

Electronic Filing

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Page 1 of 56

SUMMARY PAGE										
1.NAME OF COMMITTEE							2. TY	PE OF COMMITTEE		
Corey For Connecticut							x	Candidate Committee Exploratory Committee		
3. TREASURER NAME							•	•		
Title	First Richard			MI	Last Twilley			Suffix		
4. TREASURER ADDRESS			_					•		
Street Address 221 Trumbull St			City Hartf	ord		State CT		Zip Code 06105		
5. ELECTION DATE			6. (OFFICE SOUC	GHT (if applicable)		7. DISTI	RICT CODE (if applicable)		
11/02/2010		Secretary of the Sta	ate							
8. CANDIDATE NAME										
Title First MI Last Suffix Corey J Brinson Suffix										
9. TYPE OF REPORT										
October 10 Filing - Original										
10. PERIOD COVERED										
		Beginning Date			Ending Date					
		07/01/2009	thr	u	09/30/2009					
			11 CEI		I					
			II. CEI	RTIFICATION	N					
on this Itemiz	I hereby certify and state, under penalties of false statement, that all of the information set forth on this Itemized Campaign Finance Disclosure Statement for the period covered is true, accurate and complete.									
Electronic Filing Richard Twilley 10/13/2009										
SIGNATURE										
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

NAME OF COMMITTEE	FILING DUE DATE	
Corey For Connecticut	Original 10/13/2009	
	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	\$4,654.36	
14. Contributions received from Individuals (Section A and B)	\$8,297.00	\$9,197.24
15. Receipts from Other Committees (Sections C1 + C2)	\$0.00	\$0.00
16. Other Monetary Receipts (Section D-I)	\$0.00	\$7,525.00
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)	\$8,297.00	\$16,722.24
19. Subtotals (add totals in line 13 + line 18 in Column A and in lines 12 + 18 in Column B)	\$12,951.36	\$16,722.24
20. Expenses Paid by Committee (Section N)	\$8,331.62	\$12,102.50
21. Balance on hand at close of Reporting Period (Subtract line 20 from line 19)	\$4,619.74	\$4,619.74
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)	\$845.63	\$997.89
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)	\$582.21	
29a. Total Outstanding Expenses Incurred by Committee still Unpaid (Section Q)	\$582.21	

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE								FILING	DUE DATE
Corey For Connecticut								Origina	al 10/13/2009
A. Total Contributions from	n Small (Contributors-Received th	is Perio	d ONLY	7				
(See instructions for definition of Small					total Section A	\$3,557.0	0		
		B. Itemized Contributi	ons fron	n Individu	ıals				
Last Name	First Name		MI	Method of	contribution:		Contributio	n ID #	Amount of
Corrado	Julie		E	Cash Money	y Order Credit/D	l Check Debit Card	26		Contribution
Residential Street Address		City		State	Zip Code	Г	Date Received		
22 Charter Oak Pl # 1N		Hartford		СТ		C	7/06/2009)	
Principal Occupation		Name of Employer			Is this contribution asso fundraising event listed			Yes	
Realtor		Century 21 - Alaimo & Corra	do		If yes, list Event #	III Section	x	No	
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	outor a lobbyis	t spouse or	Agar	egate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of	· · ·			t child of a lob	byist?	Aggi	-	00.00	\$100.00
government the contract is with:		Executive Legislative	1	Yes X	No				
Last Name	First Name		MI		contribution:		Contributio	n ID #	Amount of
Villalobos	Ivan			Cash Money	y Order Credit/E	l Check Debit Card	27		Contribution
Residential Street Address		City		State	Zip Code		Date Received		
43 Claire Hill Rd		Burlington		CT	Zip Code)7/10/2009)	
Principal Occupation		Name of Employer		<u> </u>	Is this contribution asso	ciated with	a 🔽	Yes	
Firefighter		City of Hartford			fundraising event listed If yes, list Event #	in Section	J1?	No	
Is contributor a principal of a state contractor	or prospective	Yes X No	Is contrib	outor a lobbyis	t spouse or	1.			
state contractor?	or prospective	Yes X No		t child of a lob	-	Aggre	egate Contribu	tions 00.00	\$100.00
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative	<u>г</u>	res X	No		Ψı	00.00	\$100.00
Last Name	First Name		MI	Method of	contribution:		Contributio	on ID #	Amount of
Naboicheck	Henry			Cash	Personal		93		Contribution
		l				Debit Card			
Residential Street Address 4F Earls Ct		City Farmington		State CT	Zip Code		0ate Received)	
		Name of Employer		01	Is this contribution asso			1	
Principal Occupation		The Standard Mattress CO			fundraising event listed		J1? 💆	Yes	
					If yes, list Event #		Ŀ	No	
Is contributor a principal of a state contractor state contractor?	or prospective	Yes X No		utor a lobbyis	-	Aggre	egate Contribu	tions	
Is yes, indicate which branch or branches of government the contract is with:		Executive Legislative		t child of a lob Yes	-		\$1	00.00	\$100.00
Last Name	First Name		MI		contribution:		Contributio	n ID #	Amount of
Hodgkins	John			Cash Money	y Order X Credit/E	l Check Debit Card	94		Contribution
Residential Street Address		City		State	Zip Code	Г	Date Received		
60 Woodfield Xing		Glastonbury		СТ		c	7/14/2009)	
Principal Occupation		Name of Employer		•	Is this contribution asso	ciated with	a	Yes	
Mortgage Loan Specialist		CT Mortgage Services, Inc			fundraising event listed If yes, list Event #	in Section	J1?	No	
Is contributor a principal of a state contractor	or prospective	Yes X No		outor a lobbyis	-	Aggre	egate Contribu	tions	
state contractor? Is yes, indicate which branch or branches of		т. а. П. н.а.		t child of a lob Yes	-		\$1	00.00	\$100.00
government the contract is with:		Executive Legislative		les X	IN0				

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILING	G DUE DATE
Corey For Connecticut							Origin	al 10/13/2009
		B. Itemized Contribut	ions fron	Individu	ials			
Last Name Monts	First Name Shaunna		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	96	ion ID #	Amount of Contribution
Residential Street Address 91 Elm St # 223C		City Manchester		State CT	Zip Code	Date Received 07/15/200		
Principal Occupation Human Resources Officer		Name of Employer The MDC			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		utor a lobbyist child of a lob 'es	byist?	Aggregate Contrib	utions 100.00	\$100.00
Last Name Ogarro	First Name Earl		MI	Cash	contribution: Personal Cl y Order X Credit/Deb	95	ion ID #	Amount of Contribution
Residential Street Address 116 Spring Wood Ln		City Bloomfield		State CT	Zip Code	Date Received 07/15/200		
Principal Occupation Insurance Broker		Name of Employer S.H.Smith & Company			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		utor a lobbyist child of a lob res X	byist?	Aggregate Contrib	utions 100.00	\$100.00
Last Name Yanco	First Name Jeff		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	97	ion ID #	Amount of Contribution
Residential Street Address PO Box 235		City Manchester		State CT	Zip Code	Date Received 07/16/200		
Principal Occupation Self Employed		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	Executive	dependent	utor a lobbyist child of a lob 'es	byist?	Aggregate Contrib	utions 100.00	\$100.00
Last Name Neumann	First Name Guy		MI	Cash	contribution: Personal Cl y Order X Credit/Debi	98	ion ID #	Amount of Contribution
Residential Street Address 100 Grist Mill Rd		City Simsbury		State CT	Zip Code	Date Received 07/16/200		
Principal Occupation COO		Name of Employer Rex Insurance Services, 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:		Executive		utor a lobbyist child of a lob ⁷ es X	byist?	Aggregate Contrib	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILING	G DUE DATE
Corey For Connecticut							Origin	al 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ials			
Last Name Dzenyuy	First Name Christina		MI	Cash	contribution: Personal Ch / Order X Credit/Debi	99	ion ID #	Amount of Contribution
Residential Street Address 158 Colebrook St		City Hartford		State CT	Zip Code	Date Received 07/16/200		
Principal Occupation Consultant		Name of Employer The Hartford			Is this contribution associat fundraising event listed in a 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	Executive		utor a lobbyist child of a lob 'es	byist?	Aggregate Contrib	utions \$75.00	\$25.00
Last Name Dzenyuy	First Name Christina		MI	Cash	contribution: Personal Cl v Order X Credit/Debi	100	ion ID #	Amount of Contribution
Residential Street Address 158 Colebrook St		City Hartford		State CT	Zip Code	Date Received 07/16/200		
Principal Occupation Consultant	Name of Employer The Hartford	Is this contribution associated with fundraising event listed in Section J 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		utor a lobbyist child of a lob 7es X	byist?	Aggregate Contrib	utions \$75.00	\$25.00
Last Name Jointer	First Name Alicia		MI	Cash	contribution: Personal Cł / Order X Credit/Debi	104	ion ID #	Amount of Contribution
Residential Street Address 830 Chicopee St		City Chicopee		State MA	Zip Code	Date Received 07/20/200		
Principal Occupation Case Manager		Name of Employer New England Farm Workers'	Council		Is this contribution associat fundraising event listed in 5 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	Executive	dependent	utor a lobbyist child of a lob 'es X	byist?	Aggregate Contrib	utions \$60.00	\$25.00
Last Name Garrett	First Name Sara		MI	Cash	contribution: Personal Cl Order X Credit/Debi	105	ion ID #	Amount of Contribution
Residential Street Address 49 Vine St		City Hartford		State CT	Zip Code	Date Received 07/20/200		
Principal Occupation Sales Associate		Name of Employer The UPS Store			Is this contribution associat fundraising event listed in the 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:		Executive		utor a lobbyist child of a lob Yes X	byist?	Aggregate Contrib	utions \$70.00	\$25.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE								FILING	G DUE DATE
Corey For Connecticut								Origina	al 10/13/2009
		B. Itemized Contribution	ons from	Individu	ials				
Last Name	First Name		МІ	Method of	contribution:		Contributio	n ID #	
Airey-Wilson	Veronica			Cash Money	Personal Check 106			лі 1 <i>D #</i>	Amount of Contribution
Residential Street Address		City		State	Zip Code	Da	ate Received		
131 Ridgefield St		Hartford		СТ		07	7/20/2009)	
Principal Occupation insureance agent		Is this contribution associated with a Yes fundraising event listed in Section J1? If yes, list Event # No							
Is contributor a principal of a state contractor or prospective state contractor? Is yes, indicate which branch or branches of government the contract is with: Legislative							tions 575.00	\$75.00	
Last Name Herrington	First Name John		MI	Cash	contribution: Personal C Order X Credit/Deb		Contributio	on ID #	Amount of Contribution
Residential Street Address		City		State	Zip Code		ate Received		
36 Goose Nest		South Windsor		СТ			7/21/2009	,	
Principal Occupation Law Clerk		Name of Employer Connecticut Supreme Court			Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No		utor a lobbyist child of a lob es	byist?	Aggres	gate Contribu \$1	tions .00.00	\$100.00
Last Name Beverley	First Name Alex		MI	Cash	contribution: Personal C order X Credit/Deb		Contributio	on ID #	Amount of Contribution
Residential Street Address 94 Ashley St		City Hartford		State CT	Zip Code		ate Received 7/21/2009	9	
Principal Occupation Case Manager		Name of Employer My People Clinical		I	Is this contribution associa fundraising event listed in If yes, list Event #		12 L	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No		utor a lobbyist child of a lob es	byist?	Aggreg	gate Contribu \$	tions 60.00	\$25.00
Last Name Williams	First Name Donnell		MI	Cash	contribution: Personal C v Order X Credit/Deb		Contributio	on ID #	Amount of Contribution
Residential Street Address 2111 Jefferson Davis Hwy		City Arlington		State VA	Zip Code		ate Received)	
Principal Occupation Financial Advisor		Name of Employer ING			Is this contribution associa fundraising event listed in If yes, list Event #		1?	Yes No	
Is contributor a principal of a state contractor or prospective state contractor? Is yes, indicate which branch or branches of government the contract is with: Executive Legislative Legis								\$100.00	

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I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							F	FILING	DUE DATE
Corey For Connecticut							C	Origina	al 10/13/2009
		B. Itemized Contribution	ons from	Individu	als				
Last Name	First Name		мі	Method of	contribution:		Contribution I	ID #	Amount of
Williams	Colin			Cash Money	v Order X Credit/Deb		109		Amount of Contribution
Residential Street Address		City		State	Zip Code		ate Received		
649 Astor St		Norristown Name of Employer		PA			7/21/2009		
Principal Occupation Accountant		Is this contribution associated with a Yes fundraising event listed in Section J1? If yes, list Event # X No							
Is contributor a principal of a state contractor or prospective $Y_{es} \times N_{o}$ Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Aggregate Contributions tate contractor? Is yes, indicate which branch or branches of executive Legislative Legislative Yes $\times N_{o}$ Aggregate Contributions \$100.00\$								\$100.00	
Last Name Smart	First Name Noshakhe	re	MI	Cash	contribution: Personal C Order X Credit/Deb		Contribution I 111	ID #	Amount of Contribution
Residential Street Address 24 Magnolia St		City Hartford		State CT	Zip Code		ate Received 7/22/2009		
Principal Occupation Name of Employer Is this contribution associated with a fundraising event listed in Section J1? Y Human service Worker Positive Steps 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	Executive		utor a lobbyist child of a lob es X	byist?	Aggreg	gate Contribution \$90	ons 0.00	\$25.00
Last Name Brown	First Name Shauna		MI H	X Cash	contribution: Personal C Order Credit/Deb		Contribution I 60	ID #	Amount of Contribution
Residential Street Address 74 Hamilton Dr		^{City} Manchester		State CT	Zip Code		ate Received 7/25/2009		
Principal Occupation Educator		Name of Employer City of Hartford			Is this contribution associated fundraising event listed in If yes, list Event # 072				
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:		Executive		utor a lobbyist child of a lob es X	byist?	Aggreg	gate Contribution \$70	ons 0.00	\$20.00
Last Name Ward	First Name DeVaughr		MI L	X Cash	contribution: Personal C Order Credit/Det		Contribution I	ID #	Amount of Contribution
Residential Street Address 29 Linwood Dr		City Bloomfield		State CT	Zip Code		ate Received 7/25/2009		
Principal Occupation Server		Name of Employer P.F. Chang's China Bistro			Is this contribution associa fundraising event listed in If yes, list Event # 072				
Is contributor a principal of a state contractor o state contractor? Is yes, indicate which branch or branches of government the contract is with:	s contributor a principal of a state contractor or prospective $Yes \times No$ Is contributor a lobbyist, spouse, or dependent child of a lobbyist? \$\$ yes, indicate which branch or branches of $Percentian = Percentian $								

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILING	G DUE DATE
Corey For Connecticut							Origin	al 10/13/2009
		B. Itemized Contributi	ons fron	ı Individu	ials			
Last Name Garrett	First Name Sara		MI F	X Cash	contribution: Personal C / Order Credit/Det	79	ion ID #	Amount of Contribution
Residential Street Address 49 Vine St	•	City Hartford	•	State CT	Zip Code	Date Received		
Principal Occupation Sales Associate		Name of Employer The UPS Store			Is this contribution association fundraising event listed in If yes, list Event # 072		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No		utor a lobbyist child of a lob ⁷ es X	byist?	Aggregate Contrib	outions \$55.00	\$10.00
Last Name Blair	First Name Ray		MI	X Cash	contribution: Personal C Order Credit/Det	81	ion ID #	Amount of Contribution
Residential Street Address 207 Woodland Ave		City Bloomfield		State CT	Zip Code	Date Received 07/25/200		
Principal Occupation Wells Fargo		Name of Employer Wells Fargo		•	Is this contribution association fundraising event listed in If yes, list Event # 072	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		utor a lobbyist child of a lob ⁷ es X	byist?	Aggregate Contrib	outions \$60.00	\$20.00
Last Name Johnson	First Name Aaron		MI J	X Cash	contribution: Personal C v Order Credit/Det	64	ion ID #	Amount of Contribution
Residential Street Address 134 Old Chester Rd	-	^{City} Haddam		State CT	Zip Code	Date Received 07/25/200		
Principal Occupation Financial Advisors		Name of Employer J. Capital Advisors			Is this contribution association fundraising event listed in If yes, list Event # 072	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	Executive	dependent	utor a lobbyist child of a lob 'es	byist?	Aggregate Contrib	outions	\$10.00
Last Name Smart	First Name Noshakhe	re	MI C	X Cash	contribution: Personal C v Order Credit/Det	65	ion ID #	Amount of Contribution
Residential Street Address 24 Magnolia St		City Hartford		State CT	Zip Code	Date Received 07/25/200		
Principal Occupation Case Aid		Name of Employer Positive Steps Youth Service	s		Is this contribution association fundraising event listed in If yes, list Event # 072	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:		Executive		utor a lobbyist child of a lob Yes	byist?	Aggregate Contrib	outions \$85.00	\$20.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							FI	ILING	DUE DATE
Corey For Connecticut							O	Driginal	10/13/2009
		B. Itemized Contribution	ons from	Individu	ials		•		
Last Name	First Name		MI	Method of	contribution:	1	Contribution ID	D#	
Sailor	Jamil		D	X Cash	/ Order Personal C	Check	67	D #	Amount of Contribution
Residential Street Address		City		State	Zip Code		e Received		
76 Baltimore St		Hartford		СТ		07/	/25/2009		
Principal Occupation Recreation Specialist		Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # 07252009A No							
Is contributor a principal of a state contractor or prospective $Y_{es} \times N_{o}$ Is contributor a lobbyist, spouse, or dependent child of a lobbyist? Is yes, indicate which branch or branches of covernment the contract is with: Executive Legislative Yes $\times N_{o}$ Aggregate Contributions \$140.00									\$40.00
Last Name	First Name		MI		contribution:		Contribution ID	D #	Amount of
Edwards	Drew		J	X Cash Money	/ Order Personal C		73		Contribution
Residential Street Address		City		State	Zip Code		e Received		
41 Ferguson Rd		Manchester		СТ		07/	/25/2009		
Principal Occupation Loan Officer		Name of Employer Right Trac Financial Group			Is this contribution associ fundraising event listed in If yes, list Event # 07				
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 Legislative	dependent	utor a lobbyist child of a lob res	byist?	Aggrega	ate Contributions \$110.		\$20.00
Last Name Lyde	First Name Alisha		MI L	X Cash	contribution: Personal C / Order Credit/Del	Check	Contribution ID 83	D #	Amount of Contribution
Residential Street Address		City		State	Zip Code	Date	e Received		
28 Hutchinson St		New Britain		СТ		07/	/25/2009		
Principal Occupation Retail Management		Name of Employer Foot Beats			Is this contribution associ fundraising event listed in If yes, list Event # 07.	Section J1?			
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		utor a lobbyist child of a lob es X	byist?	Aggrega	ate Contributions \$80.		\$20.00
Last Name	First Name		MI		contribution:		Contribution ID	D #	Amount of
Morgado	Dale	r		Cash Money	/ Order X Credit/Del		114		Contribution
Residential Street Address 511 SE 5th Ave		City Fort Lauderdale		State FL	Zip Code		e Received /28/2009		
Principal Occupation Lawyer		Name of Employer Gunster Yoakley & Stewart			Is this contribution associ fundraising event listed in If yes, list Event #		? Ye		
Is contributor a principal of a state contractor or prospective Legislative Le									\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	DUE DATE
Corey For Connecticut									Origina	al 10/13/2009
		B. Ite	mized Contributi	ons from	ı Individu	ials				
Last Name Corrado	First Name Richard			MI F	Cash	contribution: X Personal of y Order Credit/De		Contribution 92	ID #	Amount of Contribution
Residential Street Address 93 Homestead Dr		^{City} South Wir	ndsor		State CT	Zip Code		ate Received 7/31/2009		
Principal Occupation Real Estate Broker		Name of Em Century 2	ployer 21 - Alaimo & Corrad	ob		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	Executive	Yes X No	dependent	utor a lobbyis child of a lob 'es	byist?	Aggre	gate Contributio \$10	ons 10.00	\$100.00
Last Name Garrett	First Name Sara			MI	Cash	contribution: Personal of vorder X Credit/De		Contribution 116	ID #	Amount of Contribution
Residential Street Address 49 Vine St		^{City} Hartford			State CT	Zip Code		ate Received 8/14/2009		
Principal Occupation Name of Employer Sales Associate The UPS Store						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	Executive	Yes X No	dependent	utor a lobbyis child of a lob 'es X	byist?	Aggre	gate Contributio \$5	ons 55.00	\$10.00
Last Name Ricketts	First Name Robert			MI	Cash	contribution: Personal 0 y Order X Credit/De		Contribution 267	ID #	Amount of Contribution
Residential Street Address 284 Beechwood Rd	-	^{City} West Hart	ford	-	State CT	Zip Code		ate Received 8/18/2009		
Principal Occupation Attorney		Name of Em Law Offic	^{ployer} es of Robert Rickett	S		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	Executive	Yes X No		utor a lobbyis child of a lob 'es	byist?	Aggre	gate Contributio \$10	ons 00.00	\$100.00
Last Name Marjani	First Name Kurosh			MI L	Cash	contribution: X Personal (y Order Credit/De		Contribution 120	ID #	Amount of Contribution
Residential Street Address 500 Bedford St # 407		City Stamford			State CT	Zip Code	0	ate Received 8/20/2009		
Principal Occupation Attorney		Name of Em Wofsey, F	Rosen, Kweskin & Ki	uriansky		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	Executive	Yes X No		utor a lobbyis child of a lob 'es	byist?	Aggre	gate Contributio \$10	ons 10.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)								
NAME OF COMMITTEE							FILINO	G DUE DATE
Corey For Connecticut							Origin	al 10/13/2009
		B. Itemized Cont	tributions fr	om Individu	ials		•	
Last Name	First Name		МІ	Method of	contribution:	Gartai	oution ID #	1
Corrado	Ellen			Cash	V Order Credit/Deb	Theck 130	button ID #	Amount of Contribution
Residential Street Address		City		State	Zip Code	Date Recei	ved	
93 Homestead Dr		South Windsor		СТ		08/21/2	009	ļ
Principal Occupation Legal Secretary		Name of Employer Attorney Arvantely			Is this contribution associa fundraising event listed in If yes, list Event # <u>082</u>		X Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive Legislative	depend	tributor a lobbyist dent child of a lob Yes	byist?	Aggregate Cont	tributions \$150.00	\$50.00
Last Name Edwards	First Name Drew		MI	X Cash	contribution: Personal C / Order Credit/Deb	heck 132	oution ID #	Amount of Contribution
Residential Street Address 41 Ferguson Rd		^{City} Manchester		State CT	Zip Code	Date Recei 08/21/2		
Principal Occupation Name of Employer Is this contribution associated with a fundraising event listed in Section J1? X Yes Loan Officer Right Trac Financial Group If yes, list Event # <u>08212009A</u> No								
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive Legislative	depend	ntributor a lobbyis dent child of a lob Yes X	byist?	Aggregate Cont	tributions \$140.00	\$50.00
Last Name Baez	First Name Kerry		MI A	X Cash	contribution: Personal C Order Credit/Deb	heck 133	oution ID #	Amount of Contribution
Residential Street Address 550 Franklin Ave		City Hartford		State CT	Zip Code	Date Recei 08/21/2		
Principal Occupation Housewife		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event # <u>082</u>		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	Executive	depend	ntributor a lobbyis dent child of a lob Yes X	byist?	Aggregate Cont	tributions \$65.00	\$20.00
Last Name Barnes	First Name Christoph	er	MI A	X Cash	contribution: Personal C Order Credit/Deb	Theck 134	oution ID #	Amount of Contribution
Residential Street Address 67 Ashford St		City Hartford		State CT	Zip Code	Date Recei 08/21/2		
Principal Occupation Househusband		Name of Employer None Reported		• •	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	Executive Legislative	depend	ntributor a lobbyis dent child of a lob Yes X	byist?	Aggregate Cont	tributions \$100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE								FILING	G DUE DATE
Corey For Connecticut								Origina	al 10/13/2009
		B. Itemized Contribu	tions fron	ı Individu	ials		•		
Last Name	First Name		MI	Method of	contribution:		Contribution	1 ID #	Amount of
Sailor	Jamil		D	X Cash Money	y Order Personal C Credit/Deb		125		Contribution
Residential Street Address 76 Baltimore St		City Hartford		State CT	Zip Code		ate Received 8/21/2009		
Principal Occupation			Is this contribution associa	ated with a	a 🔽	Vac			
Recreation Specialist		Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # <u>08212009A</u> No							
Is contributor a principal of a state contractor or prospective state contractor? Is yes, indicate which branch or branches of government the contract is with:							-	ions 40.00	\$40.00
Last Name Brinson	First Name Brenda		MI	Cash	contribution: Personal C y Order X Credit/Deb		Contribution 280	n ID #	Amount of Contribution
Residential Street Address 9035 Paddle Oak Rd		City Charlotte		State NC	Zip Code		ate Received 9/04/2009		
Principal Occupation Name of Employer Insurance Is this contribution associated with a fundraising event listed in Section J1? If yes, list Event # Image: Note that the 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	dependen	outor a lobbyis t child of a lob Yes X	byist?	Aggreg	gate Contributi \$15	ions 50.00	\$50.00
Last Name Smart	First Name Noshakhe	ere	MI C	X Cash	contribution: Personal C y Order Credit/Deb		Contribution 155	n ID #	Amount of Contribution
Residential Street Address 24 Magnolia St		City Hartford		State CT	Zip Code		ate Received 9/18/2009		
Principal Occupation Case Aid		Name of Employer Positive Steps Youth Servio	ces		Is this contribution associa fundraising event listed in If yes, list Event # 091			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive		outor a lobbyis t child of a lob í es	byist?	Aggreg	gate Contributi \$8	ions 35.00	\$20.00
Last Name Blair	First Name Ray		MI	X Cash	contribution: Personal C y Order Credit/Deb		Contribution 174	n ID #	Amount of Contribution
Residential Street Address 207 Woodland Ave		City Bloomfield		State CT	Zip Code		ate Received 9/18/2009		
Principal Occupation Wells Fargo		Name of Employer Wells Fargo		ب	Is this contribution associa fundraising event listed in If yes, list Event # 091	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		outor a lobbyis t child of a lob Yes X	byist?	Aggres	gate Contributi \$6	ions 50.00	\$20.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILINC	G DUE DATE
Corey For Connecticut									Origin	al 10/13/2009
		B. It	emized Contribution	ons from	Individu	ials				
Last Name	First Name			MI	Method of	contribution:		Contributio	ID #	
Williams	Khambrel				X Cash	Personal C Order Credit/De		156	511 ID #	Amount of Contribution
Residential Street Address		City			State	Zip Code	Da	ate Received		
172 Ford Rd		Windsor			СТ		09	9/18/2009	9	
Principal Occupation Self		Name of Er Self	nployer			Is this contribution associ fundraising event listed in If yes, list Event # 09	n Section J		Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyist child of a lob res	byist?	Aggre	gate Contribu	itions \$60.00	\$60.00
Last Name Johnson	First Name Tiffany	i		MI	X Cash	contribution: Personal C Order Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 36 Purdue Ln		City East Harl	ford		State CT	Zip Code		ate Received 9/18/2009	9	
Principal Occupation Accountant		Name of Er KPMG	nployer			Is this contribution associ fundraising event listed ir If yes, list Event # <u>09</u>			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No		utor a lobbyist child of a lob 'es	byist?	Aggre	gate Contribu \$1	itions	\$100.00
Last Name Lyde	First Name Alisha	-		MI	X Cash	contribution: Personal C Order Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 28 Hutchinson St		City New Brita	ain		State CT	Zip Code		ate Received 9/18/2009	9	
Principal Occupation Retail Management		Name of Er Stride Ri				Is this contribution associ fundraising event listed ir If yes, list Event # <u>09</u>			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyist child of a lob 'es	byist?	Aggree	gate Contribu	itions \$80.00	\$20.00
Last Name Marshall	First Name Lincoln			MI D	X Cash	contribution: Personal C Order Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 22 Matthew Ln		^{City} Windsor			State CT	Zip Code		ate Received 9/18/2009	Э	
Principal Occupation Tractor Trailer Owner		Name of Er LLM Ente	nployer erprise, LLC			Is this contribution associ fundraising event listed ir If yes, list Event # 09			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No		utor a lobbyist child of a lob 'es	byist?	Aggres	gate Contribu \$1	utions	\$100.00

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I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE								FILING	DUE DATE
Corey For Connecticut								Origina	al 10/13/2009
		B. Itemized Contribut	ions fron	ı Individu	ials				
Last Name	First Name		MI	Method of	contribution:		Contribution	n ID #	Amount of
Archer	June	1		X Cash Money	y Order Credit/Deb		238		Contribution
Residential Street Address		City		State	Zip Code		ate Received		
47 Philip Henry Cir		Windsor		СТ		09	9/18/2009		-
Principal Occupation Executive		Name of Employer Eleven28 Entertainment Gro	oup 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	Executive Legislative	dependent	utor a lobbyis child of a lob Yes	byist?	Aggreg	gate Contributio \$10	ions)0.00	\$100.00
Last Name Ward	First Name DeVaughr	n	MI L	X Cash	contribution: Personal C y Order Credit/Deb		Contribution 154	n ID #	Amount of Contribution
Residential Street Address 29 Linwood Dr		City Bloomfield		State CT	Zip Code		ate Received 9/18/2009		
Principal Occupation Server		Name of Employer P.F. Chang's China Bistro			Is this contribution associa fundraising event listed in If yes, list Event # 091			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive		utor a lobbyis child of a lob ′es	byist?	Aggreg	gate Contributio \$10	ions 00.00	\$40.00
Last Name Brown	First Name Shauna		MI H	X Cash	contribution: Personal C y Order Credit/Deb		Contribution 159	n ID #	Amount of Contribution
Residential Street Address 74 Hamilton Dr		^{City} Manchester		State CT	Zip Code		ate Received 9/18/2009		
Principal Occupation Educator		Name of Employer City of Hartford			Is this contribution associa fundraising event listed in If yes, list Event # 091			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive Legislative	dependent	utor a lobbyis child of a lob /es X	byist?	Aggreg	gate Contributio \$7	ions 70.00	\$20.00
Last Name Gagliardi	First Name Darren		MI J	Cash	contribution: X Personal C y Order Credit/Deb		Contribution 172	n ID #	Amount of Contribution
Residential Street Address 43 Northwood Rd		City Newington		State CT	Zip Code		ate Received 9/18/2009		
Principal Occupation Attorney		Name of Employer Gagliardi Law Group LLC		•	Is this contribution associa fundraising event listed in If yes, list Event # 091			Yes No	
Is contributor 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		utor a lobbyis child of a lob Yes X	byist?	Aggreg	gate Contributio \$15	ions 50.00	\$50.00

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I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILINC	G DUE DATE
Corey For Connecticut									Origina	al 10/13/2009
		B. Item	ized Contributio	ons from	Individu	ials				
Last Name	First Name			МІ	Method of	contribution:		Contributio	n ID #	
Frantz	L.			s	X Cash	y Order Personal Credit/De		137	ni 1D #	Amount of Contribution
Residential Street Address 123 Meadow Rd		^{City} Riverside			State CT	Zip Code		ate Received 9/20/2009)	
Principal Occupation Banker		Name of Emplo HCo, Inc.	oyer			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	dependent	utor a lobbyist child of a lob res	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
Last Name Thurlow	First Name Christoph	er		MI	Cash	contribution: x Personal G y Order Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 198 Shore Rd		City Old Greenwi	ich		State CT	Zip Code		ate Received 9/20/2009)	
Principal Occupation Retired		Name of Emplo Retired	oyer			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	dependent	utor a lobbyist child of a lob res	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
Last Name Tranfo	First Name Joseph			MI A	Cash	contribution: X Personal G y Order Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 45 Quail Rd		^{City} Greenwich			State CT	Zip Code		ate Received 9/20/2009)	
Principal Occupation Real Estate		Name of Emplo Benedict Ca	•			Is this contribution associ fundraising event listed in If yes, list Event #		12 L	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyist child of a lob res	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00
Last Name Prince	First Name Lolly	-		MI H	Cash	contribution: X Personal O y Order Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 42 Woodside Dr		^{City} Greenwich			State CT	Zip Code		ate Received 9/20/2009)	
Principal Occupation Retired		Name of Emplo Retired	oyer			Is this contribution associ fundraising event listed in If yes, list Event #		12 L	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyist child of a lob 'es	byist?	Aggre	gate Contribu \$1	tions .00.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILINC	G DUE DATE
Corey For Connecticut									Origin	al 10/13/2009
		B. It	emized Contributio	ons from	ı Individu	ials				
Last Name	First Name			МІ	Method of	contribution:		Contributio	on ID #	Amount of
Stolarz	Stefan			J	Cash Money	y Order		208		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
173 Oakwood Ave		West Har	tford		СТ			9/22/2009	9	ł
Principal Occupation Attorney		Name of Er Self	nployer			Is this contribution associ fundraising event listed in If yes, list Event #		12 L	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob ⁄es X	byist?	Aggre	gate Contribu \$1	utions	\$100.00
Last Name Levy	First Name Leora			MI	Cash	contribution: Personal Q y Order X Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 59 Pecksland Rd		City Greenwic	h		State CT	Zip Code		ate Received 9/22/2009	9	
Principal Occupation homemaker		Name of Er my husb	nployer and, sons and dogs			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	dependent	utor a lobbyis child of a lob ⁷ es	byist?	Aggre	gate Contribu \$1	utions	\$100.00
Last Name Levy	First Name Steven			MI	Cash	contribution: Personal G y Order X Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 59 Pecksland Rd		City Greenwic	h		State CT	Zip Code		ate Received 9/22/2009	Э	
Principal Occupation real estate		Name of Er kamber			•	Is this contribution associ fundraising event listed in If yes, list Event #		12 L	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob /es X	byist?	Aggre	gate Contribu \$3	itions 300.00	\$100.00
Last Name Henry	First Name Kevin	-		MI T	X Cash	contribution: Personal Q y Order Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 1429 Park St		City Hartford			State CT	Zip Code		ate Received 9/24/2009	Э	
Principal Occupation Attorney		Name of Er Robinsor				Is this contribution associ 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	Executive	Yes X No		utor a lobbyis child of a lob Yes X	byist?	Aggre	gate Contribu \$	itions \$60.00	\$60.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Corey For Connecticut									Origin	al 10/13/2009
		B. Ite	emized Contributi	ons from	ı Individu	ials				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	
Kongpinda	Jean	-		М	X Cash	/ Order Personal Credit/Del		237		Amount of Contribution
Residential Street Address		City			State	Zip Code		ate Received		
967 Asylum Ave # 3F		Hartford			СТ			9/25/2009	9	
Principal Occupation IS Specialist		Name of En Travelers				Is this contribution associ fundraising event listed in If yes, list Event # <u>09</u>			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob /es X	byist?	Aggre	gate Contribu	utions \$60.00	\$60.00
Last Name Rodz	First Name Jessenia	1		MI	X Cash	contribution: Personal C Order Credit/Del		Contributio	on ID #	Amount of Contribution
Residential Street Address 49 Linnmoore St		City Hartford			State CT	Zip Code		ate Received 9/25/2009		
Principal Occupation Self		Name of En Self	nployer			Is this contribution associ fundraising event listed ir If yes, list Event # <u>09</u>			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob 'es X	byist?	Aggre	gate Contribu	utions \$60.00	\$60.00
Last Name Ismail	First Name Gulaid			MI S	X Cash	contribution: Personal C v Order Credit/Del		Contributio	on ID #	Amount of Contribution
Residential Street Address 95 Manchester St		City Hartford			State CT	Zip Code		ate Received 9/25/2009		
Principal Occupation Military		Name of En Military	nployer			Is this contribution associ fundraising event listed ir If yes, list Event # <u>09</u>			Yes No	*
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyis child of a lob /es	byist?	Aggre	gate Contribu	utions \$60.00	\$60.00
Last Name McCray	First Name Gina			MI R	X Cash	contribution: Personal C v Order Credit/Del		Contributio	on ID #	Amount of Contribution
Residential Street Address 50 Scotland Rd		City East Hart	ford		State CT	Zip Code		ate Received 9/25/2009		
Principal Occupation Site Director		Name of En MELC	nployer			Is this contribution associ fundraising event listed ir If yes, list Event # 09			Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No		utor a lobbyis child of a lob Yes X	byist?	Aggre	gate Contribu \$1	utions 100.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE							1	FILING	DUE DATE
Corey For Connecticut								Origina	al 10/13/2009
		B. Itemized Contribution	ons from	ı Individu	ials				
Last Name	First Name		MI	Method of	contribution:	1	Contribution	ID.#	
Brown	Jason			X Cash	Personal C Order Credit/Deb		243	1D #	Amount of Contribution
Residential Street Address		City		State	Zip Code		te Received		
16 Pembroke St		Hartford		СТ		09	9/25/2009		
Principal Occupation Substitute Teacher		Name of Employer Kelly Educational			Is this contribution associa fundraising event listed in If yes, list Event # 092				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	dependent	utor a lobbyis child of a lob Yes X	byist?	Aggreg	ate Contributic \$6	^{ons} 50.00	\$60.00
Last Name Barnes	First Name Roland	1	MI R	X Cash	contribution: Personal C Order Credit/Deb		Contribution 247	ID #	Amount of Contribution
Residential Street Address 42 Filley St		City Bloomfield		State CT	Zip Code		te Received 9/25/2009		
Principal Occupation Engineer		Name of Employer Pratt & Whitney			Is this contribution associa fundraising event listed in If yes, list Event # 092				
Is contributor a principal 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 ⁷ es X	byist?	Aggreg	gate Contributio \$10	ons)0.00	\$100.00
Last Name Williams	First Name Barry		MI	X Cash	contribution: Personal C v Order Credit/Deb		Contribution 248	ID #	Amount of Contribution
Residential Street Address 217 Oak St		City East Hartford		State CT	Zip Code		te Received 9/25/2009		
Principal Occupation Medical Assistant		Name of Employer UConn Health Center		•	Is this contribution associa fundraising event listed in If yes, list Event # 092				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	dependent	utor a lobbyis child of a lob ⁷ es	byist?	Aggreg	ate Contributic \$8	ons 30.00	\$80.00
Last Name Watson	First Name Clarence		MI T	X Cash	contribution: Personal C v Order Credit/Deb		Contribution 249	ID #	Amount of Contribution
Residential Street Address 22 Prospect St		^{City} Manchester		State CT	Zip Code		ite Received 9/25/2009		
Principal Occupation Machinist CNC		Name of Employer SMS Machine		-	Is this contribution associa fundraising event listed in If yes, list Event # 092				
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive		utor a lobbyis child of a lob Yes X	byist?	Aggreg	gate Contributio \$10	ons)0.00	\$100.00

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE								FILING	DUE DATE
Corey For Connecticut								Origina	al 10/13/2009
		B. Itemized Contribution	ons from	Individu	ials				
Last Name	First Name		MI	Mathad of	contribution:				
Rodriguez	Vanessa		1VII	X Cash	Personal C Order Credit/Deb		Contribution 244	i ID #	Amount of Contribution
Residential Street Address		City		State	Zip Code		ate Received		
597 Broad St		Hartford		СТ			9/26/2009		
Principal Occupation Self		Name of Employer N/A			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Yes X No	dependent	utor a lobbyis child of a lob es X	byist?	Aggreg	gate Contributio \$6	ons 50.00	\$60.00
Last Name Corrado	First Name Ellen		MI D	Cash	contribution: X Personal C / Order Credit/Deb		Contribution 210	ID#	Amount of Contribution
Residential Street Address 93 Homestead Dr		City South Windsor		State CT	Zip Code		ate Received 9/26/2009		
Principal Occupation Legal Secretary		Name of Employer Thomas Arvantely, Esq.			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	Executive Legislative	dependent	utor a lobbyis child of a lob es	byist?	Aggreg	gate Contributio \$15	ons 50.00	\$50.00
Last Name Edwards	First Name Drew		MI J	X Cash	contribution: Personal C v Order Credit/Deb		Contribution 219	ID #	Amount of Contribution
Residential Street Address 41 Ferguson Rd		City Manchester		State CT	Zip Code		ate Received 9/26/2009		
Principal Occupation Loan Officer		Name of Employer Right Trac Financial Group		I	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	Executive Legislative		utor a lobbyis child of a lob es	byist?	Aggreg	gate Contributio \$11	ons 10.00	\$20.00
Last Name Baez	First Name Kerry		MI A	X Cash	contribution: Personal C v Order Credit/Deb		Contribution 223	ID#	Amount of Contribution
Residential Street Address 550 Franklin Ave		City Hartford		State CT	Zip Code		ate Received 9/26/2009		
Principal Occupation Housewife		Name of Employer Self			Is this contribution associa fundraising event listed in If yes, list Event #			Yes No	
Is contributor a principal of a state contractor of state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive		utor a lobbyis child of a lob res X	byist?	Aggreg	gate Contributio \$7	ons 70.00	\$25.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE									FILING	G DUE DATE
Corey For Connecticut									Origin	al 10/13/2009
		B. Ite	emized Contributi	ons from	ı Individu	ials				
Last Name	First Name			MI	Method of	contribution:		Contributio	on ID #	Amount of
Webber	David			W	Cash Money	y Order Credit/De		205		Contribution
Residential Street Address		City			State	Zip Code		ate Received		
4 Tods Drift Way		Old Greer	IWICh		СТ			9/27/2009	, 	
Principal Occupation Owner		Name of Em D.M. Sys				Is this contribution associ fundraising event listed in If yes, list Event #		12 L	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Yes X No	dependent	utor a lobbyist child of a lob ⁷ es X	byist?	Aggre	gate Contribu \$1	tions	\$100.00
Last Name Staples	First Name Mary	I		MI A	Cash	contribution: X Personal C y Order Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 4 Tods Drift Way		City Old Greer	nwich		State CT	Zip Code		ate Received 9/27/2009	9	
Principal Occupation Retired		Name of Em None Rep				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	dependent	utor a lobbyist child of a lob 'es X	byist?	Aggre	gate Contribu \$1	ttions	\$100.00
Last Name Closs	First Name TaVarr			MI M	X Cash	contribution: Personal G y Order Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 231 Woodland Ave		City Bloomfield	d		State CT	Zip Code		ate Received 9/27/2009	Ð	
Principal Occupation Social Worker		Name of Em DCF	ıployer			Is this contribution associ fundraising event listed in If yes, list Event #		12 L	Yes No	
Is contributor a principal of a state contractor state contractor? Is yes, indicate which branch or branches of government the contract is with:	or prospective	Executive	Legislative		utor a lobbyist child of a lob /es	byist?	Aggre	gate Contribu \$1	utions	\$100.00
Last Name Brinson	First Name Brenda			MI	Cash	contribution: Personal Q y Order X Credit/De		Contributio	on ID #	Amount of Contribution
Residential Street Address 9035 Paddle Oak Rd		^{City} Charlotte			State NC	Zip Code		ate Received 9/27/2009	Э	
Principal Occupation Insurance		Name of Em Hartford	ployer Life Insurance Co			Is this contribution associ 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	Executive	Yes X No		utor a lobbyist child of a lob Yes	byist?	Aggre	gate Contribu \$1	ttions	\$50.00

I. MONETARY RECEIPTS (Section A-I) FILING DUE DATE NAME OF COMMITTEE Corey For Connecticut Original 10/13/2009 **B.** Itemized Contributions from Individuals First Name MI Method of contribution Last Name Contribution ID # Amount of Personal Check Cash Levy Steven Contribution 275 Money Order x Credit/Debit Card Date Received Residential Street Address City Zip Code State 09/29/2009 59 Pecksland Rd Greenwich СТ Is this contribution associated with a Principal Occupation Name of Employer Yes fundraising event listed in Section J1? kamber mgt. Ilc real estate X No If yes, list Event # X No Yes Is contributor a principal of a state contractor or prospective Is contributor a lobbyist, spouse, or Aggregate Contributions state contractor? dependent child of a lobbyist? \$300.00 \$100.00 Is yes, indicate which branch or branches of Yes Executive Legislative X No government the contract is with: **Total of Section B** \$4,740.00 TOTAL OF ALL CONTRIBUTIONS FROM INDIVIDUALS (Sections A & B) (Total on Line 14 of Summary Page) \$8,297.00

I. MONETARY RECEIPTS (Section A-I)										
NAME OF COMMITTEE							FILING	DUE DATE		
Corey For Connecticut							Original	10/13/2009		
C1. Contributions from Other Committees										
Name of Committee					Name of Treasurer					
Address			Is this contribution a fundraising event			Yes If yes, list Event	#	Amount of Contribution		
City	State	Zip	Code	Date R	eceived	Aggregate Contributions				
Total of Section C1										

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTEE				FILIN	IG DUE DATE				
Corey For Connecticut Origin									
C2. Reimbursements or Payments from other Committees									
Name of Committee			Name of Treasurer						
Address			Date Received		Amount of Receipt				
		i							
City	State	Zip Code	Reimbursement for shared expense						
			Payment for goods and services						
Total of Section C2									

	I. MONETARY RECEIPTS (Sectio	n A-K)			_			
NAME OF COMMITTEE					FILING	DUE DATE		
Corey For Connecticut					Origina	1 10/13/2009		
	D. Loans Received this Period							
Name of Lender				Source of Louin	Is there a cosigner or Guarantor of	Amount Received		
Street Address	City	State	Zip Code	Candidate			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				F	ILING DUE DATE					
Corey For Connecticut				C	Driginal 10/13/2009					
E. Personal Funds of the Candidate Received this Period										
Date Received	Amount	Method of Payment Cash	Personal Chee	ık Cı	edit/Debit Card					
Total of Section E										

I. MONETARY RECEIPTS (Section A-I)									
NAME OF COMMITTE	FILING DUE DATE								
Corey For Connecticu	Original 10/13/2009								
	F. Anonymous Contributions								
Date Received	\$ 1 bills \$ 5 bills \$ 10 bill coins				Amount				

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

I. MONETARY RECEIPTS (Section A-K)									
NAME OF COMMITTEE FILING DUE DA									
Corey For Connecticut	Original 10/13/2009								
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								
	н								

I. MONETARY RECEIPTS (Section A-K)								
NAME OF COMMITTEE								
Corey For Connecticut				Origi	inal 10/13/2009			
I. Miscellaneous Monetary Receipts not Considered Contributions								
Name Date of Transaction					Amount Received			
Street Address	City	State	Zip Code					
Description								
Total of Section I								

	II. FUNDRAISIN	G EVENT ACTIVITY						
NAME OF					FILING DUE	DATE		
COMMITTEE Corey For Connect	icut				Original 10/13	8/2009		
J1. Fundraising Event Information								
Fundraising Event #	Description	Location: Street Address		City	State	Zip Code		
Date of Fundraiser Letter 07/25/2009 A	BBQ Event	600 Cottage Grove Rd		Bloomfield	СТ			
Was this fundraising event h	• osted at a personal residence?		Yes	x No	·			
Did this fundraiser include ite items donated by an individu	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No				
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No				
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address		City	State	Zip Code		
08/21/2009 A	Home Fundraiser	134 Old Chester Rd		Haddam	СТ			
Was this fundraising event he	osted at a personal residence?		X Yes	No				
Did this fundraiser include ite items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No				
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No				
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address		City	State	Zip Code		
09/18/2009 A	Home Fundraiser	64 Arrowwood Ln		Bloomfield	СТ			
Was this fundraising event he	osted at a personal residence?		X Yes	No				
Did this fundraiser include ite items donated by an individu	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No				
Was this fundraiser a tag sale	e, auction, or other sale of donated items?		Yes	X No				
Fundraising Event # Date of Fundraiser Letter	Description	Location: Street Address		City	State	Zip Code		
09/25/2009 A	Party Event	1429 Park St		Hartford	СТ			
Was this fundraising event he	osted at a personal residence?		Yes	x No				
Did this fundraiser include ita items donated by an individua	ems donated by a business entity of up to \$100 or al of up to \$50?		Yes	X No				
Was this fundraiser a tag sale	, auction, or other sale of donated items?		Yes	X No				

II. FUNDRAISING EVENT ACTIVITY								
NAME OF COMMITTEE							FILIN	G DUE DATE
Corey For Connecticut							Origir	nal 10/13/2009
J2. Proceeds from Tag Sale, Auction, or Other Sale of Donated Items								
Name of the Purchaser Last Name (Individuals ONLY)	First Name	МІ	MI Method of payment: Cash Personal Check Credit/Debit Card					Aggregate Amount of Purchases
Residential Street Address	City	State	,	Zip Code	Date Received	Event #		
Items Purchased					1			
Total of Section J2								

II. FUNDRAISING EVENT ACTIVITY								
NAME OF COMMITTEE							FILING	DUE DATE
Corey For Connecticut Orig								al 10/13/2009
J3. In-Kind Donations Not Considered Contributions								
Name of the Donor					Donation G		ess Entity	Fair Market Value of Donation
Street Address	City	State Zip C			Code Aggregate val for this ever			
Description of Donation		Date	Receive	d	Event #			
Total of Section J3								

III. NONMONETARY RECEIPTS								
NAME OF COMMITTEE							FILING	DUE DATE
Corey For Connecticut							Original	I 10/13/2009
K. In-Kind Contributions								
Name						Date Receive	ed	Fair Market Value of this Contribution
Street Address		City	City State Zip Code					
Type of Contributor: Individual Committee	Is Contributor a lobbyist, spouse, or dependent child of a lobbyist?	Yes No	s contractor?	If yes, indicate which branch or branches of				
Is this contribution associated with a fund listed in Section J1? If yes, list Event#	raising event Yes	I	Description of In-Kind Contribution			Aggregate contr	ibutions	
Total of Section K								

III. Non Monetary Receipts								
NAME OF COMMITTEE	FILING DUE DATE							
Corey For Connecticut							Original 10/13/2009	
L. Refundable Deposit to Telephone Company								
Last Name (Individuals Only)	First Name	First Name				Date Received	Amount of Deposit	
Street Address	City		State	Zip Code				
Name of Telephone company								
reet Address City				State	Zip Code			
	L							

III. NONMONETARY RECEIPTS									
NAME OF COMMITTEE	I	FILING DUE DATE							
Corey For Connecticut						(Driginal 10/13/2009		
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 N	otice Receiv	ed	Fair Market Value of Donation		
City	State	Zip Code Aggregate Donations							
Description of Donation	Purpose of Expenditure A B C D E								
Total of Section M									

IV. EXPENDITURES								
NAME OF COMMITTEE						FILI	NG DUE DATE	
Corey For Connecticut						Origi	nal 10/13/2009	
N. Expenses Paid By Committee								
Name of Payee No Vet Left Behind, Inc.	1		-	Date of Payment 07/08/2009	Method of Pay	ment	Amount	
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1002</u>			
59 Elizabeth St # 204A	Derby	СТ		ATT *	Debit Car	rd		
Description Admission to No Vet Left Behind, Inc., Fur	ndraiser on 07/18/2009				Event #			
which reimbursement is sought?								
X No					1		\$100.00	
Name of Payee				Date of Payment	Method of Pay	ment	Amount	
Richard Twilley				07/10/2009	X Check #			
Street Address	City	State	Zip Code	Purpose of Expenditure	1003			
221 Trumbull St	Hartford	ст		RCW	Debit Car	rd		
Description			•		Event #			
Reimbursement for postage, printing and	copying							
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	lame		Office Sought				
Yes X No							\$57.86	
Name of Payee				Date of Payment	Method of Pay	ment	Amount	
Technivision LLC				07/22/2009	X Check #			
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1004</u>			
112 New Rd	Tolland	ст		WEB	Debit Car	rd		
Description Logo and web layout mock-ups; logo creation Event #								
Is this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sought which reimbursement is sought?								
X No							\$500.00	

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Corey For Connecticut						Original 10/13/2009	
	N. Expenses Paid By Commi	ttee				•	
Name of Payee Corey Brinson				Date of Payment 07/23/2009	Method of Pays	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	1005		
8E Westview Dr	Bloomfield	СТ		RCW	Debit Car	rd	
Description E Rental of Room at The 600 Apartments						A	
Is this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sought which reimbursement is sought?							\$150.00
X No				1	1		\$150.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Corey Brinson				07/28/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1006</u>		
8E Westview Dr	Bloomfield	ст		RCW	Debit Car	rd	
Description		•	•	•	Event #		
Printing of Contributor Certification Forms							
Is this expenditure coordinated with another candidate fo which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought			•
X No							\$14.31
Name of Payee				Date of Payment	Method of Pays	ment	Amount
Corey Brinson				07/28/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1007</u>		
8E Westview Dr	Bloomfield	СТ		RCW	Debit Car	rd	
Description Supplies for 07/25/2009 Fundraiser			•		Event # 07252009A	A	
Is this expenditure coordinated with another candidate fo which reimbursement is sought? Yes X No	r Other Candidate(s) N	lame		Office Sought			\$354.44

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Corey For Connecticut						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee Sounds Good Entertainment				Date of Payment 07/29/2009	Method of Pays	ment	Amount
Street Address 16 Fiske St	City Waterbury	State CT	Zip Code	Purpose of Expenditure	<u>1008</u> Debit Car	ď	
Description Entertainment for 07/25/2009 Fundraiser	waterbury	<u> </u>	<u> </u>		Event # 07252009A	N.	
Is this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sought which reimbursement is sought? Yes No							\$200.00
Name of Payee				Date of Payment	Method of Pays	ment	Amount
TransFirst		-		07/31/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
12120 Shamrock Plz	Omaha	NE		BNK	X Debit Car	ď	
Description Credit Card Payment Services Installation	and Monthly Fee				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	r Other Candidate(s) N	lame		Office Sought	•		
X No							\$251.97
Name of Payee				Date of Payment	Method of Pays	ment	Amount
Star Capital LLC		_		07/31/2009	X Check #		
Street Address	City	State CT	Zip Code	Purpose of Expenditure	1009 Debit Car	ď	
39 Barry Cir Description	Bloomfield	Сі		CN3L1	Event #	-	
Administrative Services Provided to Comm	ittee and Candidate				Event "		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes X No	r Other Candidate(s) N	Jame		Office Sought			\$240.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Corey For Connecticut						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee					
Name of Payee People's Bank				Date of Payment 07/31/2009	Method of Pay	ment	Amount
Street Address 850 Main St	City Bridgeport	State CT	Zip Code	Purpose of Expenditure BNK	X Debit Car	rd	
Description Service Charge		-			Event #		
Is this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sought which reimbursement is sought?							
X No Name of Payee				Date of Payment	Method of Pay	ment	Amount
Technivision LLC	i			08/10/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1010</u>		
112 New Rd	Tolland	СТ		WEB	Debit Car	rd	
Description Social Networking and Web Development,	Other Supplies				Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes	or Other Candidate(s) N	lame		Office Sought			•
X No					_		\$1,074.75
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Julie Corrado		<u> </u>		08/14/2009	X Check #		
Street Address 22 Charter Oak Pl # 1N	City Hartford	State CT	Zip Code	Purpose of Expenditure RCW	<u>1013</u> Debit Car	rd	
Description Reimbursement for Decorations for 08/21,	/2009 Fundraiser		•		Event # 08212009A	A	
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes X No	or Other Candidate(s) N	lame		Office Sought			\$35.94

	IV. EXPENDITURE	s					
NAME OF COMMITTEE						FILI	NG DUE DATE
Corey For Connecticut						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ittee				•	
Name of Payee Star Capital LLC Street Address	City	State	Zip Code	Date of Payment 08/14/2009 Purpose of Expenditure	Method of Pays	ment	Amount
39 Barry Cir	Bloomfield	СТ		CNSLT	Debit Car	ď	
Description Administrative Services Provided to Comm	nittee and Candidate	1			Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes X No	or Other Candidate(s) N	vame		Office Sought			\$240.00
Name of Payee				Date of Payment	Method of Pays	ment	Amount
LAZ Parking Management, Ltd.				08/17/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1014</u>		
15 Lewis St	Hartford	ст		FNDR	Debit Car	ď	
Description Parking Validations for 06/26/2009 Kickof	f Event		1		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	Name		Office Sought			
X No					_		\$150.00
Name of Payee				Date of Payment	Method of Pays	ment	Amount
The Riverhouse at Goodspeed Station, Inc	I	1		08/20/2009	X Check #		
Street Address	City	State CT	Zip Code	Purpose of Expenditure	1015 Debit Car	'n	
55 Bridge Rd Description	Haddam	СТ		FNDK	Event #	u	
Food and Services for 08/21/2009 Fundra	iser				08212009A		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes X No	or Other Candidate(s) N	Vame		Office Sought			\$1,740.96

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Corey For Connecticut						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee Corey Brinson				Date of Payment 08/25/2009	Method of Pay	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1016</u>		
8E Westview Dr	Bloomfield	СТ		RCW	Debit Car	rd	
Description Printing of Handouts for 08/21/2009 Fund	raiser	-	•		Event # 08212009A	A	
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes X No	or Other Candidate(s) N	Jame		Office Sought			\$78.97
X No							
Name of Payee				Date of Payment	Method of Pay	ment	Amount
TransFirst				09/02/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
12120 Shamrock Plz	Omaha	NE		BNK	X Debit Car	rd	
Description					Event #		
Credit Card Payment Services Fees							
Is this expenditure coordinated with another candidate for which reimbursement is sought?	or Other Candidate(s) N	lame		Office Sought	1		
Yes X No							\$49.17
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Star Capital LLC				09/11/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1019</u>		
39 Barry Cir	Bloomfield	СТ		CNSLT	Debit Car	rd	
Description Administrative Services Provided to Comm	nittee and Candidate		•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes X No	or Other Candidate(s) N	Jame		Office Sought			\$480.00

	IV. EXPENDITURE	S					
NAME OF COMMITTEE						FILI	NG DUE DATE
Corey For Connecticut						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				•	
Name of Payee Corey Brinson				Date of Payment 09/11/2009	Method of Pay	ment	Amount
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1020</u>		
8E Westview Dr	Bloomfield	ст		RCW	Debit Car	rd	
Description Reimbursement for Attendance at Republic	can Fundraiser	-	•		Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes X No	r Other Candidate(s) N	Jame		Office Sought			\$100.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
Timeless Weddings by Georgia, LLC				09/11/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1017</u>		
13 Peachbrooke Dr	South Windsor	ст		FNDR	Debit Car	rd	
Description Event Planning for 08/21/2009 Fundraiser			•	•	Event # 08212009A	A	
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes	r Other Candidate(s) N	Jame		Office Sought	•		\$181.25
X No					1		
Name of Payee				Date of Payment	Method of Pay	ment	Amount
People's Bank	Γ			09/18/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	X Debit Car	rd.	
850 Main St	Bridgeport	СТ		BNK		u	-
Description Banking Fees					Event #		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes X No	r Other Candidate(s) N	Jame		Office Sought			\$60.00

	IV. EXPENDITURES							
NAME OF COMMITTEE						FILI	NG DUE DATE	
Corey For Connecticut						Origi	nal 10/13/2009	
N. Expenses Paid By Committee								
Name of Payee PBDOLLA Entertainment LLC			_	Date of Payment 09/23/2009	Method of Pays	ment	Amount	
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1021</u>			
PO Box 2121	Hartford	СТ		FNDR	Debit Car	rd		
Description Fundraiser Expenses for 09/25/2009 Even	t at Barca's, Hartford				Event # 09252009A	A		
which reimbursement is sought? Yes								
X No					1		\$400.00	
Name of Payee				Date of Payment	Method of Pays	ment	Amount	
Julie Corrado	1	1	1	09/27/2009	X Check #			
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1022</u>			
22 Charter Oak Pl # 1N	Hartford	СТ		RCW	Debit Car	rd		
Description Reimbursement for 09/18/2009 Fundraise	ır				Event # 09182009A	Ą		
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes	or Other Candidate(s) N	lame		Office Sought				
X No					_		\$152.13	
Name of Payee				Date of Payment	Method of Pays	ment	Amount	
Star Capital LLC	Ι		1	09/27/2009	X Check #			
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1023</u>			
39 Barry Cir	Bloomfield	СТ		CNSLT	Debit Car	rd		
Description Administrative Services Provided to Comm	nittee and Candidate				Event #			
Is this expenditure coordinated with another candidate for which reimbursement is sought? Yes X No	or Other Candidate(s) N	Jame		Office Sought			\$618.00	

	IV. EXPENDITURE	S				_	
NAME OF COMMITTEE						FILI	NG DUE DATE
Corey For Connecticut						Origi	nal 10/13/2009
	N. Expenses Paid By Commi	ttee				-	
Name of Payee				Date of Payment	Method of Pay	ment	Amount
PBDOLLA Entertainment LLC				09/28/2009	X Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure	<u>1024</u>		
PO Box 2121	Hartford	СТ		FNDR	Debit Car	rd	
Description		_	•		Event #		
Fundraiser Expenses for 09/25/2009 Even	nt at Barca's, Hartford				09252009A	4	
Is this expenditure coordinated with another candidate f which reimbursement is sought? Yes X No	or Other Candidate(s) N	Jame		Office Sought			\$1,100.00
Name of Payee				Date of Payment	Method of Pay	ment	Amount
People's Bank				09/30/2009	Check #		
Street Address	City	State	Zip Code	Purpose of Expenditure			
850 Main St	Bridgeport	CT	Zip Code	BNK	X Debit Car	rd	
Description	Shagoport				Event #		
Service Charge							
Is this expenditure coordinated with another candidate f	Or Other Candidate(s) N	lame		Office Sought			
which reimbursement is sought?							
X No							\$0.95
					Total of Se	ction N	\$8,331.62

	IV.	. EXPENDITURES						
NAME OF COMMITTE	E						FILING	DUE DATE
Corey For Connecticu	t						Origina	1 10/13/2009
	O. Cam	paign Expenses Paid By Candidate						
Name of Payee Bloomfield 600 Associate	s, L.P.			Date of Paymo 07/22/200		Is Reimbu Claimed?		Amount
Street Address Westview Drive	et Address City State Zip Code						es)	
Purpose of Expenditure	Description Rental of Room at The 600 Apa	artments for 07/25/2009 Fundraiser	Event # 07252009A					\$150.00
Name of Payee BJ's Wholesale Club				Date of Paymo 07/24/200		Is Reimbu Claimed?		Amount
Street Address 507 New Park Ave	State Zip code							
Purpose of Expenditure FNDR	Description Purchase of Food and Supplies	for 07/25/2009 Fundraiser			Event #	4 2009A		\$189.23
Name of Payee Aldi				Date of Paymo 07/24/200		Is Reimbu Claimed?	rsement	Amount
Street Address 801 Silver Ln		City East Hartford	State CT	Zip Code				
Purpose of Expenditure FNDR	Description Purchase of Food and Supplies	for 07/25/2009 Fundraiser			Event #	4 2009A		\$28.92
Name of Payee Dollar Tree Stores, Inc.			1	Date of Paymo 07/24/200		Is Reimbu Claimed?		Amount
Street Address 81 William Shorty Cample	pell St	City Hartford	State CT	Zip Code				
Purpose of Expenditure FNDR	Description Purchase of Food and Supplies	for 07/25/2009 Fundraiser			Event #	4 2009A		\$9.36

	IV	. EXPENDITURES						
NAME OF COMMITTE	ΞE						FILING	DUE DATE
Corey For Connecticu	t						Origina	1 10/13/2009
	O. Cam	paign Expenses Paid By Candidate						
Name of Payee Shaw's Supermarket				Date of Paymo 07/24/200		Is Reimbu Claimed?		Amount
Street Address 46 Kane St		^{City} West Hartford	State CT	Zip Code		X Yo No		
Purpose of Expenditure	Description Purchase of Food for 07/25/20	09 Fundraiser			Event #			\$21.90
Name of Payee FedEx Kinko's				Date of Paymo 07/24/200		Is Reimbu Claimed?		Amount
Street Address 544 Farmington Ave		City Hartford	State CT	Zip Code		X Yo No		
Purpose of Expenditure PRNT	Description Printing of Contributor Certifica	ation Forms			Event #	i		\$14.31
Name of Payee Stop & Shop				Date of Paymo 07/25/200		Is Reimbu Claimed?	rsement	Amount
Street Address 313 Cottage Grove Rd		City Bloomfield	State CT	Zip Code				
Purpose of Expenditure FNDR	Description Ice and food for 07/25/2009 Fu	undraiser			Event #			\$43.62
Name of Payee Stop & Shop	·	1		Date of Paymo 07/25/200		Is Reimbu Claimed?		Amount
Street Address 313 Cottage Grove Rd	Γ	^{City} Bloomfield	State CT	Zip Code				
Purpose of Expenditure	Description Refreshments for 07/25/2009	Fundraiser			Event #			\$61.41

	IV	. EXPENDITURES					
NAME OF COMMITTE	ЗE					FILING	DUE DATE
Corey For Connecticu	ıt					Origina	1 10/13/2009
	O. Cam	paign Expenses Paid By Ca	andidate				
Name of Payee FedEx Kinko's				Date of Payme 08/21/2009	9 Claimed?		Amount
Street Address 544 Farmington Ave		City Hartford	State CT	Zip Code	X Ye		
Purpose of Expenditure	Description Printing of Handouts for 08/21,	/2009 Fundraiser			Event # 08212009A		\$78.97
Name of Payee Republican Party of Conr	necticut			Date of Payme 09/10/2009	Claimad?		Amount
Street Address 321 Ellis St # 501		^{City} New Britain	State CT	Zip Code			
Purpose of Expenditure	Description Attendance at Connecticut Rep	ublicans Federal Fundraiser			Event #		\$100.00
Name of Payee Cos Cob Republican Club)			Date of Payme: 09/20/2009	9 Claimed?		Amount
Street Address 198 Valley Rd		City Cos Cob	State CT	Zip Code			
Purpose of Expenditure	Description Attendance at Cos Cob Republi	can Fundraiser			Event #		\$70.00
Name of Payee FedEx Kinko's				Date of Paymer 09/24/2009	9 Claimed?		Amount
Street Address 544 Farmington Ave		City Hartford	State CT	Zip Code			
Purpose of Expenditure PRNT	Description Printing of Color Handouts and	Contribution Forms			Event #		\$77.91
	•				Total of	Section O	\$845.63

IV. EXPENDITURES										
NAME OF COMMITTEE						FILING DUE DATE				
Corey For Connecticut	Corey For Connecticut Original 10/13/2009									
P. Expenses Incurred on Committee Credit Card										
Name of Issuing Institution			Type of Credit C	ard:						
			Visa	Master Card	Discover	American				
			Other							
Name of Vendor					Date of Transaction	Amount				
Street Address		City	State	Zip Code						
Purpose of Expenditure	Description	L	Į		Event #					
					Total of Section	Р				

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	IV. EXPE	CNDITURES				
NAME OF CC	OMMITTEE				FILING DU	E DATE
Corey For Co	onnecticut				Original 10	/13/2009
	Q. Expenses Incurred By Com	mittee but Not Paid Duri	ng this Period			
Name of Creditor Corey Brinson			Date Incurred 09/18/2009	Event #		Amount Incurred
Street Address 8E Westview I)r	City Bloomfield		State CT	Zip Code	(Estimate or Actual)
Purpose of Expenditure POST	Description Postage Stamps for General Committee Mailings					
Is this expenditure which reimbursem Yes X No	coordinated with another candidate for Other Candida ent is sought?	te(s) Name	Office Sought			\$44.00
Name of Creditor Corey Brinson			Date Incurred 09/20/2009	Event #		Amount Incurred (Estimate or
Street Address 8E Westview I	Dr	City Bloomfield		State CT	Zip Code	Actual)
Purpose of Expenditure ATT *	Expenditure					
Is this expenditure which reimburseme Yes X No	coordinated with another candidate for Other Candida ent is sought?	te(s) Name	Office Sought			\$70.00

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	IV. EXPE	INDITURES				
NAME OF CO	OMMITTEE				FILING DU	E DATE
Corey For Co	onnecticut				Original 10	/13/2009
	Q. Expenses Incurred By Com	mittee but Not Paid Duri	ng this Period			
Name of Creditor Corey Brinson			Date Incurred 09/24/2009	Event #		Amount Incurred
Street Address 8E Westview [Dr	City Bloomfield		State CT	Zip Code	(Estimate or Actual)
Purpose of Expenditure PRNT	Description Printing of Color Handouts and Contribution Forms					
Is this expenditure which reimbursem Yes X No	coordinated with another candidate for Other Candidate for ent is sought?	te(s) Name	Office Sought			\$77.91
Name of Creditor Corey Brinson			Date Incurred 09/25/2009	Event #		Amount Incurred (Estimate or
Street Address 8E Westview I	Dr	City Bloomfield	• • • •	State CT	Zip Code	Actual)
Purpose of Expenditure ATT *						
Is this expenditure which reimbursem Yes X No	coordinated with another candidate for Other Candidate for ent is sought?	te(s) Name	Office Sought			\$190.30

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	IV. EXPE	INDITURES				
NAME OF CO	MMITTEE				FILIN	G DUE DATE
Corey For Co	onnecticut				Origin	al 10/13/2009
	Q. Expenses Incurred By Com	mittee but Not Paid Duri	ng this Period			
Name of Creditor James Hollins			Date Incurred 09/29/2009	Event #		Amount Incurred (Estimate or
Street Address 136C Maple Av	/e	City Hartford		State CT	Zip Code	Actual)
Purpose of Expenditure A-WEB	Description Promotional Services for Campaign on New Social	Media				
Is this expenditure coordinated with another candidate for Other Candidate(s) Name Office Sought which reimbursement is sought?						\$100.00
Name of Creditor Steven Levy			Date Incurred 09/29/2009	Event #		Amount Incurred (Estimate or
Street Address 59 Pecksland F	Rd	City Greenwich	·	State CT	Zip Code	Actual)
Purpose of Expenditure REF	Description Refund of Contribution in Excess of State CEP Limit	ts				
Is this expenditure which reimburseme Yes X No	coordinated with another candidate for Other Candida ent is sought?	te(s) Name	Office Sought			\$100.00
				Total o	f Section Q	\$582.21

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1 age	52	01	50

IV. EXPENDITURES							
NAME OF COMMITTEE					FILI	FILING DUE DATE	
Corev For Connecticut					Origir	nal 10/13/2009	
R. Itemization of Reimburse	ements to Committee Wor	kers and	Consultants				
Name of Worker/Consultant Richard Twilley Secondary Payee United States Postal Service		Date of P 07/10/ Purpose of POST		Method of Paym X Check # 1003 Debit Care		Amount	
Street Address 141 Weston St	City Hartford	-	State CT	Zip Code			
Description Postage Stamps for General Committee Mailings Is this expenditure coordinated with another candidate for which reimbursement is sought?				Event #		* *	
X Yes X No						\$15.84	
Name of Worker/Consultant Richard Twilley Secondary Payee		07/10/	Date of Payment 07/10/2009 Purpose of Expenditure		lent	Amount	
FedEx Kinko's Street Address 196A Trumbull St	City Hartford	PRNT	State CT	Debit Card	1		
Description Printing and Copying Expenses for Filing July 10 Report Event #							
Is this expenditure coordinated with another candidate for Other Candi which reimbursement is sought? Yes X No	idate(s) Name	Office	Sought	•		\$42.02	

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1 age	55	01 50	

IV. EXPENDITURES						
NAME OF COMMITTEE					FILR	NG DUE DATE
Corev For Connecticut					Origir	nal 10/13/2009
R. Itemization of Reimburse	ements to Committee Work	ers and	Consultants			
Name of Worker/Consultant Julie Corrado		Date of Pa 08/14/		Method of Paym	ent	Amount
Secondary Payee Papyrus			f Expenditure	1013	1	
Street Address 201 Evergreen Way Ste 261	^{City} South Windsor			Zip Code		
Description Invitations for 08/21/2009 Fundraiser, plus tax 08212009A						
Is this expenditure coordinated with another candidate for Other Cand which reimbursement is sought? Yes No	idate(s) Name	Office	Sought	-1		\$17.97
Name of Worker/Consultant Julie Corrado					ent	Amount
Secondary Payee Papyrus	1	Purpose o FNDR	f Expenditure	1013	1	
Street Address 201 Evergreen Way Ste 261	^{City} South Windsor		State CT	Zip Code		
Description Invitations for 08/21/2009 Fundraiser, plus tax				Event # 08212009A		
which reimbursement is sought?	idate(s) Name	Office	Sought			
X No						\$17.97

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1 uge	~ .	01 50	

IV. EXPENDITURES						
NAME OF COMMITTEE					FILI	NG DUE DATE
Corev For Connecticut					Origin	nal 10/13/2009
R. Itemization of Reimburse	ements to Committee Work	ers and	Consultants			
Name of Worker/Consultant Corey Brinson Secondary Payee		Date of Pa 08/25/ Purpose o	-	Method of Paym X Check # 1016	ent	Amount
FedEx Kinko's		FNDR		Debit Card	l	
Street Address 544 Farmington Ave	City Hartford		State CT	Zip Code		
Description Printing of Handouts for 08/21/2009 Fundraiser						
Is this expenditure coordinated with another candidate for Other Cand which reimbursement is sought? Yes X No	idate(s) Name	Office	Sought	-		\$78.97
Name of Worker/Consultant Corey Brinson		Date of Pa 09/21/		Method of Paym	ent	Amount
Secondary Payee Connecticut Republicans		Purpose o ATT *	f Expenditure	1020	I	
Street Address 321 Ellis St	^{City} New Britain		State CT	Zip Code		
Description Attendance at Conn. Republicans Federal fundraiser				Event #		
which reimbursement is sought?	idate(s) Name	Office	Sought			
X No						\$100.00

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IV. EXPENDITURES									
NAME OF COMMITTEE						FILING DUE DATE			
Corev For Connecticut 0					Origin	Original 10/13/2009			
R. Itemization of Reimbursements to Committee Workers and Consultants									
Name of Worker/Consultant Julie Corrado Secondary Payee Stop & Shop	dary Payee		'ayment /2009 of Expenditure	Method of Payment X Check # 1022 Debit Card		Amount			
Street Address 1739 Ellington Rd	City South Windsor		State CT	Zip Code					
Description Food and Snacks for 09/18/2009 Fundraiser, plus tax				Event # 09182009A					
Is this expenditure coordinated with another candidate for Other Cand which reimbursement is sought? Yes No	idate(s) Name	Office	Sought	- I		\$52.13			
Name of Worker/Consultant Julie Corrado		Date of Payment 09/27/2009		Method of Paym	lent	Amount			
condary Payee ngela's House Cleaning		Purpose of Expenditure FNDR		1022	1				
Street Address 31 Amity St	City Hartford		State CT	Zip Code					
Description Cleaning Services at 09/18/2009 Fundraiser				Event # 09182009A					
which reimbursement is sought?	idate(s) Name	Office	Sought	1					
X No						\$100.00			
				Total of Se	ection R	\$424.90			

IV. EXPENDITURES									
NAME OF COMMITTEE					FILING DUE DATE				
Corey For Connecticut	Original 10/13/2009								
S. Surplus Distribution of Equipment and Furniture									
Name of Recipient					Original Purchase Amount of Item				
Street Address	City	State	Zip Code						
Description									
Total of Section S									