasso Blvd		City New Haven		State CT	Zip Code 06511		7/15/2010	)	
Principal Occupation Social Worker		Name of Employer  New Haven Adult Education			Is this contribution associate 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 res	byist?	Aggreg	gate Contribu \$1	ons.00.00	\$50.00
Last Name Curry	First Name Kathleen		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi		Contribution 1059	on ID #	Amount of Contribution
Residential Street Address 80 Sycamore Rd		City West Hartford		State CT	Zip Code 06117	- 1	nte Received 7/15/2010	)	
Principal Occupation  consultant		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	outor a lobbyis t child of a lob Yes	byist?	Aggreg	gate Contribu \$1	.00.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contributi	ions fron	Individu	ıals			
Last Name weiner	First Name gerald		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 078	ibution ID #	Amount of Contribution
Residential Street Address 15 Bishop Dr		City Woodbridge		State CT	Zip Code 06525	Date Reco		
Principal Occupation lawyer		Name of Employer weinstein weiner ignal pc			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 Morante	First Name Rosemary	,	MI	Cash	contribution:  Personal Cl y Order X Credit/Debi	neck 081	ibution ID #	Amount of Contribution
Residential Street Address 28 Welch St		City Plainville		State CT	Zip Code 06062	Date Rece 07/15/2		
Principal Occupation School Administrator		Name of Employer Windsor Public Schools			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	s45.00	\$25.00
Last Name mcCarthy	First Name Catherine		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 116	ibution ID #	Amount of Contribution
Residential Street Address 130 E Eaton St		City Bridgeport		State CT	Zip Code 06604	Date Reco		
Principal Occupation business manager		Name of Employer saint augustin's cathedral		•	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	\$100.00	\$100.00
Last Name McCarthy	First Name Eamonn		MI	X Cash	contribution:  Personal Cl y Order Credit/Debi	neck 116	ibution ID #	Amount of Contribution
Residential Street Address 130 E Eaton St		City Bridgeport		State CT	Zip Code 06604	Date Rece 07/15/2		
Principal Occupation meet cutter		Name of Employer stop and shop	_		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 es	byist?	Aggregate Co	stributions \$100.00	\$100.00

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILING	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contribut	ions from	Individu	ıals			
Last Name Testa	First Name Mario		MI	X Cash	contribution: Personal Cl	neck 1087	ution ID#	Amount of Contribution
Residential Street Address 1775 Madison Ave		City Bridgeport		State CT	Zip Code 06606	Date Receiv 07/15/20		
Principal Occupation		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 Contr	\$100.00	\$100.00
Last Name Picard	First Name John		MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 0801	ution ID#	Amount of Contribution
Residential Street Address 212 Ocean Ave		City West Haven		State CT	Zip Code 06516	Date Receiv 07/15/20		
Principal Occupation  Mayor		Name of Employer City of West Haven		•	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 Yes	byist?	Aggregate Contr	ibutions \$100.00	\$75.00
Last Name Alvarado	First Name Frank		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0772	ution ID#	Amount of Contribution
Residential Street Address 140 Mill St # 16115		City East Haven		State CT	Zip Code 06512	Date Receiv 07/15/20		
Principal Occupation  Real Estate Agent		Name of Employer Keller-Williams		•	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 No  Executive Legislative	dependent	utor a lobbyis child of a lob es x	byist?	Aggregate Contr	stantions \$100.00	\$100.00
Last Name Hardy	First Name Herbert		MI	Cash	contribution:    X   Personal Cl	neck 1112	ution ID#	Amount of Contribution
Residential Street Address 471 Whalley Ave Unit H		City New Haven		State CT	Zip Code 06511	Date Receiv 07/15/20		
Principal Occupation Accountant		Name of Employer Blum Shapiro & Co LLP			Is this contribution associa fundraising event listed in If yes, list Event #	Section J19	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							FILIN	G DUE DATE			
Friends Of Gerry Garcia											
		B. Itemized Contributi	ions fron	Individu	ıals						
Last Name Mgamm	First Name Famarpar	na	MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 1134	ibution ID #	Amount of Contribution			
Residential Street Address 5 Chinmoy Ave		City Greenwich		State CT	Zip Code 06830	Date Rece 07/15/2					
Principal Occupation teacher		Name of Employer  Darien Library			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 Giaimo	First Name Rosalie		MI	Cash	contribution:  X Personal Cl / Order Credit/Deb	heck 1034	ibution ID #	Amount of Contribution			
Residential Street Address 11 Crestwood Dr		City East Haven		State CT	Zip Code 06513	Date Rece 07/15/2					
Principal Occupation Secretary		Name of Employer Berchem, Moses & Devlin P.0	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 Cor	stributions \$100.00	\$100.00			
Last Name Hoffstatter	First Name Ted		MI	Cash	contribution: Personal Cl  Order X Credit/Deb	heck 0846	ibution ID #	Amount of Contribution			
Residential Street Address 201 Deer Run Rd		City Wilton		State CT	Zip Code 06897	Date Rece 07/15/2					
Principal Occupation teacher		Name of Employer wilton public schools			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 Cor	stributions \$10.00	\$10.00			
Last Name McCarthy	First Name Thomas		MI	Cash	contribution:  X Personal Cl  Order Credit/Deb	heck 0830	ibution ID#	Amount of Contribution			
Residential Street Address 68 Trumbull St		City West Haven		State CT	Zip Code 06516	Date Rece 07/15/2					
Principal Occupation		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	utor a lobbyis child of a lob es	byist?	Aggregate Cor	stributions \$100.00	\$100.00			

		I. MONETARY RE	CEIPTS	S (Section	n A-I)			
NAME OF COMMITTEE							FILIN	G DUE DATE
Friends Of Gerry Garcia								
		B. Itemized Contributi	ions fron	Individu	ıals			
Last Name Dickey	First Name Debra		MI	Cash	contribution: Personal Ch y Order X Credit/Debi	neck 0881	ution ID#	Amount of Contribution
Residential Street Address  10 Belval St		City Norwich		State CT	Zip Code 06360	Date Receive 07/15/20		
Principal Occupation unemployed		Name of Employer unemployed			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 es x	byist?	Aggregate Cont	stributions \$5.00	\$5.00
Last Name Capodilupo	First Name Francesca	1	MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0836	ution ID#	Amount of Contribution
Residential Street Address 513 Branchville Rd		City Ridgefield		State CT	Zip Code 06877	Date Receive 07/15/20		
Principal Occupation Field Organizer		Name of Employer  Ned Lamont for Governoe			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 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 Cont	ributions \$100.00	\$100.00
Last Name Candelaria	First Name Zuleika		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	neck 1141	ution ID#	Amount of Contribution
Residential Street Address 30 Arch St		City New Haven		State CT	Zip Code 06519	Date Receiv		
Principal Occupation		Name of Employer student		•	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	byist?	Aggregate Cont	ributions \$100.00	\$100.00
Last Name Afanador	First Name Luz		MI	X Cash	contribution: Personal Ch y Order Credit/Debi	neck 1146	ution ID#	Amount of Contribution
Residential Street Address 30 Arch St		City New Haven		State CT	Zip Code 06519	Date Receiv		
Principal Occupation Truant officer		Name of Employer City of new haven			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 Cont	ributions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FILING	G DUE DATE	
Friends Of Gerry Garcia									
		B. Itemized Contribut	tions fron	ı Individu	ıals				
Last Name Gomes	First Name Janet		MI	Cash	contribution:    X   Personal Cl	neck 0832	tion ID#	Amount of Contribution	
Residential Street Address 150 Alpine St		City Bridgeport		State CT	Zip Code 06610	Date Receive 07/15/20			
Principal Occupation		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 No  Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions \$100.00	\$100.00	
Last Name Rosario	First Name Christoph	ner	MI	Cash	contribution:  X Personal Cl y Order Credit/Debi	neck 1064	tion ID#	Amount of Contribution	
Residential Street Address 335 Wells St Apt 24		City Bridgeport		State CT	Zip Code 06606	Date Receive 07/15/20			
Principal Occupation City Stat		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 of 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 Contri	butions \$100.00	\$100.00	
Last Name Bayne	First Name Carolyn		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	neck 0922	ition ID#	Amount of Contribution	
Residential Street Address 5 Windsor Rd		City Darien		State CT	Zip Code 06820	Date Receive 07/15/20			
Principal Occupation		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	outor a lobbyis t child of a lob Yes	byist?	Aggregate Contri	butions \$50.00	\$50.00	
Last Name Armmaud	First Name Esther		MI	Cash	contribution:    X   Personal Cl	neck 1111	tion ID#	Amount of Contribution	
Residential Street Address 664 Quinnipiac Ave		City New Haven		State CT	Zip Code 06513	Date Receive			
Principal Occupation  consultant		Name of Employer The consultation center			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	dependent	utor a lobbyis child of a lob Yes	byist?	Aggregate Contri	butions \$50.00	\$50.00	

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE								FILING	DUE DATE
Friends Of Gerry Garcia									
		B. Itemized Contril	butions fro	n Individu	ıals				
Last Name Lawlor	First Name Martin		MI	Cash	contribution:    X   Personal C y Order		Contribution 0981	ID#	Amount of Contribution
Residential Street Address 40 Shelley Rd		City Bethel		State CT	Zip Code 06801		ate Received 7/15/2010		
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	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggreg	gate Contributio	ons 00.00	\$100.00
Last Name Keyes	First Name Suzanne		MI S	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 0805	ID#	Amount of Contribution
Residential Street Address 63 Marvel Rd		City New Haven		State CT	Zip Code 06515		ate Received 7/15/2010		
Principal Occupation		Name of Employer Homemaker		•	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	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggreg	gate Contributio	ons 00.00	\$100.00
Last Name Destefano	First Name John		MI	Cash	contribution:    X   Personal C y Order		Contribution 1053	ID#	Amount of Contribution
Residential Street Address 150 Judwin Ave		City New Haven		State CT	Zip Code 06515		nte Received 7/15/2010		
Principal Occupation  Mayor		Name of Employer City of new haven			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	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggreg	gate Contributio	ons 00.00	\$100.00
Last Name De Stefano	First Name Katherine		MI	Cash	contribution:  X Personal C y Order Credit/Deb		Contribution 1051	ID#	Amount of Contribution
Residential Street Address 150 Judwin Ave		City New Haven		State CT	Zip Code 06515		ate Received 7/15/2010		
Principal Occupation Teacher		Name of Employer City of West haven			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	depender	butor a lobbyis nt child of a lob Yes	byist?	Aggreg	gate Contributio	ons 00.00	\$100.00
			•				Total of Se	ection B	\$52,785.00
TOTAL OF ALL CONTRIBU	JTIONS FI	ROM INDIVIDUALS	(Sect	ions A & B	) (Total on Line 14	of Summ	nary Page)		\$52,785.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	DUE DATE		
Friends Of Gerry Garcia										
C1. Contributions from Other Committees										
Name of Committee					Name of Treasurer					
Address  Is this contribution associated with a Yes If yes, list E fundraising event listed in Section J1? No				* *	t #	Amount of Contribution				
City	State	Zip	Code	Date R	eceived	Aggregate Contributions				
Total of Section C1										

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE				FILIN	NG DUE DATE			
Friends Of Gerry Garcia								
C2. Reimbursements or Payments from other Committees								
Name of Committee			Name of Treasurer					
Address			Date Received		Amount of Receipt			
City	State	Zip Code	Reimbursement for shared expense					
			Payment for goods and services					
	<u> </u>	<u> </u>						
Total of Section C2								

	I. MONETARY RECEIPTS (Section	on A-K)	)			
NAME OF COMMITTEE					FILING	DUE DATE
Friends Of Gerry Garcia						
	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 DATE				
Friends Of Gerry Garcia									
	E. Personal Funds of the Candidate Received this Period								
Date Received	Amount	Method of Paymen	ut Cash	Personal Check	Credit/Debit Card				
Total of Section E									

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTE	FILING DUE DATE								
Friends Of Gerry Gard									
Date Received	\$ 1 bills	\$ 5 bills	\$ 10 bill	coins	Amount				

I. Monetary Receipts (Section A-I)										
NAME OF COMMITTEE					FILI	NG DUE DATE				
Friends Of Gerry Garcia										
G. Interest from Deposits in Authorized Accounts										
Name of Institution		Date Received				Total Amount Received				
Street Address	City		State	Zip Code						

I. MONETARY RECEIPTS (Section A-K)										
NAME OF COMMITTEE			FILING DUE DATE							
Friends Of Gerry Garcia										
H. Public Grant Funds Received from the Citizen's Election Fund										
Purpose of Grant:  Initial  Primary General or Special Election	Supplemental/Independent Expenditure Primary General or Special Election	Date Received	Amount							
Supplemental/Post Election Deficit  General or Special Election	Supplemental/Excess Expenditure Primary General or Special Election									
		Total of Section	н							

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

	II. FUNDRAISING	G EVENT ACTIVITY					
NAME OF					FILING D	UE DATE	
COMMITTEE Friends Of Gerry G	arcia						
	J1. Fundra	nising Event Information					
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address		City	S	state Zip Code	;
07/06/2010 J	Meet and Greet Event	3087 Front St		New Haven	C	O6513	
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	s 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	S	tate Zip Code	,
07/10/2010 J	Meet and Greet Event	315 Campbell Ave		West Haven	C	СТ	
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	s 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	S	tate Zip Code	;
07/13/2010 j	Meet and Greet Event	254 Crown St		New Haven	C	O6511	
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	s X No			
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	x No			

II. FUNDRAISING EVENT ACTIVITY										
NAME OF COMMITTEE							FILIN	G DUE DATE		
Friends Of Gerry Garcia										
J2. Proceeds from Tag Sale, Auction, or Other Sale of Donated Items										
Name of the Purchaser Last Name (Individuals ONLY)	First Name	MI	Me	lethod of payment:  Cash Per	oit Card	Aggregate Amount of Purchases				
Residential Street Address	City	Sta	ite	Zip Code	Date Received	Event #				
Items Purchased	•	•	_	-	•	•				
					7	Cotal of Se	ction I2			

	II. FUNDRAISING EVENT ACTIV	VITY	Y					
NAME OF COMMITTEE							FILING	G DUE DATE
Friends Of Gerry Garcia								
J3. In-Ki	nd Donations Not Considered Contributi	ions						
Name of the Donor					Donation G		ess Entity	Fair Market Value of Donation
Street Address	City		State	Zip	Code	Aggregate value for this even		
Description of Donation		Date	Receive	ed	Event #			
						Total of Se	ection J3	

	III. N	NON	МО	NETARY RECEIPTS					
NAME OF COMMITTEE								FILING I	DUE DATE
Friends Of Gerry Garcia									
	K. 1	In-K	ind (	Contributions					
Name							Date Receive	ed	Fair Market Value of this Contribution
Street Address		C	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 or prospective state contractor?  If yes, indicate which branch or branches of government the contract is with:  Executive				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	ributions	
							Total of	f Section K	

III. Non Monetary Receipts									
NAME OF COMMITTEE							FILING DUE DATE		
Friends Of Gerry Garcia									
L. Refundable Deposit to Telephone Company									
Last Name ( Individuals Only )	First Name M			MI		Date Received	Amount of Deposit		
Street Address	City	City State 2		Zip Code					
Name of Telephone company									
Street Address	City			State	Zip Code				
	L								

III. NONMONETA								
NAME OF COMMITTEE				FILING DUE DATE				
Friends Of Gerry Garcia								
M. Non-Monetary Receipts of Organization Expenditures Made By Legislative Leadership, Legislative Caucus, and Party Committee								
Name of Committee		Name of Treasurer						
Street Address			Date Notice Received	Fair Market Value of Donation				
City	State	Zip Code						
Description of Donation		Purpose of Expenditure  A B	C D	Е				
Total of Section M								

IV. EXPENDITURES							
NAME OF COMMITTEE						FILE	NG DUE DATE
Friends Of Gerry Garcia							
	N. Expenses Paid By Comm	ittee				•	
Name of Payee campaignsone				Date of Payment 07/06/2010	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1034</u>		
12 Boston Tpke	Coventry	СТ	06238	PRNT	Debit Car	rd	
Description walk cards					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	or Other Candidate(s)	Name		Office Sought			\$4,146.00
X No				<u> </u>			\$4,140.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Applied Merchant Services			_	07/06/2010	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	_		
737 N MI Highway 32020	Chicago	IL	60611	WEB	X Debit Car	rd	
Description transaction fees for online contributions					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	Other Candidate(s)	Name		Office Sought			
Yes X No							\$19.58
Name of Payee				Date of Payment	Method of Pays	ment	Amount
Jenelle's	1			07/07/2010	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	1033		
307 Front St	New Haven	СТ	06513	FOOD	Debit Car	rd	
Description					Event # 07062010J		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes	Other Candidate(s)	Name		Office Sought			\$210.00
X No							\$210.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILE	NG DUE DATE
Friends Of Gerry Garcia							
	N. Expenses Paid By Commi	ttee				•	
Name of Payee Four Roses restaurant				Date of Payment 07/10/2010	Method of Paye	ment	Amount
Street Address 315 Campbell Ave	City West Haven	State CT	Zip Code 06516	Purpose of Expenditure FOOD	X Debit Car	rd	
Description					Event # 07102010J		
Is this expenditure coordinated with another candidate for which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought			\$44.04
Name of Payee Citizens Bank				Date of Payment 07/13/2010	Method of Pay	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	Check #		
263 Hemingway Ave	East Haven	СТ	06512	BNK	X Debit Car	rd	
Description deposited scheck returned fee			•		Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	ame		Office Sought			\$10.00
X No				T	l		
Name of Payee  Citizens Bank				Date of Payment 07/13/2010	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	Check #		
263 Hemingway Ave	East Haven	СТ	06512	BNK	X Debit Car	rd	
Description deposited check returned fee		•			Event #		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes	r Other Candidate(s) N	lame		Office Sought			
X No							\$10.00

	IV. EXPENDITURE	s					
NAME OF COMMITTEE						FILI	NG DUE DATE
Friends Of Gerry Garcia							
	N. Expenses Paid By Commi	ttee				•	
Name of Payee Bar				Date of Payment 07/13/2010	Method of Pays	ment	Amount
Street Address 254 Crown St	City New Haven	State CT	Zip Code 06511	Purpose of Expenditure	X Debit Car	rd	
Description		•	•	•	Event # 07132010j		
Is this expenditure coordinated with another candidate fo which reimbursement is sought?  Yes  No	r Other Candidate(s) N	ame		Office Sought	•		\$192.82
X No					Total of Sec	ction N	\$4,632.44

	IV.	EXPENDITURES						
NAME OF COMMITTEE FILING DO								
Friends Of Gerry Garcia								
	O. Cam	paign Expenses Paid By Candidate						
Name of Payee Date of Payment				Is Reimbur Claimed?		rsement	Amount	
Street Address		City	State	Zip Code Ye				
Purpose of Expenditure	Description				Event #			
Total of Section O								

IV. EXPENDITURES										
NAME OF COMMITTEE						FIL	ING DUE DATE			
Friends Of Gerry Garcia										
P. Expenses Incurred on Committee Credit Card										
Name of Issuing Institution			Type of Credit C	ard:						
			Visa	Master Card	Discover	Americ	ean			
			Other							
Name of Vendor					Date of Transaction		Amount			
Street Address		City	State	Zip Code						
Purpose of Expenditure	Description		'	•	Event #					
					Total of Section	P				

IV. EXPI	ENDITURES				
NAME OF COMMITTEE				FILING I	DUE DATE
Friends Of Gerry Garcia					
Q. Expenses Incurred By Com	umittee but Not Paid Duri	ng this Period		•	
Name of Creditor		Date Incurred	Event #		Amount Incurred (Estimate or
Street Address	City	•	State	Zip Code	Actual)
Purpose of Expenditure			•		
Is this expenditure coordinated with another candidate for Other Candida which reimbursement is sought?  Yes  No	ate(s) Name	Office Sought			
			Total of	Section Q	

IV. EXPENDITURES								
NAME OF COMMITTEE					FILI	NG DUE DATE		
Friends Of Gerry Garcia								
R. Itemization of Reimbursements to Committee Workers and Consultants								
Name of Worker/Consultant		Date of Pa	nyment	Method of Payme Check #	ent	Amount		
Secondary Payee		Purpose of Expenditure		Debit Card				
Street Address	City		State Z		State Zip Code			
Description				Event #				
Is this expenditure coordinated with another candidate for Other Candi which reimbursement is sought?	date(s) Name	Office	Sought					
Yes No								
				Total of Se	ction R			

IV. EXPI	ENDITURES				
NAME OF COMMITTEE				FII	LING DUE DATE
Friends Of Gerry Garcia					
S. Surplus Distri	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	